Highlights dal Congresso ISTH 2021

(International Society on Thrombosis and Haemostasis)

Focus sulla gestione del paziente con TEV e cancro: nuovi studi real life

Il rischio di interazione tra i NOAC e le terapie antitumorali mirate[10]

I risultati del registro TacDOAC sono stati presentati sia come presentazione orale sia sotto forma di poster. Un'analisi di 202 pazienti in trattamento concomitante con DOAC e terapia antitumorale ha evidenziato nove eventi emorragici maggiori (incidenza cumulativa: 4%; IC al 95% 2–8%) e 12 eventi emorragici non-maggiori (incidenza cumulativa: 6%; IC al 95% 3–10%). La più alta incidenza cumulativa di eventi emorragici maggiori è stata registrata nei pazienti trattati in concomitanza con un inibitore della tirosin-chinasi di Bruton e un DOAC (10%), seguiti da quelli trattati con un inibitore del fattore di crescita endoteliale vascolare (VEGF) (7%). Gli inibitori del VEGF sono risultati inoltre associati ad un aumento del rischio di TEV rispetto ad altri trattamenti antitumorali, con un incidenza di 2/28 (7,1%) pazienti.

Studio sulla gestione dell'anticoagulante in pazienti con CAT nella pratica clinica francese

Rif:
Mahé I, Chapelle C, Laporte S, Bertoletti L, Mismetti P, Meyer G, Mayeur D, Mahé G, Couturaud F. Management of Cancer Associated Thrombosis in France: A National Survey in Vascular Disease andSupportive Care Specialists [abstract]. Res Pract Thromb Haemost. 2021; 5 (Suppl 2).https://abstracts.isth.org/abstract/management-of-cancer-associated-thrombosis-in-france-a-national-survey-in-vascular-disease-and-supportive-care-specialists/. Accessed October 14, 2021.

Intervista a 414 specialisti che si occupano della gestione dei pazienti con CAT (specialisti oncologici e vascolari), di cui la maggior parte avevano scelto LMWH come trattamento iniziale. Le motivazioni di questa scelta risiedevano nel tipo di cancro e cioè il sito (ad esempio cancro GI), lo stadio e l'evoluzione e nelle eventuali controindicazioni ai trattamenti antitumorali per il rischio emorragico. Tuttavia dopo una mediana di tre mesi, il 90% riteneva sicuro passare ai DOAC.

Sicurezza dei DOAC rispetto ad eparina a basso peso molecolare nel cancro gastrointestinale (GI) e genitourinario (GU)

Riferimento.
Rahman S, Trias J, Barouqa M, Kushnir M, Billett H. Safety of Direct Acting Oral Anticoagulants (DOACs) inComparison to Low Molecular Weight Heparin (LWMH) in Gastrointestinal and Genito-urinary Cancers [abstract].Res Pract Thromb Haemost. 2021; 5 (Suppl 1). https://abstracts.isth.org/abstract/safety-of-direct-acting-oral-anticoagulants-doacs-in-comparison-to-low-molecular-weight-heparin-lwmh-in-gastrointestinal-and-genito-urinary-cancers/. Accessed August 3, 2021.

Studio retrospettivo di coorte che confrontava le incidenze di sanguinamenti in 206 pazienti consecutivi con cancro attivo GI e GU che ricevevano apixaban (n=86), rivaroxaban (n=73) e LMWH (n=47).

Non sono emerse differenze statisticamente significative dei sanguinamenti GI/GU rispetto alla scelta dell'anticoagulante e nessuna differenza significativa di sanguinamenti maggiori o sanguinamenti non maggiori clinicamente rilevanti rispetto al sito del tumore.

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2. Riess H, Sinn M, Lohneis A *et al*. Improved patient-reported treatment satisfaction with rivaroxaban as compared to low molecular weight heparins for cancer patients with acute venous thromboembolism - results from the CONKO-011 trial. ISTH. Virtual, 17 July–21 July 2021. ePoster LPB0041. Available at: https://isth2021.abstractserver.com/program/#/details/presentations/2426 [accessed 14 July 2021].
3. Martin K. Use of direct oral anticoagulants in obese patients with venous thromboembolism: Updated guidance from teh SSC on control of anticoagulation International Society of Thrombosis and Haemostasis. Virtual, 17 July–21 July 2021. Oral Available at: https://isth2021.abstractserver.com/program/#/details/presentations/226 [accessed 28 July 2021].
4. Kirchhof P, Camm AJ, Goette A *et al*. Early rhythm-control therapy in patients with atrial fibrillation. *N Engl J Med* 2020;383:1305-1316.
5. Turpie AGG, Farjat AE, Haas S *et al*. 36-month clinical outcomes of patients with venous thromboembolism: GARFIED-VTE. International Society of Thrombosis and Haemostasis. Virtual, 17 July–21 July 2021. Oral OC 25.3. Available at:

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10. Wang T-F, Baumann Kreuziger L, Leader A *et al*. Characteristics and outcomes of patients on concurrent direct oral anticoagulants and targeted anticancer therapies - TacDOAC registry. International Society of Thrombosis and Haemostasis. Virtual, 17 July–21 July 2021. Poster PB1091. Available at: https://isth2021.abstractserver.com/program/#/details/presentations/745 [accessed 28 July 2021].