Romiplostim

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Deep vein thrombosis: case report

A 60-year-old woman developed deep vein thrombosis while receiving romiplostim.

The woman, who had a history of idiopathic thrombocytopenic purpura and type II diabetes, started receiving romiplostim following a diagnosis of metastatic rectal cancer. She received SC romiplostim 50µg (1 µg/kg) on day 1, once a week, and her dosage was gradually increased to 300µg (6 µg/kg). She started chemotherapy with capecitabine and oxaliplatin on day 48. During her third course of chemotherapy she developed a sharp pain while walking, and swelling was observed in her left lower limb [duration of treatment to reaction onset not stated]. On day 106, a venous ultrasound of her legs and an abdominopelvic CT scan were carried out; thrombi were detected in the area from her left external iliac vein though to her superficial femoral vein. She was diagnosed with deep vein thrombosis.

The woman was hospitalised for emergency treatment, and an inferior vena cava filter was installed. She received warfarin, and romiplostim and chemotherapy were temporarily withdrawn. The swelling and pain in her lower limbs improved, and romiplostim was restarted at a dosage of 200µg. She later restarted chemotherapy while continuing to receive warfarin.

Author comment: Although it is thought that the cause of the deep vein thrombosis was due to the presence of cancer and antiphospholipid antibody syndrome complications, it is impossible to negate the influence that the administration of romiplostim may have had on the formation of thrombi.

Yamada M, et al. Concomitant use of romiplostim and chemotherapy for advanced rectal cancer associated with idiopathic thrombocytopenic purpura. Nihon Shokakibyo Gakkai Zasshi / Japanese Journal of Gastroenterology 111: 521-528, No. 3, Mar 2014 [Japanese; summarised from and English translation] - Japan