Journal Watch  (Venous Thromboembolism)

Have Palliative Care Teams' Attitudes Toward Venous Thromboembolism Changed?  
A Survey of Thromboprophylaxis Practice Across British Specialist Palliative Care  
Units in the Years 2000 and 2005


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Abstract:

Palliative care patients are highly prothrombotic, yet there are no national guidelines  
for the prevention of venous thromboembolism (VTE).  A survey was undertaken to  
explore thromboprophylaxis practice within British palliative care inpatients units and  
whether it changed over 5 years in keeping with emerging evidence.  A descriptive  
semistructured telephone survey was conducted in April, 2000 and March, 2005 to  
explore current thromboprophylaxis practice.  Seventy-four percent of units  
participated in 2000 and 91% participated in 2005.  Units surveyed in 2000 revealed  
that 2% had thromboprophylaxis guidelines and up to 75% would stop ongoing low  
molecular weight heparin (LMWH) in a highly prothrombotic, good prognosis  
inpatient.  The survey in 2005 indicated that thromboprophylaxis guidelines were  
being developed in 19% of units and only 18% of units surveyed would stop LM@H  
in a patient already receiving thromboprophylaxis (P < 0.001).  There appears to be  
a growing awareness of the problem of VTE in British palliative care inpatients, as  
evidenced by changes in attitudes and practice.  Reasons for this are discussed.

Comments:

Strengths/uniqueness:

The response rate for the survey which is quite impressive at 91% (unusual for this  
type of questionnaires); and also it allows us to observe the evolving views of  
palliative care physicians regarding this controversial topic over time.

Weakness:

The variability of responses depending on whom answers the survey within the  
same SPCU could be interpreted as a weakness. However, it is expected that  
different physicians will have a different perspective regarding this particular topic.

Relevance to Palliative Care:

There is an increased awareness in the palliative care community about the  
relevance of thromboprophylaxis, a highly controversial area. This article provides a  
clear picture of the evolution of the views of palliative care physicians in the UK  
regarding the use of LMWH prophylactically. It also generates some discussion  
regarding the need for thromboprophylaxis guidelines, based on evidence, patient  
acceptability and adequate financial burden.