
Tilmelding af Foredrag

Foredragets titel

Incidence of venous thromboembolism in otolaryngology following head and neck surgery: a Danish nation-wide cohort study

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Introduktion

Venous thromboembolism (VTE) is a common complication in patients undergoing surgery and anticoagulant treatment may be considered to reduce this risk. Patients undergoing head and neck surgery are heterogeneous, and VTE risk is known to vary considerably according to patient characteristics. We estimated VTE risk after surgery among these patients, stratified according to cancer and anatomical procedure sites.

Materiale/metode

We linked nationwide Danish health registries to identify all patients with head and neck surgery performed from January 2010 through December 2018. Cumulative incidence function, by means of the Aalen-Johansen estimator assuming death as competing risk, was used to estimate VTE risk after 3 months.

Resultater

In total, 116,953 were included in the study, hereof 10% (n=12,083) had active cancer. After 3 months, 1.3% of the cancer patients experienced VTE and 0.3% of the patients without cancer. Stratified in anatomical areas, no patients with ear surgery had VTE. For patients with nose surgery, 0.7% with cancer and 0.2% without cancer had VTE. For throat/mouth surgery, 0.9% and 0.2% had VTE, respectively. For patients with an endoscopic procedure, 1.5% and 0.7% had VTE, respectively.

Diskussion

Few patients without cancer suffer from VTE after head and neck surgery. For patients with cancer, appropriate prophylaxis with anticoagulation and/or mechanical compression may be considered; risk stratification may serve as a useful tool to further identify head and neck cancer patients at highest risk for VTE.



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