



Practice sting 2023-14

Practice sting Duration of treatment for thromboprophylaxis this Practice Incentive is particularly interesting for prescribers in hospitals

After major procedures such as hip operations, patients must use thromboprophylaxis for a longer period of time to limit the risk of thrombosis. Before stopping thromboprophylaxis, the prescriber must carefully evaluate whether this is possible, as shown in the notification hereafter.

Notification

A man must inject dalteparin (Fragmin®) for six weeks after major surgery for a broken hip. After six weeks, the man comes to the outpatient clinic for a check-up. The physician notices that the man still has difficulty walking and that his leg is red, painful and swollen. The physician records these findings in the file of the man, but does not issue a new prescription for dalteparin. About a month and a half later, the man ends up in the emergency department with severe thrombophlebitis.

Analysis

Physicians determine the duration of preventive thrombosis treatments based on the type of procedure and how well the patient can move. The Dutch Antithrombotic Policy Guideline recommends preventive treatment for up to 35 days after procedures with a high risk of thrombosis. Before stopping thromboprophylaxis, it is important that the patient can move sufficiently again. In this case, after six weeks of injecting dalteparin, the man was unable to move sufficiently and had symptoms that could indicate thrombosis. The physician recorded this in the file of the man, but let him go home without further thrombosis treatment.

Recommendations

For hospital prescribers

Only stop preventive treatment with antithrombotic agents after surgery if the patient can move sufficiently and be alert to signs of thrombosis.