EPITHEORESE KLINIKES FARMAKOLOGIAS
KAI FARMAKOKINETIKES, INTERNATIONAL
EDITION 13: 134 (1999)

Chelation Therapy in Greek Thalassaemia Patients with the Orally Active Iron Chelator Deferiprone (L1)

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BACKGROUND AND OBJECTIVE

Excessive haemosiderosis is the main reason for the multi-organ failure observed in multitransfused patients. Deferiprone (1,2-dimethyl-3-hydroxy-pyridine-4-one, L1 is an orally active iron chelator mainly excreted via urine. We conducted a study in order to determine the efficacy and safety of L1 in Greek thalassaemic patients.

DESIGN AND METHODS

A group of 11 thalassaemic patients entered the study; L1 the Cipla formulation for deferiprone at a daily dose of 75-100 mg/kg bw t.i.d. was used. Following informed consent for every case all patients were subjected to clinical examination and biological tests.

RESULTS

L1 was well tolerated by all patients; there were no significant side effects (except for slight gastrointestinal distress for the first days). The mean urinary iron excretion ranged from a minimum 0.2 to a maximum 0.386 mg/kg bw/24h. Serum ferritin declined within 4-6 months in most of them.

CONCLUSIONS

The results suggest that L1 is a rather safe drug in decreasing iron overload without any considerable side effects in Greek thalassaemics