

## New Onset Thrombocytopenia

- Hemodilution
- Postoperative thrombocytopenia: early-onset postoperative thrombocytopenia is physiological and inevitable
  - Thrombocytopenia associated with CABG or cardiac assist device
- Post transfusion purpura
  - Sudden drop in platelet developing usually five to ten days after receiving platelet-containing blood products
  - Diagnosis is based on demonstration of anti-HLA alloantibodies in the patient's serum. Many cases will have spontaneous remission in a few weeks
  - Since clinical course cannot be predicted, treatment with IVIG and/or steroids should be instituted early
  - Platelet transfusion should generally be avoided.
- Passive alloimmune thrombocytopenia
  - Preformed antiplatelet antibodies (anti-HPA-1a) in donor blood products
  - Onset is within hours of transfusion in contrast to PTP
  - Platelet counts can fall < 10K
  - Spontaneous platelet count recovery can occur in about five days
  - Based on case reports, IVIG, steroids, and platelet transfusion have been successful
- Acute thrombosis
  - Platelet drop occurs as early as within 12 hours of thrombus formation and can continue to drop for 24–36 hours
  - Recovery occurs usually in three days
    - Therefore, it is crucial to continue heparin as long as hemostasis remains intact.
- Liver disease
- Alcohol intoxication
  - In general is mild and self-limiting with resolution in five to seven days of abstinence
- Viral
- Sepsis and DIC
- Thrombotic microangiopathies
- Heparin induced thrombocytopenia
- Drug induced immune thrombocytopenia (DITP)
- BM infiltration by leukemia, lymphoma and other malignancies as well as myelodysplastic syndrome (MDS)
- Idiopathic thrombocytopenic purpura
- Thrombocytopenia in pregnancy