



SHAREABLE PDF

Clinical implications of incidental venous thromboembolism in cancer patients

Frits I. Mulder^{1,2}, Marcello Di Nisio³, Cihan Ay⁴, Marc Carrier⁵, Floris T.M. Bosch^{1,2}, Annelise Segers⁶, Noémie Kraaijpoel¹, Michael A. Grosso⁷, George Zhang⁷, Peter Verhamme⁸, Tzu-Fei Wang⁹, Jeffrey I. Weitz¹⁰, Saskia Middeldorp^{1b}, Gary Raskob¹¹, Ludo F.M. Beenen^{1b}, Harry R. Büller¹ and Nick van Es¹

Affiliations: ¹Dept of Vascular Medicine, Amsterdam Cardiovascular Science, Amsterdam UMC, University of Amsterdam, Amsterdam, The Netherlands. ²Dept of Internal Medicine, Tergooi Hospitals, Hilversum, The Netherlands. ³Dept of Medicine and Ageing Sciences, University G. D'Annunzio, Chieti, Italy. ⁴Dept of Medicine I, Clinical Division of Haematology and Haemostaseology, Medical University of Vienna, Vienna, Austria. ⁵Dept of Medicine, Ottawa Hospital Research Institute at the University of Ottawa, Ottawa, ON, Canada. ⁶ITREAS, Academic Research Organization, Amsterdam, The Netherlands. ⁷Daiichi Sankyo Pharma Development, Basking Ridge, NJ, USA. ⁸Dept of Vascular Medicine and Hemostasis, University Hospitals Leuven, Leuven, Belgium. ⁹Dept of Internal Medicine, Division of Hematology, The Ohio State University Wexner Medical Center, Columbus, OH, USA. ¹⁰McMaster University and the Thrombosis and Atherosclerosis Research Institute, Hamilton, ON, Canada. ¹¹University of Oklahoma Health Sciences Center, College of Public Health, Oklahoma City, OK, USA. ¹²Dept of Radiology, Amsterdam UMC, University of Amsterdam, Amsterdam, The Netherlands.

Correspondence: Frits I. Mulder, Dept of Vascular Medicine, Amsterdam Cardiovascular Science, Amsterdam UMC, University of Amsterdam, Meibergdreef 9, 1105 AZ Amsterdam, The Netherlands.
E-mail: f.i.mulder@amc.nl



@ERSpublications

In cancer patients with incidental venous thromboembolism (VTE), the risk of recurrent VTE is substantial despite initiation of anticoagulant treatment. Incidental VTE is a serious condition, which should be treated similar to symptomatic VTE. <http://bit.ly/2qM4XUp>

Cite this article as: Mulder FI, Di Nisio M, Ay C, *et al.* Clinical implications of incidental venous thromboembolism in cancer patients. *Eur Respir J* 2020; 55: 1901697 [https://doi.org/10.1183/13993003.01697-2019].

This single-page version can be shared freely online.

ABSTRACT

Introduction: In cancer patients, current guidance suggests similar treatment for incidental and symptomatic venous thromboembolism (VTE), mainly based on retrospective data. We aimed to evaluate anticoagulant therapy in cancer patients with incidental and symptomatic VTE.

Methods: The Hokusai VTE Cancer Study was a randomised controlled trial comparing edoxaban with dalteparin for cancer-associated VTE. The primary outcome was the composite of first recurrent VTE or major bleeding. Secondary outcomes included major bleeding, recurrent VTE and mortality. Outcomes in patients with incidental and symptomatic VTE were evaluated during the 12-month study period.

Results: 331 patients with incidental VTE and 679 patients with symptomatic VTE were enrolled, of whom the index event was confirmed by an independent radiologist. Median durations of anticoagulant treatment were 195 and 189 days, respectively. In patients with incidental VTE, the primary outcome occurred in 12.7% of patients, major bleeding in 6.6% of patients and recurrent VTE in 7.9% of patients. Out of the 26 VTE recurrences in patients with incidental VTE, five (31%) were incidental, seven (44%) were symptomatic and four (25%) were deaths for which pulmonary embolism could not be ruled out. In patients with symptomatic VTE, the primary outcome occurred in 13.8% of patients, major bleeding in 4.9% of patients and recurrent VTE in 10.9% of patients. All-cause mortality was similar in both groups.

Conclusion: Clinical adverse outcomes are substantial in both cancer patients with incidental and

symptomatic VTE, supporting current guideline recommendations that suggest treating incidental VTE in the same manner as symptomatic VTE.