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POSTER ABSTRACTS

301.VASCULATURE, ENDOTHELIUM, THROMBOSIS AND PLATELETS: BASIC AND TRANSLATIONAL

Anti-GPIb/IX Autoantibodies Are Associated with Poor Response to Dexamethasone Combined with Rituximab Therapy in Primary Immune Thrombocytopenia Patients

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This retrospective study aimed to evaluate whether anti-glycoproteins (GPs) autoantibodies can be used as predictors of response to high-dose dexamethasone combined with rituximab (DXM-RTX) in the treatment of primary immune thrombocytopenia (ITP) patients.

According to the screening criteria (Figure. 1), 126 ITP patients, including 85 (67.5 %) women and 41 (32.5 %) men, were included in the analyses, with a median age was 32 (10 - 80) years, the median duration of disease was 18 (0.1-228.0) months, and the median platelet count at baseline was 6.0 (0-28.0) \times 10 9 /L.

As shown in Table 1, 56.4% (71/126) of patients responded to DXM-RTX at four weeks, including 43 CR and 28 partial responses. The median time to response (TTR) of 71 responded patients was seven days (range: 4-28 days). The OR rate of ITP patients with anti-GPIb/IX positivity was 47.6% (40/84), while that of anti-GPIb/IX autoantibody-negativity was 73.8% (31/42) (χ^2 = 7.808, P = 0.005). In line with the OR rate, a significant difference was found in the CR rate between ITP patients with anti-GPIb/IX positivity and anti-GPIb/IX autoantibody-negativity (26.2% vs. 50.0%, $\chi^2 = 7.061$, P = 0.008). At six months of DXM-RTX therapy, 54.0% (68/126) of patients responded to DXM-RTX, with 39 (31.0%) of CR. The CR and OR rates of anti-GPIb/IX autoantibody-positive patients were also significantly lower than those of negative patients (CR: 45.2% vs. 71.4%, $\chi^2 = 7.731$, P = 0.005; OR: 25.0% vs. 42.9%, $\chi^2 = 4.178$, P = 0.041). No significant difference (P > 0.05) was found in OR and CR rates between anti-GPIIb/IIIa autoantibody positive and negative patients at four weeks and six months of DXM-RTX therapy. At four weeks of DXM-RTX therapy, a significant difference in OR rate was found among the patients with anti-GPlb/IX single-

positivity (37.5%), double-positivity (51.7%), double-negativity (68.4%), and anti-GPIIb/IIIa single-positivity (78.3%) ($\chi^2 = 9.617$, P = 0.022) (Table 2). The further comparison revealed a higher resistance to DXM-RTX in patients with anti-GPIb/IX singlepositivity than patients with anti-GPIIb/IIIa single-positivity (OR: 37.5% vs. 78.3%; P < 0.05). A similar trend was also found in the six-month OR rate (29.2% vs. 78.3%, P < 0.05). An analysis of the CR rate at four weeks of therapy showed a significant difference among the four groups ($\chi^2 = 8.523$, P = 0.036) but no significant difference after Bonferroni's correction (P > 0.05). No significant difference (P = 0.119) was found in the CR rate among the four groups at six months of combined therapy. In addition, the NR rate of patients with anti-GPIb/IX single-positivity also increased significantly in comparison with the patients with anti-GPIIb/IIIa single-positivity at four weeks (62.5% vs.21.7%, P < 0.05) and six months (70.8% vs.21.7%, P < 0.05) 0.05) of combined therapy.

Multivariate logistic regression analyses revealed that age, sex, duration of disease, liver function, and baseline platelet count were not associated with patient response to DXM-RTX at 4 weeks and 6 months (Table 3). Anti-GPIb/IX autoantibodies and megakaryocytes of DXM-RTX therapy at both 4 weeks and 6 months were associated with the OR rate of patients, with an odds ratio of 0.194 (P = 0.003, 95% CI: 0.065-0.575) at 4 weeks and 0.189 (P = 0.003, 95% CI: 0.064-0.563) at 6 months by comparing patients with anti-GPlb/IX autoantibodies to those without anti-GPlb/IX autoantibodies. The factorial design analyses revealed no interaction effect between autoantibodies and showed anti-GPIb/IX autoantibodies at 4 weeks represented the only significant factor affecting OR rate with DXM-RTX therapy (F = 9.128, P = 0.003, Table 4).

Therefore, platelet anti-GPIb/IX autoantibodies can predict poor response to DXM-RTX in ITP patients.

Disclosures No relevant conflicts of interest to declare.

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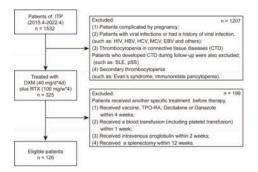


Figure 1. Flowchart of patient enrollment and screening.

Table 3. Multivariable logistic regression analysis of the effect of baseline characteristics and anti-GPs autoantibodies on the response to DXM-RTX

Time	Variable	В	Standard	Wald chi-square	P	Odds	95% CI
Y	Constant	3.418	0.991	11.896	100.0		
	Agr (years) Gender	-0.010	0.014	0.449	0.503	9,991	0.963-1,019
	Mile	40.460	0.539	0.726	0.394	0.632	0219-1818
	Female	1					
	Disease course (month)	-0.006	0.005	1.646	0.199	0.994	0.985-1.003
Week 4	ALT (UIL)	-0.037	0.026	1.980	0.159	0.964	0.915-1.01;
	AST (UIL)	-0.051	0.047	1.191	0.275	0.950	0.867-1.042
	Megakaryocste	0.001	300.0	6.205	0.013	1.001	1000-100
	Baseline PLTs (~10°A.)	-0.067	0.036	3.522	0.061	0.935	8.872-1.00
	Ann-GPTMX	-1,641	0.554	8.759	0.003	0.194	0.065-0.375
	Assi-GPIIMIlla	0.875	0.495	3.156	0.076	2.100	0.914-630
	Constant	3.143	0.980	10.286	0.001	7.5	Aleka Ara
	Age (years) Gender	-0.011	0.014	0.628	0.428	0.989	0.961-1.01
	Male	40.218	0.550	0.157	0.692	0.804	0.274-2.36

Terms	GPIIb/IIIa	GPIII/IIIa	GPIIVIX	GPIMX:	Total	
1 CHINS	(+)	(-)	(+)	(-)	1008	
Cases	83	43	84	42	126	
Gender (female/male)	52/31	33/10	59/25	26/16	85/41	
Median (range) age, years	32 (10-80)	32 (11-80)	36 (10-80)	30 (11-66)	32 (10-80	
Median (range) disease	20.0	12.0	17.5	19.0	18.0	
duration, months	(0.1-228)	(0.1-228)	(0.1-228)	(7-120)	(0.1-228)	
Median (range) baseline platelet court, = 10°9/L.	6 (0-28)	6 (1-20)	6 (0-28)	6 (0-28)	6.0 (0-28)	
Median (range) time to response (TTR), days	7 (4-28)	7 (4-14)	7(4-28)	7 (4-20)	7 (4-28)	
Response (4 weeks)						
OR (%)	49 (59.0%)	22 (51.2%)	40 (47.6%)	31 (73.8%)	71 (36.4%)	
x2 (P)	0.714	(0.398)	7,808	(0.005)		
CR (%)	30 (36.1%)	13 (30.2%)	22 (26.2%)	21 (50.0%)	43 (34.1%)	
x1 (P)	0.440	0.440 (0.507)		7.061 (0.008)		
Response (6 months)						
OR (%)	49 (59.0%)	19 (44.2%)	38 (45.2%)	30 (71.4%)	68 (54.0%)	
χ ² (P)	2.514	(0.113)	7,731	(0.005)		
CR (%)	28 (33.7%)	11 (25.6%)	21 (25.0%)	18 (42.9%)	39 (31.0%)	
χ [±] (P)	0.881	(0.348)	4.178			

Table 2. ITP patients' response to DXM-RTX treatment with different anti-GPs

Time	Source	Type III Sum of Squares	æ	Mean Square	- 1	Sig.
	Corrected Model	9,4624	3	3.154	3.36	0.021
	Intercept	343.443	1	343.443	365,919	0.000
	Anti-GPIMIX	8.568	1	8.568	9.128	8.003
	Ann-GPBMBa	1.493	1	1.493	1.59	0.210
Work 4	Anti-GPINIX * Anti-GPINIIIa	0.048	.13	0.048	0.052	0.821
	Emor	114.507	122	0.939		
	Total	566	126			
	Corrected Total	123.968	125			
	Corrected Model .	12.103 st	3	4.034	4.352	0.006
	Intercept	369.569	1	369.569	398.64	0.000
	Anti-GPIMIX	9,507	1	9.507	10.254	0.002
	Anti-GPEMBIa	3.662	1	3.662	3.95	9.049
Month 6	Anti-GPB/IX * Anti-GPB/III/II	0.142	1	0.142	0.153	0.696
	Error	113.103	122	0.927		
	Total	590	126			
	Corrected Total	125 206	125			

Figure 1

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