

CA125-Associated Activated Partial Thromboplastin Time and Thrombin Time Decrease in Patients with Adenomyosis [Letter]

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Dear editor

We have read the paper by Yang et al on CA125-Associated Activated Partial Thromboplastin Time and Thrombin Time Decrease in Patients with Adenomyosis.¹ We congratulate the authors for providing new information regarding the CA125 antigen in relation to hypercoagulability and thrombosis in adenomyosis patients. This is quite important because coagulation parameters must be detected on time and closely monitored to prevent thrombosis, besides that the CA125 antigen also has a pattern of changes in levels which is different for each patient after surgery, this can help medical personnel in determining the patient's prognosis after surgery.²

The study conducted by Yang et al aimed to explore more deeply the changes and factors that influence the coagulation parameter, namely CA125, in patients with adenomyosis and obtained the results that CA125 levels in the adenomyosis group were significantly higher than in the leiomyoma group.¹ However, thrombin time was shorter in the adenomyosis group compared with the leiomyoma and control groups. The results obtained are in line with the objectives the author wants to achieve. However, it is necessary to consider using more than one antigen to increase the specificity and sensitivity of the examination carried out, for example we recommend the combination of MPV and CA125, RDW and CA125, because it can significantly help in increasing the accuracy of diagnosis by doctors.³ Other studies also reveal that the combination of CA125 and GLS or CA125, FASN and GLS can increase sensitivity, specificity and accuracy in predicting suboptimal cytoreductive surgery. It is hoped that this combination can help doctors provide better therapy.⁴

In conclusion, we agree that the shortening of APTT and TT related to CA125 shows the importance of early detection of coagulation parameters in patients with elevated CA125 levels to determine hypercoagulability and prevent thrombi in adenomyosis.¹ However, several studies have found that CA-125 is not a strong enough predictor if stands alone in diagnostic screening, but it requires a combination of several biomarkers which also play a role in predicting and preventing thrombosis, therefore it is necessary to carry out further research with larger samples so that the results of this research will continue to develop.²

Disclosure

The authors report no conflicts of interest in this communication.

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