

A RETROSPECTIVE STUDY ON PREVALENCE OF VENOUS THROMBOEMBOLISM IN IMMOBILISED ORTHOPAEDICS PATIENTS

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INTRODUCTION:

The development of pulmonary embolism remains the main cause of high morbidity and mortality in patient with spinal cord and lower limb fracture injuries. The prevalence of deep vein thrombosis and pulmonary embolism in spinal cord injury is estimated at 100% and 90%, respectively. On the other hand, the prevalence of thromboembolism in lower limb fractures injury after fixation is around 30%.

METHODS:

This is a retrospective study design among 136 orthopedic patients with spinal cord and traumatic lower limb injuries diagnosed with VTE from 2018 to 2019. The objective of this study was to evaluate the incidence of venous thromboembolism and predictive risk factors in patients with complete or incomplete spinal cord and lower limb fracture injuries who were given prophylaxis for VTE.

RESULTS:

A total of 136 patients were included. Most subjects were on DVT prophylaxis, and they experienced lower limb injuries compared to spine injuries. The prevalence of venous thromboembolism was 55.9% and 56.7% from 136. In the variable analyses and multiple logistic regression, none was significant to predict the occurrence of VTE.

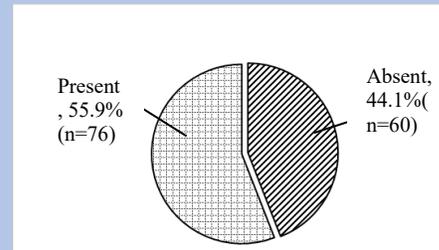


Figure 2. Prevalence of Venous Thromboembolism

DISCUSSIONS:

There is no explanation for the high percentage of patient developing VTE for post-DVT prophylaxis in this study. The prevalence rate reported in the present study in spinal and lower limb injury patients after prophylaxis is far greater than the reports in previous studies.

A different generic use of low molecular weight heparin did not correlate with the rate of VTE.

CONCLUSION:

VTE is a frequent complication in immobilized orthopedic patients either due to lower limb or spinal injuries after receiving thromboprophylaxis treatment.

REFERENCES:

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