# IVC filters confirmed effective for patients at embolism risk

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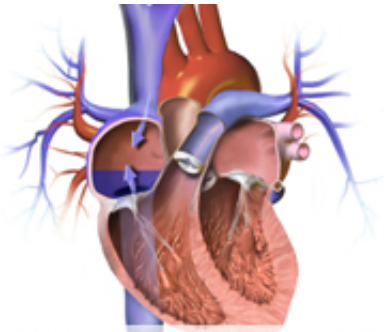

Image courtesy of Blausen Medical

Inferior vena cava filters are safe for use in patients at higher risk for venous thromboembolic events while undergoing major spinal surgery, according to research published in the June issue of the *Journal of Spinal Disorders & Techniques*.

(HealthDay) -- Inferior vena cava (IVC) filters are safe for use in patients at higher risk for venous thromboembolic events (VTEs) while undergoing major spinal surgery, according to research published in the June issue of the *Journal of Spinal Disorders & Techniques*.

Justin M. Dazley, M.D., from the Stony Brook University Hospital in New York City, and colleagues reviewed cases of patients undergoing major spinal surgery from 2006 to 2009 who had IVC filters placed for VTE prophylaxis. Patients with two or more VTE risk factors were included. Intercepted emboli were identified using cavograms obtained

at the time of attempted filter retrieval.

The researchers found that, at attempted filter retrieval, about 17 percent of patients had entrapped thrombus present, and an additional 17 percent of filters changed position within the IVC and could not be retrieved. There were no complications related to IVC filter use. None of the patients experienced symptomatic pulmonary embolism. One patient developed a deep vein thrombus requiring pharmacologic intervention and one patient developed superficial phlebitis.

"These findings show that the decreased rate of pulmonary embolism observed in this and other series is likely because of the use of IVC filters, rather than sampling bias inherent when studying a relatively rare problem," the authors write.

One author disclosed financial ties to the medical device industry.

**More information:** Abstract
Full Text (subscription or payment may be required)