

Injectable Treatment for Blood Clots in Advanced Cancer Patients Increases, According to New Research

The Associated Press

The use of an injectable, clot-preventing drug known as Low Molecular Weight Heparin to treat patients with advanced cancer complicated by blood clots increased steadily between 2000 and 2007, according to a new study published in *The Oncologist*, funded by the National Cancer Institute and led by Kaiser Permanente Colorado. However, despite previous research indicating LMWH is the preferred first-line treatment for cancer patients experiencing blood clots, use of LMWH is low compared to another commonly used anticoagulant, warfarin.

The study was conducted by a team of Kaiser Permanente researchers from Colorado, Oregon, Washington and Northern California, Dana-Farber Cancer Institute in Boston and Group Health Research Institute, Group Health Cooperative in Seattle.

Venous thromboembolism, or blood clots, are common and serious complications in cancer patients. Anticoagulation drugs work to prevent additional clots from forming while the body partially or completely dissolves the initial clot.

The study examined data from electronic health records of four health plans participating in the Cancer Research Network, a consortium of integrated health plans that pool data for research. Patients were identified with advanced breast cancer, colorectal, lung or prostate cancer who received treatment between January 2000 and December 2008 at Group Health Cooperative and Kaiser Permanente regions in Colorado, Northern California, and Oregon and Washington.

Over the entire study period, 25 percent of patients received LMWH as a primary treatment for blood clots. A majority of patients, 74 percent overall, received warfarin-based therapy.

"Blood clots are a frequent complication in patients with cancer, so it's essential to understand patterns of care and adherence to guideline recommendations for them," said Tom Delate, PhD, study lead author. "Current medical literature on this topic is limited, so our findings will add tremendously to this knowledge gap and, hopefully, stimulate discussions on the need for comparative effectiveness research evaluations between blood clot anticoagulation therapies." A randomized controlled trial in July 2003 demonstrated that LMWH was more effective at preventing recurrent clots than warfarin in patients with cancer. In addition, current clinical guidelines from the American College of Chest Physicians, American Society of Clinical Oncology and National Comprehensive Cancer Network recommend LMWH treatment for cancer-related blood clots.

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The study did not determine why warfarin continued to be the preferred anticoagulation therapy for advanced cancer patients. Warfarin does have a long history of use in treatment of blood clots, and high-quality anticoagulation monitoring services are available in the health plans studied, possibly resulting in a high level of physician comfort with warfarin. In addition, because LMWH requires daily injections, patients may prefer warfarin, since it is available in tablet form.

According to Delate, a clinical pharmacy research scientist at Kaiser Permanente Colorado, next steps should be to study why use of LMWH is low compared to warfarin and to compare the effectiveness of LMWH with warfarin in patients with advanced cancer.

Additional authors on the study included: Daniel Witt, PharmD, Kaiser Permanente Colorado Pharmacy Department; Debra Ritzwoller, PhD, Kaiser Permanente Colorado Institute for Health Research; Jane Weeks, MD, Dana-Farber Cancer Institute; Lawrence Kushi, PhD, Kaiser Permanente Northern California Division of Research; Mark Hornbrook, PhD, Kaiser Permanente Center for Health Research; Erin Aiello Bowles, MPH, Group Health Research Institute, Group Health Cooperative; and Deborah Schrag, MD, Dana-Farber Cancer Institute About Kaiser Permanente Kaiser Permanente is committed to helping shape the future of health care. We are recognized as one of America's leading health care providers and not-for-profit health plans. Founded in 1945, our mission is to provide high-quality, affordable health care services to improve the health of our members and the communities we serve. We currently serve 8.9 million members in nine states and the District of Columbia. Care for members and patients is focused on their total health and guided by their personal physicians, specialists and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the-art care delivery and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education and the support of community health. For more information, go to: www.kp.org/newscenter.

Contact: Amy Whited, Kaiser Permanente, 303-344-7518 Amy.L.Whited@kp.org

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