[19] Eskisehir Osmangazi University School of Medicine, Division of Pediatric Hematology&Oncology
[20] Gazi University School of Medicine, Division of Pediatric Hematology
[21] Gaziantep University School of Medicine, Division of Pediatric Hematology
[22] Hacettepe University School of Medicine, Division of Pediatric Hematology
[23] Istanbul Medeniyet University School of Medicine, Prof. Dr. Suleyman Yalcin City Hospital, Pediatric Hematology&Oncology Unit
[24] Istanbul University-Cerrahpasa School of Medicine, Division of Pediatric Hematology&Oncology
[25] Istanbul University Oncology Institute, Division of Pediatric Hematology&Oncology
[26] Kanuni Sultan Suleyman Training and Research Hospital, Pediatric Hematology&Oncology Unit
[27] Karadeniz Technical University School of Medicine, Division of Pediatric Hematology
[28] Kocaeli University School of Medicine, Division of Pediatric Hematology
[29] Koc University School of Medicine, Division of Pediatric Hematology&Oncology
[30] Losante Child and Adult Hospital, Pediatric Hematology Unit
[31] Manisa Celal Bayar University School of Medicine, Division of Pediatric Hematology
[32] Marmara University, Istanbul Pendik Training and Research Hospital, Division of Pediatric Hematology&Oncology
[33] Mersin University School of Medicine, Division of Pediatric Hematology
[34] Necmettin Erbakan University, Meram School of Medicine, Division of Pediatric Hematology &Oncology
[35] On dokuz Mayis University School of Medicine, Division of Pediatric Hematology
[36] Pamukkale University School of Medicine, Division of Pediatric Hematology
[37] Sakarya University School of Medicine, Division of Pediatric Hematology&Oncology
[38] Samsun Medicalpark Hospital, Pediatric Hematology Unit
[39] Sancaktepe Training and Research Hospital, Pediatric Hematology Unit
[40] SBU Bursa Yuksek Ihtisas Training and Research Hospital, Pediatric Hematology&Oncology Unit
[41] SBU Okmeydanı Training and Research Hospital, Pediatric Hematology Unit
[42] SBU Sisli Hamidiye Etfal Training and Research Hospital, Pediatric Hematology Unit
[43] SBU Van Training and Research Hospital, Pediatric Hematology Unit
[44] Umraniye Training and Research Hospital, Pediatric Hematology&Oncology Unit
[45] Van Yuzuncu Yil University School of Medicine, Division of Pediatric Hematology&Oncology
[46] Yeditepe University School of Medicine, Division of Pediatric Hematology&Oncology
[47] Dokuz Eylul University School of Medicine, Division of Pediatric Hematology

Objective: A questionnaire form was prepared by the Turkish Pediatric Hematology Society- Subcommittee of Hemostasis, Thrombosis and Hemophilia to determine the current approaches in the diagnosis and treatment of childhood ITP in our country. Our aim was to share the results of this study, and to do new, national, multicenter prospective studies. **Methodology:** This form, which consists of twenty questions with multiple choices, but a brief explanation is requested when there is a different approach other than the options given, was sent to all pediatric hematologists via e-mail. **Results:** The response was obtained from 55 hematologists experienced in ITP from 47 centers in total. Due to space constraints, this summary could not present the survey questions and answers. **Conclusion:** In conclusion, the approaches for diagnosis and management of childhood ITP differ between centers.

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THE CLINICAL PICTURE AND LABORATORY WORK-UP OF GLANZMANN THROMBASTHENIA

Joanna Zdziarska [1], Teresa Iwaniec [1], Ewa Wypasek [2], Tomasz Sacha [1]

[1] Department of Haematology, Jagiellonian University Medical College, Krakow, Poland
[2] Laboratory of Molecular Biology, John Paul II Hospital, 31-202 Krakow, Poland; Faculty of Medicine and Health Sciences, Andrzej Frycz Modrzewski Krakow University, 30-705 Krakow, Poland

Case report: We present the clinical picture and laboratory work-up of Glanzmann thrombasthenia, based on a group of 7 patients. Bleeding history was significant in all patients and included both mucosal and postsurgery bleeds. Laboratory analysis revealed decreased or absent platelet aggregation (< 10%) with all physiologic agonists (ADP, collagen, epinephrin, arachidonic acid) together with normal agglutination response to ristocetin. In three patients diagnosis was confirmed by flow cytometry.

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THE USE OF ROMIPLOSTIM IN AN INFANT

Fatma Burçin KURTİPEK, Turan BAYHAN, Vildan ÇULHA, Neşe YARALI

Ankara City Hospital

Case report: Immune thrombocytopenia (ITP) is the most common platelet disorder in children, peaking between the