

Chagas disease, cardioembolic ischemic stroke, INR control and bleeding

Doença de Chagas, acidente vascular cerebral isquêmico cardioembólico, controle de INR e sangramento

Sora Yasri¹; Viroj Wiwanitkit²

Dear Editor,

We read the publication on “Anticoagulation in patients with cardiac manifestations of Chagas disease and cardioembolic ischemic stroke” with great interest¹. Monteiro et al. noted that “*Patients with Chagas disease and previous CIS had better control of INR with a higher frequency of minor bleeding*”¹. In fact, this finding should be discussed. The important question is: what is the reason for good INR control, but higher frequency of bleeding? The quality control of the INR test should be focused on. An error in laboratory testing may be possible. Several factors can cause the erroneous INR result and need to be well controlled². Also, the bleeding might be due to other non-coagulation factor-related causes. At the least, thrombocytopenia and platelet dysfunction are possible hematological problems in patients with Chagas disease^{3,4}. In addition, Chagas disease can be chronic, despite a complete course of antiparasitic drug treatment, and the platelet dysfunction might be observed in those chronic cases and may manifest the bleeding problem⁴.

References

1. Monteiro JMC, San-Martin DL, Silva BCG, Jesus PAP, Oliveira Filho J. Anticoagulation in patients with cardiac manifestations of Chagas disease and cardioembolic ischemic stroke. *Arq Neuropsiquiatr*. 2018 Jan;76(1):22-25. <https://doi.org/10.1590/0004-282x20170180>
2. Wiwanitkit V. ISO 15189, some comments on its application in the coagulation laboratory. *Blood Coagul Fibrinolysis*. 2004 Oct;15(7):613-7. <https://doi.org/10.1097/00001721-200409000-00013>
3. Blevins SM, Greenfield RA, Bronze MS. Blood smear analysis in babesiosis, ehrlichiosis, relapsing fever, malaria, and Chagas disease. *Cleve Clin J Med*. 2008 Jul;75(7):521-30.
4. Marcondes MC, Borelli P, Yoshida N, Russo M. Acute *Trypanosoma cruzi* infection is associated with anemia, thrombocytopenia, leukopenia, and bone marrow hypoplasia: reversal by nifurtimox treatment. *Microbes Infect*. 2000 Apr;2(4):347-52. [https://doi.org/10.1016/S1286-4579\(00\)00333-6](https://doi.org/10.1016/S1286-4579(00)00333-6)

¹ KMT Primary Care Center, Bangkok, Thailand;

² Dr DY Patil University, Pune, India.

Sora Yasri  <https://orcid.org/0000-0001-8292-6656>

Correspondence: Sora Yasri; KMT Primary Care Center, Bangkok Thailand; E-mail: sorayasri@outlook.co.th

Conflict of interest: There is no conflict of interest to declare.

Received 21 February 2018; Accepted 15 October 2018.