Letter to the Editor

Early-onset Thrombocytopenia in the Chemotherapy of Testicular Teratoma

A. PEDRAZZINI,* F. CAVALLI,* J. KISER† and A. GOLDHIRSCH†

*Division of Oncology, Ospedale San Giovanni, 6500 Bellinzona, Switzerland and †Institute for Medical Oncology, Inselspital, 3010 Bern, Switzerland

WE READ with interest the demonstration of a reduced platelet survival following chemotherapy with vinblastine, bleomycin and cis-platinum for testicular teratoma [1].

We have occasionally observed the same occurrence and other authors have documented it [2, 3]. This early-onset transient thrombocytopenia should be exactly recognized, since otherwise chemotherapy may be prematurely and unduly terminated.

Recently we were able to follow daily the platelet count in 8 patients receiving combination chemotherapy for advanced testicular teratoma. Three patients were treated according to our previous protocol, which started with 2 courses of vinblastine/bleomycin followed later on by 2 cycles with adriamycin/cis-platinum [4]. The last 5 patients were treated according to our current protocol as follows: vinblastine 5.25 mg/m² on days 1 and 2, bleomycin 20 mg/m² daily in continuous infusion on days 1-4 and cis-

platinum 120 mg/m² on day 5. In all 8 patients there was a decrease in the platelet count of >50% with a median nadir of 40×10^4 /mm³ (range $2-10 \times 10^4$ /mm³). The nadir occurred in 1 case by day 3, in 5 cases by day 4 and in 2 cases by day 5 (prior to the administration of *cis*-platinum). In the 5 patients receiving *cis*-platinum on day 5 there was nevertheless a rapid recovery of the platelet count after cessation of the bleomycin infusion, which was generally completed only a few hours before the injection of *cis*-platinum.

The authors of the report published in your journal conclude that this early-onset transient thrombocytopenia may be attributable to a synergistic effect of the 3 drugs [1]. However, in view of the combinations used on our patients we are able to eliminate cis-platinum as a component of this synergistic action. We believe, therefore, that the synergistic mechanism which leads to this early-onset transient thrombocytopenia is limited to vinblastine and bleomycin.

REFERENCES

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