

# Guidelines For Schools Clubs Playgroups

Understanding the child or teenager with ITP

### General guidelines for the management of a child with ITP

### What is ITP

Immune Thrombocytopenic (formerly known as Idiopathic Thrombocytopenic Purpura) is a non-contagious blood disorder in which the body's immune system destroys the blood platelets. The platelets, which normally form an initial plug in the blood clotting process, are essential to stop bleeding and prevent bruising following an injury. ITP is a benign disease and the majority of children recover quickly and spontaneously. A few may have the chronic form (i.e. >6 months).

### What are the symptoms?

Pupils with ITP are susceptible to bruising which may even arise from mild pressure to the skin and can sometimes appear spontaneously. Bruises vary from small reddish-brown ones to those that are large and multi-coloured, but are often painless. There may also be petechiae – a rash of red pin-prick blood spots caused by leaking capillaries. Nose bleeds are a common symptom of ITP and, less frequently, bleeding from mouth and gums. Girls can experience extremely heavy periods.

### How is ITP managed?

As treatment is palliative rather than curative, most children (even with very low platelet counts) will be managed by a 'wait and watch' strategy. For those with severe symptoms the options include steroids, intravenous immunoglobulin and, very rarely in children, splenectomy (removal of the spleen) - all of which have side effects. Pupils on high dose steroids may experience sudden mood swings, show a lack of concentration and appear hyperactive. They may also develop an increased appetite and become prone to infection. In asplenic children, (i.e. where the spleen has been removed), any infection, however minor, must receive urgent medical attention. Girls (even young girls) experiencing heavy periods may be prescribed a hormone preparation (ie, contraceptive pill) to control the blood loss or period frequency.

### Nose bleeds

To stop a nosebleed, pinch the nose just below the bone, above the nostrils, keeping the child still (if a swimming nose clip is available use this in preference as it gives a gentle, even pressure). After five minutes remove hand or nose clip and repeat this procedure 3 or 4 times if necessary. Once the bleeding has stopped keep the child quiet and still for a further five minutes. Afterwards, carefully wash the dried blood away to help limit the irritation and to avoid the temptation for the child to pick the scab. Ice packs are also useful to stem blood flow.

### When to seek medical help

- If bleeding cannot be stopped, following a 30 minute or severe nosebleed, lost tooth or other injury.
- Following a head injury, particularly if a child has been stunned.
- Any injury which shows swelling, such as a sprain or strain.

N.B. In any accident requiring emergency treatment, it is essential that hospital staff are informed that the child has ITP and is seen quickly. Pupils may wear alert jewellery or carry a card giving information about their condition and any drugs they are taking.

### When to contact parents

- Contact parents in any of the above cases, in addition to any previous parental arrangement.
- Any sign of infection or fever, especially in an asplenic pupil or one on steroids.
- A pupil on steroids is at a greatly increased risk from chicken pox which can be severe, and in rare cases, life threatening. Contact with chicken pox should be assiduously avoided, or treatment sought.

In most respects the ITP pupil is well and can be treated normally. Although serious bleeding in ITP is very rare, it can be a frightening disease for both pupil and parent. Anxiety may be lessened if parents are assured that the school staff, if in doubt, will err on the side of caution. Schools may require additional emergency contact numbers (such as grandparents) to ensure that a close relative can be quickly summoned if parents are at work. Many paediatricians are

willing for their telephone number to be given to the school for emergency advice and this facility should be discussed with the parents.

### **Activity restrictions**

There is no reason for the pupil to be kept away from school, and apart from attending the hospital for regular blood tests should cause little or no disruption to the school routine. Activities which involve bodily contact sports should be avoided, as should those in which there could be a fall from any height. It is helpful if PE staff can offer an alternative such as being a referee. The pupil may be reluctant to expose their bruises when wearing PE or swimming kit. A younger child with ITP will need to be supervised in the playground and those with serious symptoms may need to spend playtime indoors with a suitable friend.

### **Informing staff**

The Association can supply a Pupil's Factsheet to pin up in the staff room alerting all staff to the child's ITP. It is essential that teachers or office staff responsible for First Aid understand about ITP, what symptoms the child/teenager is likely to have, and when the parents should be called, or pupil taken to A&E. Girls can become very anxious about 'flooding' when they have periods, and it is helpful if they can approach an appointed female member of staff if they run into difficulties (or if starting their first period during school time). Suspicion by other parents about an ITP child's bruises need to be handled diplomatically.

### **Further information**

Want to know more about ITP? You can download our new ITP Toolkit titled 'Making the right choices in ITP management and care', please scan this QR code.



### **The ITP Support Association**

If you require any further information about ITP, do please contact us. We fund research into ITP and are always grateful for donations. If your school can run a fundraising event to support our charity and raise awareness we would be delighted to hear from you.

The ITP Support Association

The Platelet Mission, Kimbolton Road,

Bolnhurst, Beds. MK44 2EL

Tel: 01234 376559

info@itpsupport.org.uk www.itpsupport.org.uk

Registered Charity Number 1064480
Revised 2022

This child (name)	Photo
On no account administer aspirin, products containing aspirin, or ibuprofen. Paracetamol or Calpol may be given.	i noto
ITP is not contagious.	

### What is ITP

Idiopathic Thrombocytopenic Purpura is a blood disorder in which the body's immune system destroys the platelets in the blood. Platelets act as the initial plug, an essential factor in the clotting mechanism.

Features associated with ITP can be an inability to prevent bleeding after an injury, large multicoloured bruising, (often without apparent cause), numerous small reddish brown bruises, frequent nosebleeds, mouthbleeds, petachiae - a rash of red, pin-prick sized spots on the skin caused by leaking capillaries. and in teenage girls, unusually heavy periods. This rare disorder can appear in children and adults of any age without known cause. Most children do not feel unwell despite their tendency to bleed.

### **Treatment**

Many children require no treatment (which can produce unacceptable side effects) even with very low counts, but for those who suffer active bleeding or severe symptoms, the main treatment options are steroids and immunoglobulin. **NB** If a child on steroids catches chicken pox, consult a doctor immediately.

### **Injections and Vaccinations**

Intramuscular injections of all kinds must be avoided, but subcutaneous (under the skin) and intravenous (directly into the vein) injections are permissible.

For individuals on high dose steroids or who have had immunoglobulin during the last three months, live vaccines pose a risk of disseminated infection, and non-live vaccines may not be effective.

### First Aid

To stop a nosebleed pinch the nose just below the bone, above the nostrils with even gentle pressure. After five minutes remove the hand and keep the patient still for another five minutes. Ice packs are also useful to stem blood flow.

Seek medical help for any bleeding which cannot be stopped, if any injury shows swelling such as a sprain or strain, or if there is any sign of infection or fever, particularly in children who are on steroids. or more rarely, have had their spleens removed.

In any accident requiring medical treatment, it is most important that medical staff are informed that the patient has ITP, and show them this leaflet.

Bleeding into the brain is extremely rare, but the signs are usually obvious - intense headache, drowsiness leading to a loss of consciousness, vomiting and weakness of one side of the body. Seek immediate medical help and urgently request a brain scan.

## Pupil's details (please complete) Known medical condition. Known allergies. Drugs currently taken. Emergency contact. tel. or tel. Alternative contact tel. G.P. tel.

Pupil's factsheet

Hospital Consultant.....tel.....tel.....