BRITISH SOCIETY FOR HAEMOSTASIS AND THROMBOSIS

BSHT Annual Scientific Meeting 2022

Wednesday 26 – Friday 28 January

P & J Live, Aberdeen

Clinical Education session speaker presentation summary + biography

bsht.org.uk/meetings-events/

Issues in the emergency management of ischaemic stroke

Dr Mary Joan MacLeod
Aberdeen

In this presentation we will:

- Review the current evidence for thrombolysis and thrombectomy with particular reference to UK practice.
- Discuss the evidence for which thrombolytic agent to use.
- Reflect on the guidance for use of thrombolysis in patients on warfarin or DOACS and how this works in day to day practice.

As the risk of recurrent stroke is highest within the first few days after an ischaemic event, there are a number of ongoing studies looking at the optimal timing of starting anticoagulation in patients with AF and ischaemic stroke, which may change practice within the next few years.

Dr Mary Joan MacLeod
MBChB PhD FRCP
Clinical Senior Lecturer in Clinical Pharmacology
University of Aberdeen, Institute of Medical Sciences
Aberdeen

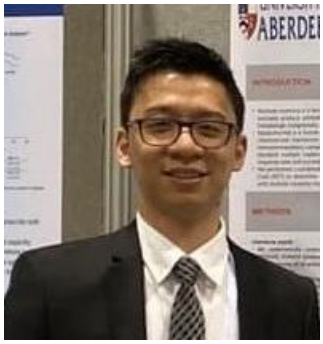
I am a Clinical Senior Lecturer at the University of Aberdeen who has been involved in clinical and research aspects of stroke care for over 20 years. My research interests cover epidemiology and factors predicting outcome after stroke, as well as imaging in acute stroke. I currently have grant funding to look at the interactions between stroke and cancer, and to look at the potential use of Fast Field Cycling MRI in stroke.

Cerebral Venous Sinus Thrombosis: A pre-VITT era case and clinical observations in a cohort of patients with CVST

Thura Win Htut[1], Henry G Watson[2], Graham Mackay[3] and Mohammed M Khan[1]
[1]Department of Haematology, Aberdeen Royal Infirmary, Foresterhill, Aberdeen, UK
[2]University of Aberdeen, Aberdeen, UK
[3]Department of Neurology, Aberdeen Royal Infirmary, Foresterhill, Aberdeen, UK

We present a case of a young male with unprovoked cerebral vein sinus thrombosis (CVST) who had thrombocytopenia at presentation before the era of COVID-19 vaccination. The patient presented with headache, unilateral paraesthesia and seizure. He had intracranial bleeding and required craniotomy to relieve raised intracranial pressure. We discuss the complexities of his management especially given that he presented with moderate thrombocytopenia (platelet count < 50 x 10^9) and debate the possible cause if his thrombocytopenia.

We also present the data from our observations on a cohort of patients diagnosed with CVST over a 4 year period. We discuss the incidence, baseline characteristics, the results of limited thrombophilia screening, treatment for CVST and outcomes for patients. Common risk factors identified in the cohort include female sex, combined oral contraceptive use and presence of antiphospholipid antibodies. The prevalence of the latter is higher in this cohort compared to previously reported cohorts and possible reasons for this are discussed.



Dr Thura Win Htut
MBBS, MRCP
Haematology Specialty Trainee Registrar ST5
Aberdeen Royal Infirmary, UK

Thura Win Htut is a haematology specialty trainee registrar and currently in haematology training year 5 at Aberdeen Royal Infirmary, United Kingdom.

Pregnancy complications of sickle cell disease

Dr. Beverley Robertson
Aberdeen

Sickle cell disease is the most common inherited disease worldwide. The term sickle cell disease encompasses the condition sickle cell anaemia (HbSS) and the heterozygous conditions of HbS and other variant haemoglobins. The pathophysiology of sickle cell disease will be reviewed. Pregnant women with sickle cell disease have an increased risk of pregnancy complications including premature labour, fetal growth restriction and acute painful crises during pregnancy. The management of pregnant patients with sickle cell disease will be reviewed with with reference to the RCOG green-top guideline and the recently updated BSH guideline.

Dr. Beverley Robertson
BSc Hons, MBChB, FRCP, FRCPath
Consultant Haematologist
Aberdeen Royal Infirmary, Department of Haematology
Aberdeen

Dr. Beverley Robertson is a Consultant Haematologist at Aberdeen Royal Infirmary.

Her specialist interests include benign haematological disorders with a special interest in haemoglobinopathies, myeloproliferative disease and obstetric haematology.

She also specializes in diagnostic haematology and is the Aberdeen haematology laboratory service clinical director.

Catastrophic Antiphospholipid Syndrome : an atypical presentation

Dr. Wail Abdelrahman
Aberdeen

Catastrophic Antiphospholipid Syndrome (CAPS) is a rare but potentially fatal condition characterized by multiple thromboembolic events at presentation or developing rapidly; typically over days. CAPS can occur in patients with a known diagnosis of Antiphospholipid Syndrome (APS) or can present *de novo*. Typically patients with CAPS present in a dramatic fashion being extremely unwell.

We present an interesting case where the patient developed evidence of thromboembolism in different sites but despite this he remained clinically well. We discuss the investigations and involvement of multiple specialties which led to the eventual diagnosis. The approach to managing CAPS is discussed as is the patient's progress.

Dr. Wail Abdelrahman
MBBS, PgCert
Haematology SPR
NHS Grampian
Department of Haematology, Aberdeen Royal Infirmary

Wail is a Specialty trainee in haematology in NHS Grampian. He graduated from medical school in Sudan and worked in different health boards in Sudan, Republic of Ireland, England and Scotland. He completed his core medical training in Northeast deanery in England. Completed post graduate certificate in medical education from Faimer-Keele University .

An approach to the diagnosis of suspected heritable platelet disorders

Dr Andrew Page
Edinburgh

The introduction of widespread use of high throughput sequencing-based gene panel testing has revolutionized the diagnostic approach to inherited platelet disorders. Use of this technology has led to rethinking of the pathways for diagnosis of this diverse group of disorders, in particular for heritable thrombocytopenias. This testing has posed new practical and ethical challenges for people working in the field of bleeding disorders.

This session will cover the potential position of gene panel testing in diagnosis of heritable platelet disorders, the challenges of interpretation of the results of this testing and potential methods for clarifying their significance, plus future prospects in the field.

Dr Andrew Page
MA, BM BCh, PhD, MRCP, FRCPath
Consultant Haematologist
Royal Infirmary of Edinburgh, Department of Haematology
Edinburgh

Andrew Page is a haematology consultant and director of the Edinburgh Haemophilia Centre. Before he trained in medicine, he completed a PhD in genetics. He is a member of the UKHCDO laboratory working party and UK NEQAS blood coagulation Genetics Special Advisory Group. He is also the clinical lead for the Scottish Bleeding Disorders genetics service. In this capacity, he has overseen the introduction of high throughput sequencing-based gene panel testing including the development of an associated Scotland-wide MDT meeting.