

Aspirin, Anticoagulants Similarly Prevent VTE After TKA

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In patients having total knee arthroplasty, aspirin non-inferior for venous thromboembolism, death.

HealthDay News — Among patients undergoing total knee arthroplasty (TKA), aspirin alone may provide protection against postoperative venous thromboembolism (VTE) that is similar to that of other anticoagulants, according to a study published online October 17 in *JAMA Surgery*.

Brandon R. Hood, MD, from the University of Michigan in Ann Arbor, and colleagues retrospectively assessed the acceptability of aspirin alone versus anticoagulant prophylaxis for reducing the risk of postoperative VTE among 41,537 patients who underwent primary TKA between April 1, 2013, and October 31, 2015. Pharmacologic prophylaxis methods were: neither aspirin nor anticoagulants (668 patients), aspirin only (12,831 patients), anticoagulant only (eg, low-molecular-weight heparin, warfarin, and Xa inhibitors; 22,620 patients), and both aspirin and anticoagulant (5418 patients).

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The researchers found that VTE events occurred in 1.38% of patients, including 4.79% of those who received no pharmacologic prophylaxis, 1.16% treated with aspirin alone, 1.42% of those treated with anticoagulation alone, and 1.31% prescribed both aspirin and anticoagulation. For the composite of VTE or death, aspirin only was non-

inferior versus other chemoprophylaxis (adjusted odds ratio, 0.85; 95% confidence interval [CI], 0.68 to 1.07; $P=.007$). Bleeding occurred in 1.1% of patients overall and specifically in 1.5% without prophylaxis, 0.9% in the aspirin group, 1.14% with anticoagulation, and 1.35% of those receiving both. For bleeding complications, aspirin alone was also non-inferior (adjusted odds ratio, 0.8; 95% CI, 0.63 to 1; $P<.001$).

"In this study of patients undergoing TKA, aspirin was not inferior to other anticoagulants in the postoperative rate of VTE or death," the authors write.

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