

Thromboprophylaxis in Elderly Surgical Patients: Current State and Future Considerations

Christina Delimpalta¹, Luca Ponchietti²

¹James Paget University Hospital NHS Trust, Gorleston, UK

²Torrevieja University Hospital, Torrevieja (Alicante), Spain

Abstract

Venous thromboembolism is the number one cause of preventable death for hospital inpatients. Aging general surgical patients are especially susceptible to DVT/PE and this risk increases in the presence of other comorbidities prevalent in the elderly. However, it is often unrecognised and undertreated. Various risk scores classify patients in low, moderate and high risk categories. Current guidelines for thromboprophylaxis advocate combination of mechanical methods in the form of elastic stockings or intermittent pneumatic leg compression and pharmacological agents such as low molecular weight heparins and oral anticoagulants. Increased bleeding risk is a concern in this population and the method of prophylaxis needs to be adjusted as a result. Decreased renal function also influences the choice and dosage of medication. The required duration of prophylaxis is unclear but can range from one week to more than a month depending on the underlying pathology and individual risk assessment.

Key words: venous thromboembolism, elderly, thromboprophylaxis