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Platelets in the Hematooncological diseases

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After 21st Century Medical Scientists are looking for ultimate remedy to cure Hematooncological patients and related diseases, which later still cause high mortality and morbidity world widely. Average treatment be made up of 1.induction and 2.post remission stages (1). The determined of the former is to produce, and of the latter to prolong, a complete remission defined as a marrow with <5% blasts and peripheral blood with >1 000 neutrophils and >100 000 circulating blood platelets (1). The ultimate goals of (early-) prognostics/diagnostics and treatments are 1. reproduction and recovery of bone marrow cell regeneration and thereby 2. prolongation of patients' survival and go back to their normal life. To increase reproduction of (pro-)platelets from megakaryocytes above 100000/microliter subject's body needs collaboration of 7 major processes 1. decrease of consumption 2. removal of infection 3. removal of chemicals from bone marrow and/or blood circulation 4. increased TPO hormone production 5. availability of vitamins and relevant metabolites 6. accessibility of oxidative phosphorylation and glycolysis 7. removal of poisons and metabolites that prevent reproduction of pro-platelets and/or antigens, which promotes pro-platelets aggregation and agglutinations (procoagulants). Here our team is collaborating in a pilot study to unravel how platelets could be reproduced above 100000 in the Hematooncological patients could be treated in less than two month.

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