Safety of Pre and Post-Operative Administration of LMWH, Assessment in 720 Breast Reductions

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<u>Background:</u> Venous Thrombo Embolism (VTE) prophylaxis is of paramount importance in the management of surgical patients. Mechanical as well as pharmacologic modalities may be used. With the use of pharmacological anticoagulative agents there is a potential for increased operative and postoperative bleeding.

<u>Aim:</u> To assess the safety of perioperative use of Low Molecular Weight Heparin (LMWH) in the setting of breast reduction surgery.

<u>Methods:</u> Retrospective assessment of the reoperation rate due to hematoma formation for breast reductions performed under a regimen of preoperative and postoperative administration of LMWH during a 10 year period.

Results: A total of 720 patients (1358 breasts) received preoperative and postoperative treatment with LMWH. Reoperation due to hematoma formation was required for 37 breasts in 37 patients (5.1% of patients and 2.7% of breasts). Eight patients (1.1%) required transfusion. No patient or operative factors were associated with the need for reoperation. There were no documented cases of deep vein thrombosis or VTE.

<u>Conclusion:</u> Use of a pre and postoperative LMWH administration as a VTE prophylaxis regimen is associated with a reoperation rate for hematoma that is similar to that reported in the literature using other VTE prophylaxis regimens.

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