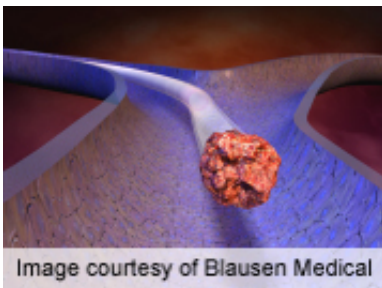


Venous thromboembolism risk up with cisplatin-based chemo

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Patients with advanced solid tumors receiving cisplatin-based chemotherapy regimens have a significantly higher risk of having a venous thromboembolic event compared with those who do not receive a cisplatin-based regimen, according to research published online Nov. 13 in the *Journal of Clinical Oncology*.

(HealthDay)—Patients with advanced solid tumors receiving cisplatin-based chemotherapy regimens have a significantly higher risk of having a venous thromboembolic event (VTE) compared with those who do not receive a cisplatin-based regimen, according to research published online Nov. 13 in the *Journal of Clinical Oncology*.

To evaluate the incidence and risk of VTEs associated with cisplatin-based chemotherapy, Sonia Seng, M.D., of the Southcoast Centers for Cancer Care in Fairhaven, Mass., and colleagues conducted a systematic review and meta-analysis of 38 [randomized controlled trials](#) from 1990 to 2010 involving 8,216 patients with various advanced solid tumors.

The researchers found that the incidence of VTEs in patients treated with cisplatin-based chemotherapy was 1.92 percent, compared with 0.79 percent in patients who did not receive cisplatin-based regimens. Cisplatin-based therapy was associated with significantly increased risk of a VTE (relative risk [RR], 1.67). Patients receiving a weekly equivalent cisplatin dose greater than 30 mg/m² had the highest risk (RR, 2.71), and increased risks were also noted for patients in trials during 2001 to 2010 (RR, 1.72).

"We observed a 1.67-fold increase in the risk of VTEs with cisplatin as compared with non-cisplatin-based chemotherapy," the authors write. "Given the morbidity and mortality associated with VTEs in patients with cancer, our study adds further support to calls for prospective trials of [cisplatin](#)-based chemotherapy administered with prophylactic anticoagulation."

Several authors disclosed [financial ties](#) to the pharmaceutical industry.

More information: [Abstract](#)
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