Thrombotic thrombocytopenic purpura

Thrombotic thrombocytopenic purpura is a rare disorder that causes blood clots (thrombi) to form in small blood vessels throughout the body. These clots can cause serious medical problems if they block vessels and restrict blood flow to organs such as the brain, kidneys, and heart. Resulting complications can include neurological problems (such as personality changes, headaches, confusion, and slurred speech), fever, abnormal kidney function, abdominal pain, and heart problems.

Blood clots normally form to prevent excess blood loss at the site of an injury. In people with thrombotic thrombocytopenic purpura, clots develop in blood vessels even in the absence of injury. Blood clots are formed from clumps of cell fragments called platelets, which circulate in the blood and assist with clotting. Because a large number of platelets are used to make clots in people with thrombotic thrombocytopenic purpura, fewer platelets are available in the bloodstream. A reduced level of circulating platelets is known as thrombocytopenia. Thrombocytopenia can lead to small areas of bleeding just under the surface of the skin, resulting in purplish spots called purpura.

This disorder also causes red blood cells to break down (undergo hemolysis) prematurely. As blood squeezes past clots within blood vessels, red blood cells can break apart. A condition called hemolytic anemia occurs when red blood cells are destroyed faster than the body can replace them. This type of anemia leads to paleness, yellowing of the eyes and skin (jaundice), fatigue, shortness of breath, and a rapid heart rate.

There are two major forms of thrombotic thrombocytopenic purpura, an acquired (noninherited) form and a familial form. The acquired form usually appears in late childhood or adulthood. Affected individuals may have a single episode of signs and symptoms, or they may recur over time. The familial form of this disorder is much rarer and typically appears in infancy or early childhood. In people with the familial form, signs and symptoms often recur on a regular basis.

Frequency

The precise incidence of thrombotic thrombocytopenic purpura is unknown. Researchers estimate that, depending on geographic location, the condition affects 1.7 to 11 per million people each year in the United States. For unknown reasons, the disorder occurs more frequently in women than in men. The acquired form of thrombotic thrombocytopenic purpura is much more common than the familial form.

Genetic Changes

Mutations in the ADAMTS13 gene cause the familial form of thrombotic thrombocytopenic purpura. The ADAMTS13 gene provides instructions for making
an enzyme that is involved in the normal process of blood clotting. Mutations in this gene lead to a severe reduction in the activity of this enzyme. The acquired form of thrombotic thrombocytopenic purpura also results from a reduction in ADAMTS13 enzyme activity; however, people with the acquired form do not have mutations in the ADAMTS13 gene. Instead, their immune systems often produce specific proteins called autoantibodies that block the activity of the enzyme.

A lack of ADAMTS13 enzyme activity disrupts the usual balance between bleeding and clotting. Normally, blood clots form at the site of an injury to seal off damaged blood vessels and prevent excess blood loss. In people with thrombotic thrombocytopenic purpura, clots form throughout the body as platelets bind together abnormally and stick to the walls of blood vessels. These clots can block small blood vessels, causing organ damage and the other features of thrombotic thrombocytopenic purpura.

Researchers believe that other genetic or environmental factors may contribute to the signs and symptoms of thrombotic thrombocytopenic purpura. In people with reduced ADAMTS13 enzyme activity, factors such as pregnancy, surgery, and infection may trigger abnormal blood clotting and its associated complications.

**Inheritance Pattern**

The familial form of thrombotic thrombocytopenic purpura is inherited in an autosomal recessive pattern, which means both copies of the gene in each cell have mutations. The parents of an individual with an autosomal recessive condition each carry one copy of the mutated gene, but they typically do not show signs and symptoms of the condition.

The acquired form of thrombotic thrombocytopenic purpura is not inherited.

**Other Names for This Condition**

- Familial Thrombotic Thrombocytopenia Purpura
- Microangiopathic hemolytic anemia
- Moschkowitz Disease
- Purpura, Thrombotic Thrombocytopenic
- Thrombotic microangiopathy, familial
- TTP

**Diagnosis & Management**

**Genetic Testing**

- Genetic Testing Registry: Upshaw-Schulman syndrome
  https://www.ncbi.nlm.nih.gov/gtr/conditions/C1268935/
Other Diagnosis and Management Resources

- MedlinePlus Encyclopedia: Blood Clots
  https://medlineplus.gov/ency/article/001124.htm
- MedlinePlus Encyclopedia: Hemolytic anemia
  https://medlineplus.gov/ency/article/000571.htm
- MedlinePlus Encyclopedia: Purpura
  https://medlineplus.gov/ency/article/003232.htm
- MedlinePlus Encyclopedia: Thrombocytopenia
  https://medlineplus.gov/ency/article/000586.htm
- MedlinePlus Encyclopedia: Thrombotic thrombocytopenic purpura
  https://medlineplus.gov/ency/article/000552.htm

General Information from MedlinePlus

- Diagnostic Tests
  https://medlineplus.gov/diagnostictests.html
- Drug Therapy
  https://medlineplus.gov/drugtherapy.html
- Genetic Counseling
  https://medlineplus.gov/geneticcounseling.html
- Palliative Care
  https://medlineplus.gov/palliativecare.html
- Surgery and Rehabilitation
  https://medlineplus.gov/surgeryandrehabilitation.html

Additional Information & Resources

MedlinePlus

- Encyclopedia: Blood Clots
  https://medlineplus.gov/ency/article/001124.htm
- Encyclopedia: Hemolytic anemia
  https://medlineplus.gov/ency/article/000571.htm
- Encyclopedia: Purpura
  https://medlineplus.gov/ency/article/003232.htm
- Encyclopedia: Thrombocytopenia
  https://medlineplus.gov/ency/article/000586.htm
• Encyclopedia: Thrombotic thrombocytopenic purpura
  https://medlineplus.gov/ency/article/000552.htm

• Health Topic: Platelet Disorders
  https://medlineplus.gov/plateletdisorders.html

Genetic and Rare Diseases Information Center

• Thrombotic thrombocytopenic purpura, acquired
  https://rarediseases.info.nih.gov/diseases/4607/thrombotic-thrombocytopenic-purpura-acquired

• Thrombotic thrombocytopenic purpura, congenital
  https://rarediseases.info.nih.gov/diseases/9430/thrombotic-thrombocytopenic-purpura-congenital

Additional NIH Resources

• National Heart, Lung, and Blood Institute
  https://www.nhlbi.nih.gov/health-topics/thrombotic-thrombocytopenic-purpura

Educational Resources

• Boston Children's Hospital: Thrombocytopenia
  http://www.childrenshospital.org/conditions-and-treatments/conditions/t/thrombocytopenia

• Disease InfoSearch: Thrombotic thrombocytopenic purpura, congenital
  http://www.diseaseinfosearch.org/Thrombotic+thrombocytopenic+purpura%2C+congenital/7089

• MalaCards: thrombotic thrombocytopenic purpura
  http://www.malacards.org/card/thrombotic_thrombocytopenic_purpura

• Merck Manual Consumer Version: Thrombocytopenia
  https://www.merckmanuals.com/home/blood-disorders/platelet-disorders/overview-of-thrombocytopenia

• Orphanet: Thrombotic thrombocytopenic purpura
  https://www.orpha.net/consor/cgi-bin/OC_Exp.php?Lng=EN&Expert=54057

Patient Support and Advocacy Resources

• National Organization for Rare Disorders
  https://rarediseases.org/rare-diseases/thrombotic-thrombocytopenic-purpura/

• Platelet Disorder Support Association
  https://www.pdsa.org/
ClinicalTrials.gov

- ClinicalTrials.gov
  https://clinicaltrials.gov/ct2/results?cond=%22thrombotic+thrombocytopenic+purpura%22+OR+%22Purpura%22+C+Thrombocytopenic%22

Scientific Articles on PubMed

- PubMed
  https://www.ncbi.nlm.nih.gov/pubmed?term=%28Purpura,+Thrombotic+Thrombocytopenic%5BMAJR%5D%29+AND+%28thrombotic+thrombocytopenic+purpura%5BTI%5D%29+AND+review%5Bpt%5D+AND+english%5Bla%5D+AND+human%5Bmh%5D+AND+%22last+1080+days%22%5Bdp%5D

OMIM

- THROMBOTIC THROMBOCYTOPENIC PURPURA, CONGENITAL
  http://omim.org/entry/274150

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Reprinted from Genetics Home Reference:  
  https://ghr.nlm.nih.gov/condition/thrombotic-thrombocytopenic-purpura  

Reviewed: October 2008  
Published: June 19, 2018  

Lister Hill National Center for Biomedical Communications  
U.S. National Library of Medicine  
National Institutes of Health  
Department of Health & Human Services