

MEDICATION NAME:	AZATHIOPRINE
	BRAND: IMURAN, AZASAN
HOW IS IT GIVEN:	Oral tablet.
HOW DOES IT WORK:	Interferes with proliferation of lymphocytes. Used to treat diverse autoimmune disorders and prevent rejection of a transplanted organ.
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. It should be given on an empty stomach at bedtime. 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 (liver injury) can occur. Hair loss has been reported (rare).
RARE BUT SERIOUS SIDE EFFECTS:	Can cause neutropenia (low white blood cells). Uncertain if there is an increased risk of malignancy with long-term use. Can affect liver tests which need to be monitored.
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:	Avoid the certain medications: aminosaliclates (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.