ANALYSIS OF DATA OF PATIENTS WITH THROMBOTIC MICROANGIOPATHY (TMA) IN THE WAA REGISTRY

M. Mörtzell4, J. Ptak3, C.G. Axelsson7, G. Berlin6, A. Griskevicius1, T. Nilsson5, K. Mokvist5, M. Blaha8, J. Tomaz11, M. Efvergren13, E. Newman14, S. Eloot15, B. Stegmayr4

Vilnius1, Lithuania, Frydek-Mistek3, Hradec Kralove8, Czech Republic, Umea4, Uppsala5, Linkoping6, Orebro7, Huddinge13, Sweden, Coimbra11, Portugal, Concord14, Australia, Gent15, Belgium

Objectives: 75 centres from many countries have applied for a login code to the WAA apheresis registry. 18 centres from 10 countries have been actively entering data at the internet site from 2003 until November 2008. We report on analysis of data of patients who suffered from TMA.

Methods: This is a web-based registry. A link is available from the WAA homepage (www.worldapheresis.org). So far data from 2,495 patients (16067 procedures) have been included. A median of 6 treatments have been performed (range 1-140). Mean age 51 y (range 1-94 years; 45% women). This registry contains data of 386 procedures in 61 patients with TMA.

Results: The mean value of their age was 46 years (range 11-85 years), of these 57% were women. In 72% of them treatment was due to acute indication, while longterm indication was given in 28%. Blood access: peripheral vessels (57%), central dialysis catheter through jugular (13%) or subclavian veins (13%), femoral vein (13%) and other (4%). Plasma exchange was performed by centrifugation in 95% and filtration in 5%. Citrate was used for anticoagulation in 97% of the procedures. Fresh frozen plasma was mainly used as replacement fluid (63%), cryosupernatant plasma (11.5%) and albumin (12%), liquid stored plasma (1.5%). Adverse events (AE) were registered in 10.6% of the procedures which was more than for the general apheresis population (RR 1.85, CI 1.37-2.49). In case of AE, they were graded as mild (13%), moderate (69%) or severe (18%). Patients with TMA also had more moderate (RR 2.59, CI 1.8-3.8) and severe AEs (RR 3.6, CI 1.7-7.8). No death occurred due to treatment. The procedures were interrupted in 4% of cases. Most frequent AEs were urticaria (50%) and hypotension (17%). Bronchospasm and/or anaphylactic shock was present in 2 patients and another suffered from TRALI. At admission 32% were bedridden and needed to be fed. Survival data is not finished vet.

Conclusions: Patients with TMA had an increased risk for moderate and severe adverse events compared to the general apheresis population. Many patients were severely ill at admission. An update of the registry will enable more extensive evaluation of the data.