

PT-1 Trial

At ASH 2004 the results of the MRC-PT1 trial were presented. The trial compared treatment with hydroxyurea and aspirin (75mg) with anagrelide and aspirin in patients with ET at high risk of thrombosis. High risk was defined as age > 60yrs, or previous clotting or bleeding (thrombosis or haemorrhage), or platelets more than $1000 \times 10^9/l$ or hypertension (needing tablets) or diabetes (needing tablets).

Overall 809 patients were entered and followed for an average of 39 months. The results show patients treated with anagrelide had significantly more arterial thrombosis, haemorrhage, and were more likely to develop myelofibrosis. Interestingly hydroxyurea treatment was more likely to be associated with venous thrombosis. Significantly more patients stopped anagrelide.

The authors conclude that hydroxyurea with aspirin should be first line therapy for most patients with ET at high risk of thrombosis.