Original Article

COVID-19 and heparin-induced thrombocytopenia: Is there a relationship?

Mustafa Yılmaz¹⁽⁰⁾, Can Özlü²⁽⁰⁾, Sevil Alkan³⁽⁰⁾, Hasan Hüseyin Gümüşçü⁴⁽⁰⁾

¹Department of Infectious Diseases and Clinical Microbiology, Kütahya Health Sciences University, Evliya Çelebi Training and Research Hospital, Kütahya, Turkey

²Department of Internal Medicine, Kütahya Health Sciences University, Faculty of Medicine, Hematology, Kütahya, Turkey

³Department of Infectious Diseases and Clinical Microbiology, Çanakkale Onsekiz Mart University, Faculty of Medicine, Çanakkale, Turkey

⁴Department of Internal Medicine, Kütahya University of Health Sciences, Evliya Çelebi Training and Research Hospital, Kütahya, Turkey

ABSTRACT

Objectives: The purpose of this study was to evaluate the literature in terms of heparin-induced thrombocytopenia (HIT) that develops in COVID-19 patients.

Materials and methods: Between March 2019 and March 2021, all published articles on the subject of the study formed the target population of the study. The keywords "COVID-19" or "SARS-CoV-2" and "heparin-induced thrombocytopenia" were searched in English in the most prestigious databases of PubMed, Scopus, and Web of Science (WoS).

Results: No publications on this subject were found in the SCOPUS database. Only 13 publications were found in the PubMed database, and 11 in the WoS database. Eleven (78.5%) were published in 2020, and three (21.5%) were published in the first three months of 2021. There were four (28.5%) letters to the editor, six (42.8%) case reports, and one each (7.2%) correspondence, review, research article, and a short report. The only research article is also a retrospective study, except that no large case series or research article other than this one was found. The United States was identified as the country with the highest number of publications on this subject (57.1%).

Conclusion: Prospective studies, we believe, are urgently needed to understand the effects of heparin-induced thrombocytopenia development on morbidity, mortality, and long-term outcomes, a condition that can contribute to COVID-19 patient mortality as well as increased risk for thromboembolic events.

Keywords: COVID-19, heparin-induced thrombocytopenia, heparin-induced thrombocytopenia.

More than 2.5 million people have died worldwide since the World Health Organization (WHO) declared a pandemic nearly a year ago. Aside from mortality, morbidity and rising healthcare costs are still on the agenda. Every day, new clinical presentations are reported as a result of global studies on this disease.^[1,2] It is now commonly recognized that a prothrombotic condition is one of the leading causes of COVID-19 infection-related

Received: March 28, 2021 Accepted: May 04, 2021 Published online: May 27, 2022 *Correspondence*: Mustafa Yılmaz. e-mail: drmustafayilmaz29@hotmail.com

Cite this article as:

Yılmaz M, Özlü C, Alkan S, Gümüşçü HH. COVID-19 and heparin-induced thrombocytopenia: Is there a relationship? D J Med Sci 2022;8(1):1-4.

mortality. Therefore, low molecular weight heparin thromboprophylaxis is strongly advised for these patients.^[2] However, heparin-induced thrombocytopenia (HIT) may occur as a result of this treatment.^[3-6]

Heparin-induced thrombocytopenia is a transient, acquired clinical-pathological syndrome characterized by thrombocytopenia and thrombosis caused by antibody-mediated platelet activation and consumption as a result of a heparin-induced immune response. The presence of immunoglobulin (Ig) G antibodies that activate heparin-dependent platelets in the formation of thrombocytopenia and/or thrombosis confirms the diagnosis of HIT. Furthermore, in order to make a diagnosis, it is necessary to differentiate it from non-immune HIT.^[3,4] The pathophysiology of increased coagulopathy, thrombosis risk, or

potentially increased HIT risk in COVID-19 patients is unidentified.[5,6]

Since this complication is difficult to diagnose, its incidence is also unclear. The purpose of this study was to evaluate the literature on heparin-induced thrombocytopenia development in COVID-19 patients.

MATERIALS AND METHODS

Research model: The research model is a case study, which is one of the qualitative research methods. The main objective of a case study is to exhibit results for a specific situation. According to Creswell,^[7] a case study is a qualitative research method in which the researcher examines one or more limited-time situations using data collection tools (observations, interviews, audiovisuals, documents, reports) from multiple sources, identifying situations and situation-related themes.

The target population of the study: Between March 2019 and March 2021, all published articles on the subject of the study formed the target population of the study.

Method: The study aimed to assess the current situation of COVID-19 related HIT and linked academic publications. The objective of this research was to evaluate the literature from this aspect. The keywords "COVID-19" or "SARS-CoV-2" and "heparin-induced thrombocytopenia" were searched in English in the most prestigious databases of PubMed, Scopus, and Web of Science (WoS). The data obtained were saved as Excel sheets so that the necessary analyses could be performed. Duplicated publications were included in the one-off review.

RESULTS

As a result of the study, no publications on this subject were found in the SCOPUS database. Only 13 publications were found in the PubMed database, and 11 in the WoS database. Eleven (78.5%) were published in 2020, and three (21.5%) were published in the first three months of 2021. There were four (28.5%) letters to the editor, six (42.8%) case reports, and one each (7.2%) correspondence, review, research article, and a short report. The only research article is also a retrospective study, except that no large case series or research article other than this one was found. The United States was identified as the country with the highest number of publications on this subject (57.1%). Riker was the author with the most articles on this subject. The journal with the most publications on this subject

Journal name Author Country Article types Journal of Investigative Medicine High Impact Case Reports Lingamaneni et al.^[2] United States of America Case report Daviet et al.[4] Circulation France Letter to editor Thrombosis Research Huang et al.^[6] Taiwan Letter to editor American Journal of Hematology Patell et al.^[8] United States of America Correspondence Cai et al.^[9] United States of America Antibodies (Basel) Review Hematology Reports 2021 Sartori and Cosmi^[10] Italy Case report Research and Practice in Thrombosis and Haemostasis Riker et al.^[11] United States of America Case report Journal of Artificial Organs: the official journal of the Japanese Bidar et al.^[5] France Case report Society for Artificial Organs Thrombosis Journal Phan et al.^[12] Vietnam Case report Riker et al.^[13] Research and Practice in Thrombosis and Haemostasis United States of America Letter to editor Research and Practice in Thrombosis and Haemostasis May et al.[14] United States of America Letter to editor Journal of Thrombosis and Haemostasis Nazy et al.[15] Canada Short report Cureus Madala et al.[16] United States of America Case report Warrior et al.[17] Blood United States of America Research article

Table 1. A detailed review of published articles on COVID-19 related heparin-induced thrombocytopenia

was Research and Practice in Thrombosis and Hemostasis, which had two publications (Table 1).

DISCUSSION

The pathophysiology of increased coagulopathy, thrombosis risk, and potentially increased heparin-induced thrombocytopenia risk in COVID-19 patients is still unknown.^[4,5] Our study intends to guide future research by looking at the global situation.

However, it is worth noting that only one research article was found globally as a result of our research. The only research article on this subject was conducted by Warrior et al.^[17] The incidence of heparin-induced thrombocytopenia in COVID-19 patients was reported to be 0.6% in this study, which was higher than the general population. The small sample size and retrospective study of this research, which found that HIT development may contribute to COVID-19 patient mortality and increased risk of thromboembolic events, was noted as a study limitation.^[17]

Heparin-induced thrombocytopenia is serious immune-mediated complication а of heparin treatment that develops when pathogenic antibodies bind platelet factor 4 (PF4)-heparin complexes, causing platelet activation, platelet consumption, and thrombin formation. Paradoxically. HIT is characterized by both thrombocytopenia and prothrombotic status.^[5] The increased HIT prevalence in these patients could be attributed to severe immune reactions and possibly platelet activation as a result of increased PF4 release. Furthermore, critical patients with COVID-19 may develop lifethreatening coagulopathy, requiring aggressive anticoagulation therapy to avoid thromboembolic complications. This increased incidence can be explained by the higher doses of heparin used for COVID-19.^[4]

During the COVID-19 pandemic, Daviet et al.^[4] from France reported an 8% incidence of heparin-induced thrombocytopenia in 86 severe COVID-19 patients in two intensive care units. Thrombocytopenia is common in critical patients, while the incidence of HIT is relatively rare (<1%).^[4] However, in patients receiving extracorporeal membrane oxygenation (ECMO), the rate can reach up to 3.7%.^[4] During the COVID-19 pandemic, the

incidence of HIT increased from 2 to 21% in a previously published cohort of 105 patients supported by veno-venous ECMO.^[18] COVID-19 and HIT, on the other hand, are extremely difficult to differentiate. Multiple instruments, including clinical scoring (the 4Ts score), enzyme immunoassays (EIAs), and serotonin release assay (SRA), all require sensitivity and specificity tests.^[19]

In conclusion, heparin-induced thrombocytopenia development, a condition that can contribute to COVID-19 patients' mortality as well as an increased risk of thromboembolic events; we believe that prospective studies are needed immediately to understand the effects on morbidity, mortality, and long-term outcomes.

Data Sharing Statement: The data that support the findings of this study are available from the corresponding author upon reasonable request.

Author Contributions: Idea/concept: M.Y., S.A.; design, control/supervision: M.Y., C.Ö., S.A.; data collection and/or processing: M.Y., C.Ö., S.A., H.H.G.; analysis and/or interpretation: S.A., M.Y., H.H.G.; literature review: S.A., H.H.G.; writing the article: M.Y., C.Ö., S.A., H.H.G.; critical review: S.A.; materials: S.A., C.Ö., H.H.G.

Conflict of Interest: The authors declared no conflicts of interest with respect to the authorship and/ or publication of this article.

Funding: The authors received no financial support for the research and/or authorship of this article.

REFERENCES

- 1. Available at: https://www.worldometers.info/ coronavirus/ [Accessed: March 17, 2021]
- Lingamaneni P, Gonakoti S, Moturi K, Vohra I, Zia M. Heparin-induced thrombocytopenia in COVID-19. J Investig Med High Impact Case Rep 2020;8:2324709620944091.
- Available at: http://www.thd.org.tr/thdData/ Books/130/bolum-ii-heparin-iliskili-trombositopenihit-tani-ve-tedavi-kilavuzu.pdf [Accessed: March 17, 2021].
- Daviet F, Guervilly C, Baldesi O, Bernard-Guervilly F, Pilarczyk E, Genin A, et al. Heparin-induced thrombocytopenia in severe COVID-19. Circulation 2020;142:1875-7.
- 5. Bidar F, Hékimian G, Martin-Toutain I, Lebreton G, Combes A, Frère C. Heparin-induced thrombocytopenia in COVID-19 patients with severe acute respiratory distress syndrome requiring extracorporeal membrane oxygenation: Two case reports. J Artif Organs 2021;24:277-81.

- Huang CT, Hsu SY, Chang KW, Huang CG, Yang CT, Cheng MH. Heparin-induced thrombocytopenia and thrombosis in a patient with Covid-19. Thromb Res 2020;196:11-4.
- Creswell JW. Qualitative inquiry & research design: Choosing among five approaches 3rd ed. California: SAGE Publications; 2013.
- Patell R, Khan AM, Bogue T, Merrill M, Koshy A, Bindal P, et al. Heparin induced thrombocytopenia antibodies in Covid-19. Am J Hematol 2020:10.1002/ ajh.25935.
- 9. Cai Z, Greene MI, Zhu Z, Zhang H. Structural features and PF4 functions that occur in heparin-induced thrombocytopenia (HIT) complicated by COVID-19. Antibodies (Basel) 2020;9:52.
- Sartori M, Cosmi B. Heparin-induced thrombocytopenia and COVID-19. Hematol Rep 2021;13:8857.
- 11. Riker RR, May TL, Fraser GL, Gagnon DJ, Bandara M, Zemrak WR, et al. Heparin-induced thrombocytopenia with thrombosis in COVID-19 adult respiratory distress syndrome. Res Pract Thromb Haemost 2020;4:936-41.
- 12. Phan XT, Nguyen TH, Tran TT, Huynh TT, Hoang TT, Nguyen VV, et al. Suspected heparin-induced thrombocytopenia in a COVID-19 patient on extracorporeal membrane oxygenation support: A case report. Thromb J 2020;18:37.

- 13. Riker RR, May TL, Fraser GL, Gagnon DJ, Bandara M, Zemrak W, et al. Response to the challenges of diagnosing heparin-induced thrombocytopenia in patients with COVID-19. Res Pract Thromb Haemost 2020;4:1068-9.
- May JE, Siniard RC, Marques M. The challenges of diagnosing heparin-induced thrombocytopenia in patients with COVID-19. Res Pract Thromb Haemost 2020;4:1066-7.
- Nazy I, Jevtic SD, Moore JC, Huynh A, Smith JW, Kelton JG, et al. Platelet-activating immune complexes identified in critically ill COVID-19 patients suspected of heparin-induced thrombocytopenia. J Thromb Haemost 2021;19:1342-7.
- 16. Madala S, Krzyzak M, Dehghani S. Is COVID-19 an independent risk factor for heparin-induced thrombocytopenia? Cureus 2021;13:e13425.
- 17. Warrior S, Behrens E, Gezer S, Venugopal P, Jain S. Heparin induced thrombocytopenia in patients with COVID-19. Blood 2020;136 (Supplement 1):17-8.
- Parzy G, Daviet F, Persico N, Rambaud R, Scemama U, Adda M, et al. Prevalence and risk factors for thrombotic complications following venovenous extracorporeal membrane oxygenation: A CT scan study. Crit Care Med 2020;48:192-9.
- 19. Connors JM, Levy JH. COVID-19 and its implications for thrombosis and anticoagulation. Blood 2020;135:2033-40.