

O-S-002 – LATE BREAKING CLINICAL TRIAL: A LARGE-SCALE, GLOBAL OBSERVATIONAL STUDY OF VENOUS THROMBOEMBOLISM RISK AND PROPHYLAXIS IN THE ACUTE HOSPITAL CARE SETTING: THE ENDORSE STUDY

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Introduction: Little information is available regarding global venous thromboembolism (VTE) risk and prophylaxis practices. ENDORSE (**E**pidemiologic **I**nternational **D**ay for the Evaluation of Patients at **R**isk for Venous Thromboembolism in the Acute Hospital Care **S**etting), is a multinational, observational, cross-sectional survey, designed to assess the prevalence of VTE risk in the acute hospital care setting, and to determine the proportion of at-risk patients who receive effective prophylaxis.

Methods: Patients were enrolled from 358 randomly selected hospitals in 32 countries, encompassing 6 continents. All hospital in-patients who were ≥ 40 years old and admitted in a medical ward, or who were ≥ 18 years old and admitted in a surgical ward or admitted for a non-surgical trauma, were enrolled to assess their risk of VTE. Patients who were not evaluable because of missing data or were admitted for VTE treatment were excluded from the analysis. Enrolled patient charts were reviewed including, medical history, current medical conditions, type of surgery, initiation and type of VTE prophylaxis. The American College of Chest Physicians (ACCP) evidence-based consensus guidelines were employed to evaluate VTE risk and prophylaxis use.

Results: Of 68,183 patients, 30,827 (45%) and 37,356 (55%) were categorized as surgical or medical, respectively. Based on ACCP criteria, a mean of 52% of enrolled hospital in-patients were judged to be at risk for VTE, including 64% of surgical and 42% of medical patients. Of the surgical and medical patients, 59% and 40% received recommended VTE prophylaxis, respectively (see table).

| Patients [X, range*] | At VTE risk [X, range*] | Received VTE Px [X, range*] |
|----------------------------------|--------------------------------|------------------------------------|
| All (N=68,183) [100%] | 35,329 (52%, 36–72) | 17,732 (50%, 2–84) |
| Surgical (N=30,827) [45%, 24–67] | 19,842 (64%, 44–80) | 11,613 (59%, 0–92) |
| Medical (N=37,356) [55%, 33–72] | 15,487 (42%, 21–71) | 6,119 (40%, 3–70) |

*Mean and range of proportions among 32 countries.

Conclusions: ENDORSE demonstrates the high prevalence of patients at risk for VTE and the low rate of prophylaxis use. Our data reinforce the rationale for urgently implementing hospital-wide strategies for systematically assessing patient VTE risk and for providing appropriate prophylaxis.