

A systemic review and network meta-analysis for the establishment of a clinically meaningful hierarchy of treatments for newly diagnosed immune thrombocytopenia (ITP)



Systematic review

21 randomized controlled trials

1898 adult patients with newly diagnosed primary ITP

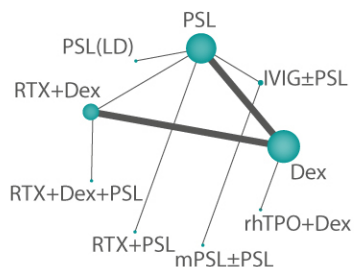


Network meta-analysis

Indirect comparison between treatments

Primary endpoint

Sustained response comparison



platelet $>30 \times 10^9/L$ for 3-6 months after completion of treatments

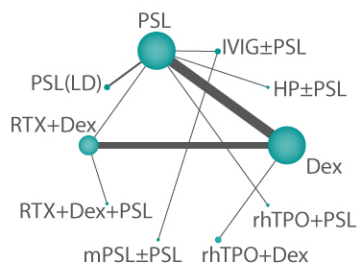


SUCRA

rhTPO+Dex	97.1%
RTX+Dex	81.3%
RTX+Dex+PSL	81.1%
Dex	56.2%
PSL	41.5%

Secondary endpoint

Overall response comparison



platelet $>30 \times 10^9/L$ for 2-4 weeks after the initiation of the up-front treatment



SUCRA

rhTPO+PSL	98.8%
rhTPO+Dex	82.4%
RTX+Dex+PSL	74.7%
RTX+Dex	54.3%
Dex	49.3%
PSL	31.1%

- rhTPO agonist containing regimens may be beneficial up-front therapies in addition to conventional corticosteroids monotherapies