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Individualized prognosis in childhood immune thrombocytopenia

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CONCLUSIONS

Prognosis is a key to improve care in childhood ITP. In this dissertation, we show that it is possible to make individualized predictions of the prognosis in childhood ITP at the time of diagnosis. We present two novel tools (prediction models) for prognosis. Our data indicate that heterogeneity of patients can be used to make predictions about spontaneous recovery and favorable response to IVIg. More detailed molecular analysis could be investigated to detect persistent and chronic ITP disease courses and even better distinguish and discriminate these patients. The evidence-based care in ITP can be improved by collaboration between clinical researchers and scientists, including laboratory and statistical experts, improved study designs, and standardized reporting of key clinical characteristics.

