

CLOZAPINE INDUCED THROMBOCYTOPENIA – CLINICAL CASE REPORT

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Clozapine belongs to the group of atypical antipsychotics with superior efficacy for the management of treatment resistant schizophrenia compared to the treatment with typical antipsychotic drugs. Commonly reported hematological side effect of clozapine include agranulocytosis, neutropenia, leucopenia and eosinophilia which can occur in 1% - 2% of treated patients. Thrombocytopenia is a reduction in blood platelet count below the lower limit of normal (<150) and represent a serious side effect which could lead to severe complications including dangerous cerebral hemorrhage. There is only few case reports on clozapine induced thrombocytopenia. According to some authors, clozapine induced thrombocytopenia could be immune mediated because of common side effect of eozinophilia.

Here we report a case of two patients (out of seven who were treated with clozapine) with clozapine induced thrombocytopenia. Patients were diagnosed with paranoid schizophrenia upon first admission to the hospital, twenty years ago and were resistant to treatment with various typical antipsychotics. (promazine, haloperidol, levopromazine) during the course of long treatment. Since the symptoms of paranoid schizophrenia persisted and deteriorated, as well as, there was little improvement in their mental state, clozapine was introduced in therapy (initial dose of 25 mg then up to 200 mg – 300 mg daily). Their mental status improved in the course of treatment with clozapine, as well as, paranoid symptoms subsided. Two patients out of seven treated with clozapine in maximal daily dose of 200 mg - 300 mg developed thrombocytopenia as side effect and the drug was excluded form the therapy. The blood platelet count returned to normal after several weeks.

This case report shows rare, but serious side effect of clozapine induced thrombocytopenia which should be carefully followed and reported in future cases.