

Table SII. Laboratory tests, treatments and outcome

Pat. No.	Lowest platelet count/mm ³ ^{a,b}	Thrombocytopaenia duration, relapse	Efficient treatment, age of introduction, duration, months	Other treatments	Follow-up	Residual lesion	Inflammatory manifestations	Elevated D-dimer	Sequelae
1	38,000	1.5 months	Ticlopidine-Aspirin, 4.5, 14	CTC	2 years	Type II			
2	37,000	3 days		CTC, compression	9 years	Type I (severe)	+	+	
3	3,000	7 months	Vincristine, 10, 3	CTC, compression, ticlopidine-aspirin, pentoxifylline, embolization	2.5 years	Type I (minor)			
4	6,000 ^{a,b}	4 months	Embolization, 4.5	Compression, ticlopidine-aspirin	3 years	Type I (minor)		+	
5	10,000	1.5 months		CTC, ticlopidine-aspirin, pentoxifylline, embolization	2 months	Type I (minor)		+	
6	10,000	5 months	Pentoxifylline, ND, 5	CTC, ticlopidine-aspirin, contention, embolization, interferon, X-ray,	22 years	Type II	+	(Aspirin)	Limited mobility of wrist and elbow, no everyday life disturbance
7	8,000 ^{a,b}	1.2 months	Ticlopidine-aspirin, 3, 12	Pentoxifylline, contention	5 years	Type I (minor)		+	
8	5,000	5 months		CTC, ticlopidine-aspirin, compression, embolization, pentoxifylline, interferon, AT III	5 years	Type III			
9	10,000	84 months		CTC, ticlopidine-aspirin, contention, embolization, pentoxifylline, X-ray, interferon, amino-caproic acid, IVIG, heparin	7 years	Type I (severe)			
10	10,000	1 months		CTC, contention, embolization	Deceased 1 month (brain bleeding)				
11	3,000	6 months	Ticlopidine-aspirin, 9, 14	CTC, Compression, embolization, pentoxifylline, X-ray, interferon	20 years	Type I-II	+	(Aspirin)	Inferior limb-length discrepancy
12	9,000	24 months		CTC, ticlopidine-aspirin, compression, embolization, pentoxifylline, interferon, surgery	14 years	Type III			Hip contracture
13	<10,000	2.5 months	Pentoxifylline, vincristine	CTC, compression,	2 years	Type I (minor)			
14	<10,000	5 months		CTC, ticlopidine-aspirin, Compression, X-ray, amino-caproic acid	17 years	Type I (minor)	+		
15	<10,000	1.5 months	CTC, 3.5, 3		14 years	Type I (minor)	+	+	
16	<10,000	8 months		CTC, embolization, X-ray	4 years	Type I (minor)	+	+	
17	<10,000	13 months	Embolization	CTC, ticlopidine-aspirin, X-ray	9.5 years	Type I (minor)			
18	5,000 ^a	12 months	Interferon, 11, 13	Ticlopidine-aspirin, CTC, pentoxifylline, vincristine, vincristine-cyclophosphamide	3 years	Type I		+	Inferior limb-length inequality, hip and knee contracture
19	2,000	3 months, R	Vincristine, 2, 16	CTC, ticlopidine-aspirin, compression, pentoxifylline, interferon, vincristine	6 years	Type III		+	Amyotrophy but no functional impairment
20	8,000	3 months	CTC, 23, 12, Ticlopidine-aspirin, 23, 17	Propranolol	6 years	Type III	+	(Aspirin)	+
21	3,000	8 months	Vincristine	Embolization, pentoxifylline, ticlopidine-aspirin, CTC, compression, propranolol	2 years	Type I			
22	3,000	3 months, R	Ticlopidine-aspirin, 3 days, 28	Compression, vincristine	3 years	Type III	+	(Aspirin)	+
23	15,000	2 months		Vincristine, CTC, ticlopidine-aspirin, IVIG	8 months				CT scan: no residual mass
24	14,000	10 months	Ticlopidine-aspirin, 16, ND	CTC, vincristine, IVIG	5 years				MRI: minimal residual tumour

^aProgressive diminution of platelet count; ^bwith elevated D-dimers; CTC: systemic corticosteroids; IVIG: intravenous immunoglobulins; CT: computed tomography; ND: no data; R: relapse; MRI: magnetic resonance imaging.