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Anti-thrombosis benefit unclear in cancer patients with catheters

by David Douglas

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NEW YORK (Reuters Health) - Pooled data from randomized trials does not clearly demonstrate a significant advantage for thromboprophylaxis in cancer patients with central venous catheters, according to North American and Italian researchers.

"There is possible but unconfirmed benefit from anticoagulation in patients with cancer who have a central venous catheter," lead investigator Dr. Elie A. Akl told Reuters Health.

"Those patients," he added, "should balance the possible benefit of reduced incidence of thromboembolic complications with the harms and burden of taking anticoagulant."

As reported in the June 1st issue of *Cancer*, Dr. Akl of the State University of New York at Buffalo and colleagues conducted a literature review and meta-analysis of studies covering the efficacy and safety of the approach in reducing mortality and thromboembolic events.

The researchers reviewed 9 randomized controlled trials involving more than 2000 patients and after excluding 1 study because of its pediatric population, performed a meta-analysis on the results of the remaining 8.

Therapy with unfractionated or low-molecular weight heparin showed a trend towards reduction in symptomatic deep venous thrombosis (relative risk, 0.43).

However, there was no significant effect on mortality, infection, major bleeding or thrombocytopenia. Warfarin therapy had no significant effect on deep venous thrombosis. None of the studies included in the review examined the effects of newer drugs such as ximelagatran and fondaparinux.

Given these findings, concluded Dr. Akl, "The balance of benefits and downsides of thromboprophylaxis in cancer patients with central venous catheters are uncertain. Clinicians together with their patients must weigh these factors carefully when making decisions about thromboprophylaxis."

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