

FEBRILE THROMBOCYTOPENIA EXPERIENCED IN GOVERNMENT TERTIARY CARE HOSPITALS

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ABSTRACT

To evaluate clinical profile of thrombocytopenia and to assess the clinical complications associated with fever and thrombocytopenia. This study was done on patients, who were admitted to Bowring and Lady Curzon hospitals. Prospectively collected a series of 100 patients with fever and thrombocytopenia. Age and sex distribution; In this study male (68%) female(32%). Platelet count and bleeding; Of 100 patients four had bleeding manifestations. There is no correlation between platelet count and bleeding. Degree of thrombocytopenia in various diseases; (1) Viremia; Among infectious cases viremia including dengue accounted for the vast majority(12.0%) . In this study out of 100 cases viremia including dengue accounts for 38 cases. Dengue; In our study dengue caused severe thrombocytopenia. Twenty patients out of 40 cases had count <50,000/mm3 (3) Malaria; In our study malaria caused mild-to-moderate thrombocytopenia with counts remaining between 56000 to 1.5 lacs in most cases. Bleeding manifestations; only five patients presented with bleeding manifestations. Shortest duration of fever is 5.10 days and longest is 13 days. Platelet count started increasing from 2nd day of admission to discharge day of admission with relative treatment. The effective therapeutic management is more essential for early diagnosis and management of the patients.

KEYWORDS: Dengue, Thrombocytopenia, Manifestations, Bleeding