

VENOUS THROMBOEMBOLIC EVENTS AND TOTAL HIP OR KNEE ARTHROPLASTY: INCIDENCE AND ASSOCIATED FACTORS



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OBJECTIVES

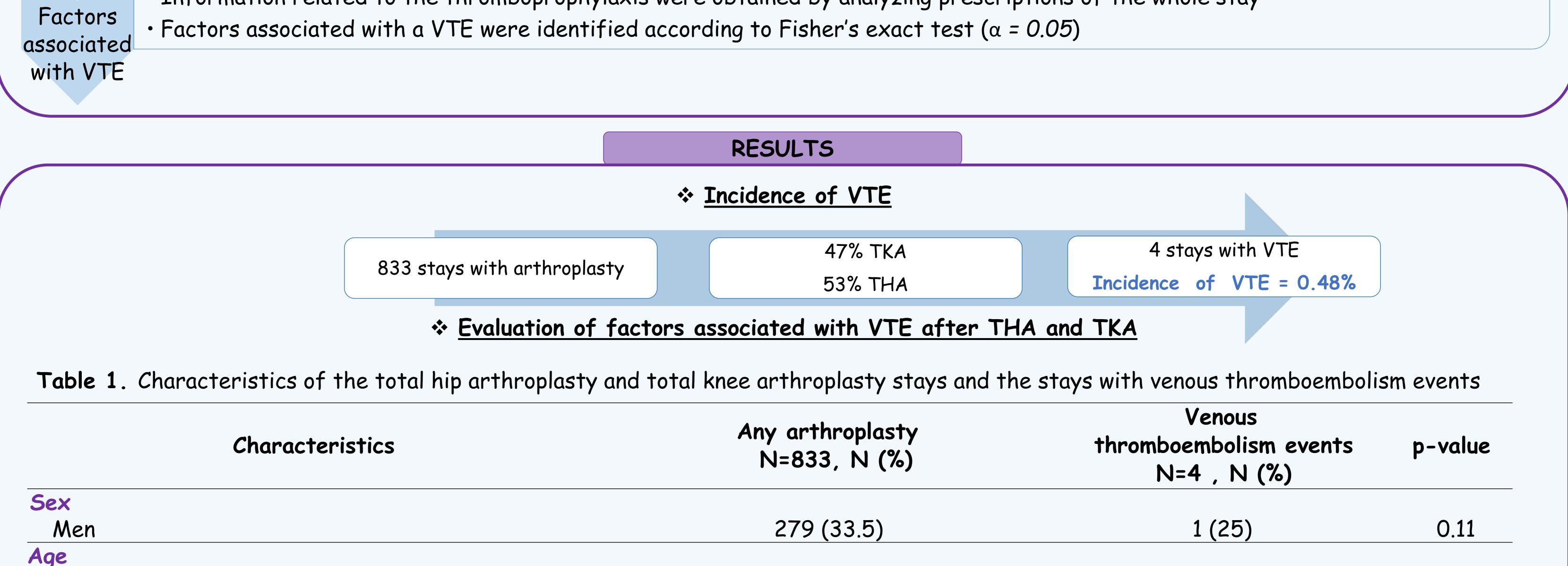
- Orthopedic surgery is associated with high risk of venous thromboembolic events (VTE) especially in the total hip arthroplasty (THA) or total knee arthroplasty (TKA)
- According to the literature the incidence of the VTE with pharmacological prophylaxis after THA or TKA was estimated to 0.7%¹ ⇒OBJECTIVES: to evaluate the incidence of VTE and the factors associated with a VTE after THA or TKA

METHODS

• Incidence of VTE= Number of stays of patients older than 18 years with VTE after THA or TKA Number of stays of patients older than 18 years hospitalized to THA or TKA

Incidence Information obtained from Diagnosis Related Groups (DRG) of VTE

- Demographic and medical characteristics of stays were extracted from DRG data
- Information related to the thromboprophylaxis were obtained by analyzing prescriptions of the whole stay



Under 65	168 (20)	1 (25)	0.75
65-74	268 (32)	0	-
75-79	169 (20)	1 (25)	_
80-84	114 (14)	2 (50)	0.09
85 and over	56 (7)	0	_
Joint replaced			0.63
Total knee arthroplasty	391 (46.9)	1 (25)	_
Total hip arthroplasty	442 (53.1)	3 (75)	_
Treatments	· · ·		
No thromboprophylaxis	2 (0.24)	0	_
LMWH* or UF** the first day+DAC***	802 (96.5)	3 (75)	0.14
Only LMWH*/UF**	21 (3.7)	1 (25)	0.10
LMWH* or UF** the first day+Vitamin K antagonist	3 (0.36)	0	_
Only DAC***	5 (0.60)	0	-
Comorbidities			
Cancer	28 (3.4)	0	_
Obesity	243 (29.2)	2 (50)	0.58
Renal failure	37 (4.4)	0	_
Chronic pulmonary disease	26 (3.1)	1 (25)	0.12
Heart failure	2 (0.24)	0 0	_
Congulopathy	4(048)	0	_

Coaguioparny	4 (U.40)

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*LMWH=Low molecule weight heparin; **UF= Unfractionated heparin; ***DAC=Direct oral anticoagulant

 $P>0.05 \rightarrow$ Factors analyzed were not associated with a VTE after TKA and THA

DISCUSSION/CONCLUSION

Incidence of VTE was low in our hospital in comparison to the literature

* In this study, factors analyzed (sex, age, joint replaced treatments, comorbidities) were not significantly associated with a VTE Several reasons could explain this low incidence of VTE:

Prescriptions were always performed by senior physicians

* Protocols of thromboprophylaxis are standardized according to patients' characteristics

Thromboprophylaxis recommendations were respected

ACKNOWLEDGEMENTS

To the medical information department

References: ¹ Senay A et al. Incidence of symptomatic venous thromboembolism in 2372 knee and hip replacement patients after discharge: data from a thromboprophylaxis registry in Montreal, Canada. Vasc Health Risk Manag. (May 2018) Email: aurelie.etangsale@hotmail.com

Prescription errors are minimized