8 examples of Idiopathic Thrombocytopenic Purpura in 2009

Please note other symptoms in some of the cases appearing at the same time, i.e.; arm numbness, temporary paralysis, hair loss

VAERS ID 353026 – Rheumatologist and blood disorder doctors from two major hospitals considered that the subject’s illness was created by Gardasil – an official report was made.

<table>
<thead>
<tr>
<th>VAERS ID</th>
<th>Vaccinated:</th>
<th>Age:</th>
<th>Onset:</th>
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VAERS ID: 341997 Vaccinated: 2009-01-12
Age: 43.0 Onset: 2009-01-26, Days after vaccination: 14
Gender: Female Submitted: 2009-03-17, Days after onset: 49
Location: Entered: 2009-03-18, Days after submission: 1

Life Threatening Illness? No Died? No Disability? No Recovered? Yes ER or Doctor Visit? No Hospitalized? No

Current Illness: Diagnostic Lab Data: laboratory test, (laser vaporization) - Results not reported; platelet count, 26?Jan09, 7

Previous Vaccinations: Other Medications: Unknown Preexisting Conditions: Unknown

CDC ‘Split Type’: WAES0903USA01518

Write-up: Information has been received from a health care provider concerning a 43 year old female who on 12-JAN-2009 was vaccinated with GARDASIL. After two weeks of injection (approximately 26-JAN-2009) the patient developed red spots over the body which was immediate. She also had blood streak on coughing, bleeding tendency was positive, especially brushing of teeth. Her platelet count decreased to 7. She was treated by hematologist and recovered completely. The doctor diagnosed her as having idiopathic thrombocytopenia (ITP). A laser vaporization test was done on the patient (results not reported). After two weeks of that, there was red inflamed spots like mumps all over the body. She took treatment and has recovered. She is currently taking MEDIXON and IMURAN. Upon internal review idiopathic thrombocytopenia (ITP) was considered to be an other important medical event. Additional information is expected.

VAERS ID: 348920 Vaccinated: 2009-05-18
Age: 16 Onset: 2009-05-28, Days after vaccination: 26
Life Threatening Illness? No Died? No
vaccination: 10

Gender: Female  Submitted: 2009-06-10, Days after onset: 13
Location: Florida  Entered: 2009-06-11, Days after submission: 1

Disability? Yes
Recovered? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay?
No

Current Illness:
Diagnostic Lab Data:
Unknown 6/22/09-records received-Two weeks prior platelet count of 26.
Rheumatology labs negative.

Previous Vaccinations:
Other Medications: DEPO-PROVERA
Preexisting Conditions: None

6/22/09-records received—PMH Depo Provera.

CDC 'Split Type': WAES0906USA01158

Write-up: Information has been received from a physician concerning a 16-year-old female patient with no medical history who was vaccinated with the second dose of GARDASIL. Concomitant therapy included Depo-Provera. A week or two after the second dose of GARDASIL the patient developed idiopathic thrombocytopenic purpura and was admitted to hospital and given intravenous immune globulin (IVIG) 2 doses. The following lab diagnostics studies was performed: Complete blood count, Comprehensive Metabolic Panel, Antinuclear Antibody Test, serum complement C3/C4 ratio, Immunoglobulin A, Bone marrow biopsy. The patient has been discharged. The patient's idiopathic thrombocytopenic purpura was considered to be disabling and an other important medical event. The patient had not been recovered. Additional information has been requested. 6/22/09-records received for DOS 5/28-5/30/09- DC DX: ITP status post 2 doses of IVIG with slight improvement of platelet count. Presented with newly diagnosed ITP with mild bruising. ICD-9 287.31.

VAERS ID: 351976  Vaccinated: 2009-02-03

Age: 11.0  Onset: 2009-02-03, Days after vaccination: 0
Gender: Female  Submitted: 2009-02-20, Days after onset: 166
Location: Entered: 2009-07-21, Days after submission: 1

Life Threatening Illness? No
Died? No
Disability? No
Recovered? No
ER or Doctor Visit? No
Hospitalized? Yes, 0 days
Extended hospital stay?
No

Current Illness:
Diagnostic Lab Data: WBC count, 06?Feb09, 16200, Discharge work up; hemoglobin, 06?Feb09, 13.6 g/dL; platelet count, 06Feb09, 11000 platelets/mm3; platelet count, ??Feb09, 119000

Previous Vaccinations:
Other Medications: Unknown
Preexisting Conditions:

Write-up: Information has been received from a Health Authority (case # 95340) through (local case # IT074/09).
Initial report received on 25-FEB-2009. An 11 year old female was vaccinated on 3-FEB-2009 at 4:03 pm with the second dose of GARDASIL (batch number NJ36070, IM, lot number 0779X). On the same day at about 4:30 pm, she presented with scattered petechiae on the upper and lower limbs, transient low grade fever and transitory dyspnea. The duration and outcome were not reported. Case closed.

Follow up received on 08-JUL-2009 from Health Authority. On 06-FEB-2009, the patient was hospitalized in the Hematology / Pediatric department for serious thrombocytopenia at 11000 platelets/mm³, petechiae and lower limbs hematoma. WERHOF disease was diagnosed after bone marrow punction and corticosteroids were prescribed. The patient received treatment with 4 vials of UGOROL, URBASON 360 mg intravenously and ZANTAC 300 mg. Discharge work up showed leukocytes at 16200 (unit not specified); Hemoglobin at 13.6 g/dL, Blood platelets at 119000 (unit not specified). On 24-APR-2009, the patient still received corticosteroid treatment. This case was reported as non serious by Health Authority on 25-FEB-2009. It was upgraded from non serious to serious on 13-JUL-2009 because follow up information specified that the patient was hospitalized. Other business partner numbers include E-2009-01650. The case is closed. No further information is available.

VAERS ID: 353026
Vaccinated: 2009-01-02
Age: 17
Gender: Female
Location: Washington
Entered: 2009-08-04
Days after submission: 0

Vaccination | Manufacturer | Lot | Dose | Route | Site
---|---|---|---|---|---
HPV4 | MERCK & CO. INC. | 0651X | 0 | IM | LA

Administered by: Unknown
Purchased by: Unknown

Symptoms: Abdominal discomfort, Activated partial thromboplastin time prolonged, Activities of daily living impaired, Alanine aminotransferase decreased, Alopecia, Anaemia, Antiphospholipid antibodies positive, Aspiration bone marrow, Asthenia, Autoimmune disorder, Biopsy bone marrow abnormal, Blood alkaline phosphatase, Blood bilirubin increased, Blood glucose decreased, Blood immunoglobulin M increased, Blood product transfusion, Cardiolipin antibody positive, Complement factor C3 decreased, Complement factor C4 decreased, Complement factor abnormal, Contusion, Coombs direct test positive, Coombs indirect test positive, Cough, DNA antibody positive, Dizziness, Ear pain, Epstein-Barr virus antibody positive, Evans syndrome, Haematocrit decreased, Haematology test, Haemoglobin decreased, Haemolytic anaemia, Headache, Hyperhidrosis, Idiopathic thrombocytopenic purpura, Immunology test, International

Life Threatening Illness? Yes
Died? No
Disability? Yes
Recovered? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No

Current Illness: No
Diagnostic Lab Data:
  ITP/Evans Syndrome... Will eventually turn into Lupus.
  LABS and DIAGNOSTICS. 1/2/09 to 3/18/09: Platelets 63 (L). 4/9/09 to 4/27/09: CBC - RBC 3.27 X10³ (L)
  Hemoglobin 10.2 g/dl (L) Hematocrit 30.3% (L) Platelets <5 X10³ (L) Myeloc

Previous Vaccinations:
Other Medications: None
Preexisting Conditions:

CDC ‘Split Type’:

Unknown

CDC ‘Split Type’:
WAES0903USA03078

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normalised_ratio_increased, Musculoskeletal_stiffness, Neutropenia, Oral_contraception, Pallor, Palpitations, Petechiae, Platelet_count_decreased, Platelet_morphology_abnormal, Poor_quality_sleep, Prothrombin_time_prolonged, Pruritus, Pyrexia, Red_iron_cell_count_decreased, Red_iron_cell_sedimentation_rate_increased, Reticulocyte_count_increased, Reticulocyte_percentage_increased, Russell's_viper_venom_time_abnormal, Tanning, Thrombocytopenia, Urticaria, Vaginal_haemorrhage, Viral_infection, Vision_blurred, Wheezing, White_blood_cell_count_decreased, White_blood_cells_urea_positive

Write-up: Was doing fine after first after first shot, received 2nd series and next day went to dr. from school complaining of blurred vision, sick to stomach, and bad headache, fever and heart palpitations. Felt like was going to pass out. Went to dr. had tests and was in bed for 3 days. Blood tests came back low.. White, red and platelets.. Told 2 wait and be tested again in a few weeks. When tested again was sent to hospital and then diagnosed with ITP Syndrome and given medication.. Did not work, so then was hospitalized because blood was so low at serious risk for a stroke, was given another dose of globin and spent night at hospital.. A few weeks later, took blood tests again everything was still low, was put on highest dosage of Prednisone 4 3 weeks.. Blood levels raised and stabilized 4 a few weeks.. Latest has been diagnosed with ITP/Evans Syndrome and told would probably turn into Lupus, will have to visit hospital on a regular basis to be monitored.. A permanant disease, Rheumatologist and blood disorder doctors from 2 major hospitals agree this illness was created by the Gardasil Vaccine and written in their reports. 8/10/09 PCP medical records received DOS 1/2/09 to 3/18/09. Assessment: Low platelet count. Hives/urticaria thighs and lower legs, itching after tanning session. Has started oral contraceptives. Heart palpitations, nausea, feverish. Headache, ears hurt, lightheaded. Looks pale. Excused from PE. 8/10/09 Hospital records and Oncology/Hematology consult, Rheumatology Consult, DOS 4/9/09 to 4/27/09. Assessment: Thrombocytopenia, anemia, neuropenia, positive lupus anticoagulant, elevated PT/PTT. Patient presents with thrombocytopenia, anemia, excessive vaginal bleeding. Had bad "virus" with fevers, cough, headache, poor sleeping and sweating. Missed school. IVIG therapy. Hair is falling out. Energy levels decreased, pale, diffuse bruises, petechia over lower legs. Tightness in neck. Wheezing, 8/10/09 Hematology consult - second opinion, Rheumatology report DOS 4/21/09 to 5/19/09.

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Life Threatening Illness? No
Died? No
Disability? No
Recovered? Yes
ER or Doctor Visit? No
Hospitalized? No
Current Illness:

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sanevax.org
Write-up: Case received from the Health Authorities in country on 30-JUL-2009 under the reference number L200907-506 and received through authority. A 12-year-old female patient had received the first dose of GARDASIL (lot # 0772X, batch # NK13910) via the intramuscular route on 26-JUN-2009 and 07-JUL-2009, she developed idiopathic thrombocytopenic purpura with petechiae and decreased platelet count. Her platelets level was found to be at 6,000 on 07-JUL-2009 and at 300,000 on 16-JUL-2009. She received corrective treatment with normal human immunoglobulins 800mg/kg via intravenous route. The patient recovered 9 days after onset of purpura. It was worth noting that the Health Authorities reported that vaccination had been administered 15 days before onset of idiopathic thrombocytopenic purpura, which was not consistent with time to onset between of date of vaccination and date of onset. The patient had no known clinical history, no previous history suggestive of viral infection and no previous history of adverse reaction to other drugs. The event was reported to be other important medical event. Other business partner numbers include E2009-07720. No further information is available.

VAERS ID: 357519

Vaccinated: 2009-06-15
Age: 15
Onset: 2009-07-01, Days after vaccination: 16
Gender: Female
Submitted: 2009-09-16, Days after onset: 77
Location: Pennsylvania
Entered: 2009-09-17, Days after submission: 1

Vaccination | Manufacturer | Lot | Dose | Route | Site
---|---|---|---|---|---
HPV4 | MERCK & CO. INC. | 0772X | 0 | IM | UN

Administered by: Unknown   Purchased by: Unknown
Symptoms: Blood product transfusion, Idiopathic thrombocytopenic purpura, Petechiae, Platelet count decreased

Write-up: Information has been received from a physician, for GARDASIL, a Pregnancy Registry product, concerning a 16 year old female with no pertinent medical history or drug reactions who was vaccinated with at least one dose of GARDASIL (lot#, route and site of administration not reported) in the last 4 weeks. Concomitant therapy included prenatal vitamins. The patient was pregnant and developed Computerised tomogram, Drug exposure during pregnancy, Full blood count abnormal, Idiopathic thrombocytopenic purpura, Platelet count decreased.

Life Threatening Illness? No
Died? No
Disability? No
Recovered? No
ER or Doctor Visit? Yes
Hospitalized? No
Current Illness: Pregnancy NOS (LMP = 7/1/2009)

Diagnostic Lab Data: complete blood cell, 09/04/09, 8000 /L; complete blood cell, 09/?/09, 11600 /L

Previous Vaccinations:
Other Medications: vitamins (unspecifed)
Preexisting Conditions: 10/1/09 Medical records received w/PMH: childhood chickenpox. smoker. HPV #2 received 8/17/2009, Lot # 1130X, LA.

CDC 'Split Type': WAES0909USA00119
immune thrombocytopenia purpura. On approximately 14-AUG-2009 ("4 weeks ago"), the patient’s platelet level, 8000/L, was extremely low. On 04-SEP-2009 she started with treatment with prednisone 20 mg, twice daily. Her platelet level was already 116000/L. Other than the low platelet the patient was asymptomatic. At the time of this report, the patient had not recovered. The patient’s "due date" was 20-APR-2010. Follow up information has been received from a registered nurse who stated that on 23-AUG-2009 the 16 year old female patient was in a fight and received an injury to her eyes and head. The patient was 7.5 weeks pregnant at the time. She underwent a CT of the head (hospital location and results not available). No blood work was done at that time. On 04-SEP-2009 her blood work was drawn and the platelet result was 8000. The patient was diagnosed with immune thrombocytopenia purpura. Additional follow up information has been received from a licensed practical nurse concerning the 16 year old female patient who on 15-JUN-2009 was vaccinated with the first dose of GARDASIL (lot# 659441/1446U, route and site of administration not reported). On 17-AUG-2009 she was vaccinated with the second dose of GARDASIL (lot#661953/1130X, route and site of administration not reported). No other vaccines were administered on these two dates. Upon internal review, the immune thrombocytopenia purpura was determined to be an other important medical event. Additional information has been requested. 10/01/09 Received PCP medical records. FINAL DX: Idiopathic Thrombocytopenic Purpura Records reveal patient in usual state of good health on 6/15

VAERS ID: 358353  Vaccinated: 2009-07-20
Age: 13.0  Onset: 2009-07-20, Days after vaccination: 0
Gender: Female  Submitted: 2009-09-24, Days after onset: 66
Location: Entered: 2009-09-25, Days after submission: 1

Vaccination  Manufacturer  Lot  Dose  Route  Site
HPV4  MERCK & CO. INC.  0773X  1  UN  UN

Administrated by: Unknown  Purchased by: Unknown

Symptoms: Alanine aminotransferase, Alanine aminotransferase normal, Aspartate aminotransferase normal, Blood bilirubin, Blood bilirubin normal, Blood chloride, Blood lactate dehydrogenase, Blood potassium, Blood smear test normal, Blood sodium, C-reactive protein, Epstein-Barr virus antibody negative, Haemoglobin normal, Idiopathic thrombocytopenic purpura, Mouth haemorrhage, Nausea, No reaction on previous exposure to drug, Petechiae, Platelet count decreased, Pyrexia, Red blood cell sedimentation rate, White blood cell count

Write-up: Initial case reported on 17-SEP-2009 by Health Authority (HA reference number DK-DKMA-20092675) to

Life Threatening Illness? No  Died? No
Disability? No  Recovered? No
ER or Doctor Visit? No  Hospitalized? Yes, 0 days
Extended hospital stay? No

Current Illness:

Diagnostic Lab Data: platelet count, 25Jul09, 1, 10E9/L, Low

Previous Vaccinations:

Other Medications: Unknown

Preexisting Conditions: None

CDC ‘Split Type’: WAES0909USA02876
It was reported that a 13 year old female was vaccinated with her third dose of GARDASIL (intramuscularly, batch number NK14370, lot number NJ28270) on 20-JUL-2009. Later on the same day (not further specified), the patient experienced febrile reaction and nausea. It was reported that the patient on the day of vaccination was babysitting a child which vomited. Five days later on 25-JUL-2009 the patient developed petechia on the legs which spread to general petechia. Ten days after vaccination on 30-JUL-2009 the patient was admitted to a hospital ward for children with petechia on the skin and on oral mucosa. At this time, the patient did not have fever (cessation date not reported). Idiopathic thrombocytopenia purpura was suspected. Laboratory analysis showed thrombocyte count of 1 x 10^9/L (low), normal Hgb, Leu., CRP, SR, ASAT, ALAT, LD, s-bilirubin and sodium, potassium and chloride (not further specified). The patient was examined for Epstein-Barr virus, parovirus CM virus with no signs of active disease. A blood smear showed no signs of leukemia. The patient was vaccinated with second dose of GARDASIL (batch number NJ50800, lot number 0773x, route and site of administration not reported) on an unspecified date in 2009. No adverse events were reported. The patient was vaccinated with first dose of GARDASIL (batch number NJ38950, lot number 0747X, route and site of administration not reported) on 19-JAN-2009. No adverse events reported. At the time of the report, the patient was recovering from idiopathic thrombocytopenia purpura (thrombocyte count was normalizing) and was treated on an outpatient basis. The patient did not suffer from any disease at the time of vaccination. Other business partner numbers included: E2009-08754. Additional information has been requested.

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**VAERS ID:** 374854  **Vaccinated:** 2009-09-25  
**Age:** 25  **Onset:** 2009-11-16, Days after vaccination: 52  
**Gender:** Female  **Submitted:** 2009-12-23, Days after onset: 37  
**Location:** California  **Entered:** 2009-12-23, Days after submission: 0  

**Vaccination** | **Manufacturer** | **Lot** | **Dose** | **Route** | **Site**
--- | --- | --- | --- | --- | ---
HPV4 | MERCK & CO. INC. | 0671Y | 0 | IJ | RA

**Administered by:** Private  **Purchased by:** Private  
**Symptoms:** Antinuclear antibody positive, Autoimmune thrombocytopenia, Blood product transfusion, Contusion, Cough, Cytomegalovirus antibody positive, Diarrhoea, Dyspnoea, Epistaxis, Epstein-Barr virus antibody positive, Factor V Leiden mutation, Fatigue, Feeling hot, Haematochezia, Haematocrit decreased, Haemoglobin decreased, Hepatitis B antibody, Hypoaesthesia, Idiopathic thrombocytopenic purpura, Injection site pain, Lip disorder, Migraine, Monoplegia, Muscular weakness, Oral contraception, Parasthesia, Petechiae, Platelet count

**Life Threatening Illness?** Yes  
**Died?** No  
**Disability?** No  
**Recovered?** No  
**ER or Doctor Visit?** Yes  
**Hospitalized?** Yes, 20 days  
**Extended hospital stay?** Yes  
**Current Illness:** No  
**Diagnostic Lab Data:** Thrombocytopenia. I have been now been admitted into the hospital 3 times, and have to go back again in a few days, as I have dropped again. My levels have been at 8,000, 3,000, and 12,000 (normal levels are 150,000 - 450,000) at the time  
**Previous Vaccinations:** 
**Other Medications:** Trivora Birth control (oral pill taken 1x
Write-up: I received one (1) shot of the HPV vaccine Gardasil on 09/25/09. Two months later, on 11/19/09, I went into my doctor with petechiae (red blood dots) on my legs, excessive bruising on my legs and arms, and mouth lumps (inside lower lip). I took a blood lab and when the results came in, I was at 8,000 platelet count and told to go to the ER right away. Treatment (steroids alone) lasted for 2 days, and had to go back to the ER, this time with arm numbness/temporary paralysis added to the issue. Treatment with a stronger medication (Anti-D) was administered, but again, two days later, I was back in the ER. A third treatment was administered (IVIG), and it lasted two weeks. Now I am scheduled to go back to the hospital for admission to do another dose of this. Aside from pain at the injection site for over a month, I have also now been diagnosed with the autoimmune disease thrombocytopenia (low blood platelets) which I have been dealing with for over a month at an aggressive level, and it shows no signs of getting better. During this condition, I have had arm numbness/temporary muscle paralysis, as well.

Aside from pain at the injection site for over a month, I have also now been diagnosed with the autoimmune disease thrombocytopenia (low blood platelets) which I have been dealing with for over a month at an aggressive level, and it shows no signs of getting better. During this condition, I have had arm numbness/temporary muscle paralysis, as well.

Preexisting Conditions:

No.


CDC ‘Split Type’: decreased, Respiratory tract congestion, Stomatitis, White blood cell count increased.

Albuterol inhaler (taken as needed for seasonal and pet allergies)