



The presence of distant metastases, together with the implantation of a central venous catheter, increases the risk even more. A cancer patient also has a 2-5× higher risk of recurrence of VTE during anticoagulant therapy than patients without a malignancy, as well as a 2-6× higher risk of serious bleeding” Halámková and Penka (2017).

Abstract:

About 20% of patients suffer from venous thromboembolism (VTE) during oncology disease. Active cancer, along with cancer therapy, increases the risk of VTE, especially in the first 6 months after diagnosis. Most often VTE accompanies haematological malignancies and CNS tumours, and gastrointestinal, breast, lung, ovary and uterine cancer. The presence of distant metastases, together with the implantation of a central venous catheter, increases the risk even more.

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A cancer patient also has a 2-5× higher risk of recurrence of VTE during anticoagulant therapy than patients without a malignancy, as well as a 2-6× higher risk of serious bleeding.

Thromboembolic disease is also an independent prognostic factor for death in patients with malignant tumours. Management of VTE is a part of everyday oncological practice, and oncologists should be aware of the basic recommendations regarding individual medical procedures and the clinical situations that may occur in cancer patients. They should also be able to adequately treat VTE when it occurs. It is necessary to consider some specificity during prophylaxis, diagnostics and treatment of venous thromboembolism in cancer care. The International Initiative on Thrombosis and Cancer (ITAC-CME) has created a mobile application based on international guidelines for the prevention and treatment of venous thromboembolism. It is a simple schematic algorithm for making decisions, and it helps in choosing the best therapeutic strategy and supports the judicious and appropriate use of anticoagulants for prophylaxis and treatment of VTE in cancer patients. This text contains a summary of the recommendations applicable in routine clinical practice. Key words: venous thromboembolism – cancer – central venous catheter thrombosis – guidelines This work was supported by Czech Ministry of Health – RVO (MMCI, 00209805). The authors declare they have no potential conflicts of interest concerning drugs, products, or services used in the study. The Editorial Board declares that the manuscript met the ICMJE recommendation for biomedical papers

#### Reference:

Halámková, J. and Penka, M. (2017) Current Recommendations for the Prevention and Treatment of Venous Thromboembolism in Cancer Patients. *Klinická Onkologie*. 30(2), p.100-105. .

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