

Continued aspirin treatment safe with partial nephrectomy

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(HealthDay)—Continuing aspirin for chronic antiplatelet therapy is safe



in patients undergoing laparoscopic partial nephrectomy, according to a study published in the April issue of *The Journal of Urology*.

David A. Leavitt, M.D., from the Hofstra North Shore LIJ School of Medicine in New Hyde Park, N.Y., and colleagues evaluated perioperative outcomes among 430 consecutive patients undergoing laparoscopic partial nephrectomy (January 2012 to October 2014). Patients were stratified between whether they continued <u>aspirin</u> or stopped treatment preoperatively.

The researchers found that among 101 patients (23.4 percent) on chronic aspirin therapy, 17 continued antiplatelet treatment (16.8 percent). One patient in the aspirin group developed bleeding postoperatively and required angioembolization. In the off-aspirin cohort, one myocardial infarction was observed. There were no significant differences in the incidence of major postoperative complications, intraoperative blood loss, transfusion rate, length of hospital stay, or rehospitalization rate. Continued aspirin use was tied to significantly increased operative time (181 versus 136 minutes; P = 0.01).

"Laparoscopic partial nephrectomy is safe and effective in <u>patients</u> on chronic antiplatelet therapy who require perioperative aspirin for cardioprotection," the authors write.

More information: <u>Abstract</u> <u>Full Text</u>

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