

**MEDICATION NAME:**

**AZATHIOPRINE**

**BRAND: IMURAN, AZASAN**

HOW IS IT GIVEN:	Oral tablet.
HOW DOES IT WORK:	Interferes with the proliferation of lymphocytes. Used to treat diverse autoimmune disorders and some forms of lymphoma.
COMMON DOSING REGIMENS:	2 mg/kg daily is a typical dose (as tolerated based on blood counts) but higher and lower doses are effective in some individuals. Genotyping for TPMT (Thiopurine methyltransferase) involved in the metabolism of this drug, should be performed as results may alter drug dosing.
COMMON SIDE EFFECTS:	Hepatotoxicity can occur. Hair loss has been reported (rare).
RARE BUT SERIOUS SIDE EFFECTS:	Can cause neutropenia (low white blood cells) which increases the risk for serious bacterial infections. Uncertain if there is an increased risk of malignancy with long-term use.
TYPICAL TIME TO RESPONSE:	3-6 months.
LIKELIHOOD OF INITIAL RESPONSE:	30-60%
LIKELIHOOD OF LONG-TERM RESPONSE (3-5 YEARS):	The prevalence of sustained response off treatment has not been established.
OTHER CONSIDERATIONS:	Not recommended for use in pregnancy or while nursing.  Avoid the certain medications: aminosalicylates (used to treat inflammatory bowel disease), ACE inhibitors (used for blood pressure control), and allopurinol (used for gout).

**References:**

1. Cleveland Clinic. (2015). Imuran. <https://my.clevelandclinic.org/health/drugs/9407-imuran%C2%AE->
2. Johns Hopkins Arthritis Center. (2019). Azathioprine (Imuran®) Drug Information Sheet. <https://www.hopkinsarthritis.org/patient-corner/drug-information/azathioprine-imuran/>
3. Platelet Disorder Support Association. <https://www.pdsa.org/immunosuppressants.html>.
4. Quiquandon, I et al. (1990). Re-evaluation of the role of azathioprine in the treatment of adult chronic ITP: a report on 53 cases. *British Journal of Haematology*, 74(2): 223-228
5. Stasi, R., and Provan, D. (2004). Management of Immune Thrombocytopenic Purpura in Adults. *Mayo Clinic Proceedings*. April 79:504-522.