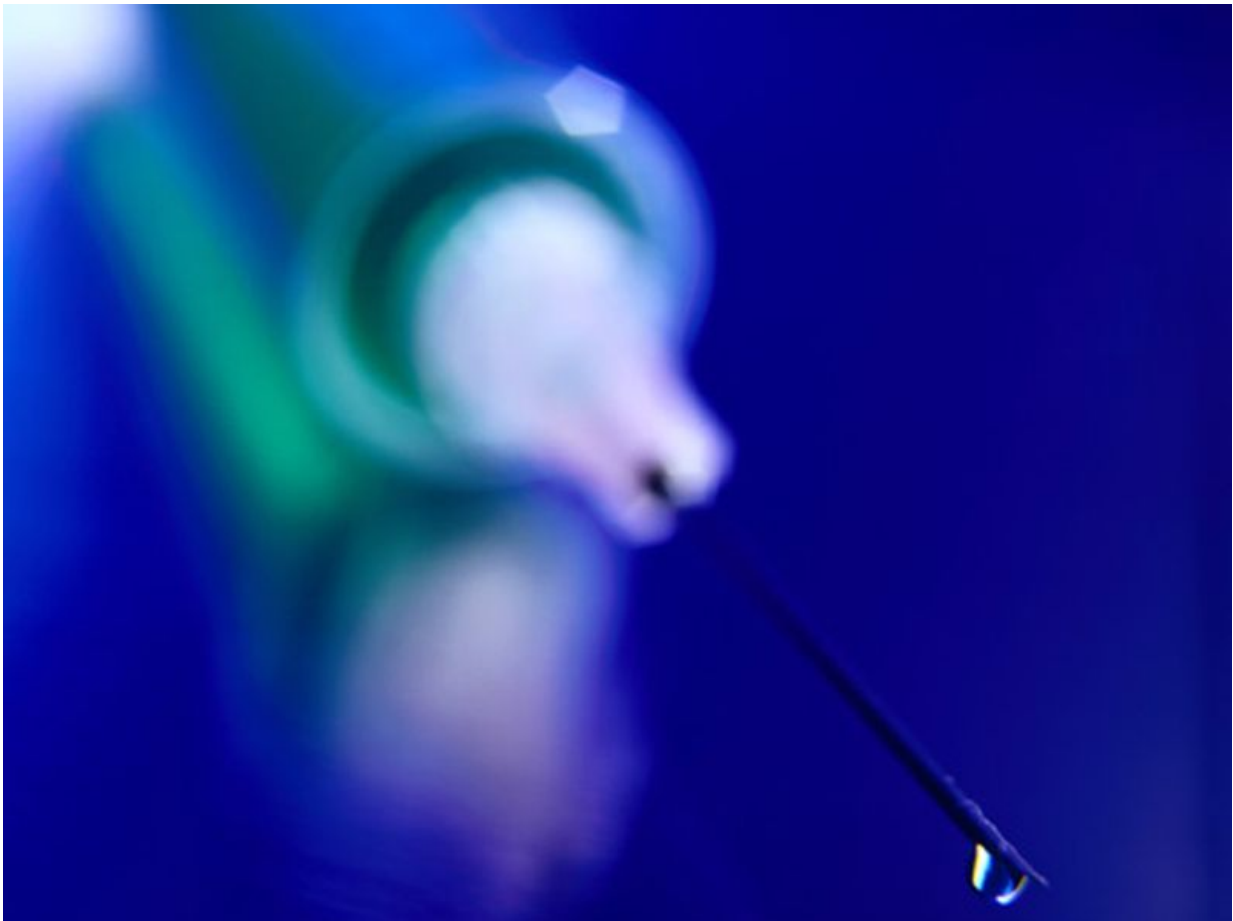


Fewer major bleeds with once- versus twice-daily enoxaparin

February 6 2017



(HealthDay)—Once-daily enoxaparin is associated with fewer major

bleeds than enoxaparin twice daily in patients with acute venous thromboembolism (VTE), according to a study published online Jan. 25 in the *Journal of Thrombosis and Haemostasis*.

Javier Trujillo-Santos, M.D., Ph.D., from the Hospital General Universitario Santa Lucía in Murcia, Spain, and colleagues assessed data from the RIETE registry for 4,730 patients receiving enoxaparin: 3,786 and 944 received enoxaparin twice and once daily, respectively.

The researchers found that, compared with those receiving enoxaparin twice daily, once-daily enoxaparin correlated with a trend toward more VTE recurrences (odds ratio [OR], 1.79; 95 percent confidence interval [CI], 0.55 to 5.88), fewer major bleeds (OR, 0.42; 95 percent CI, 0.17 to 1.08), and fewer deaths (OR, 0.32; 95 percent CI, 0.13 to 0.78) during the first 15 days. Patients on enoxaparin once daily had more VTE recurrences (OR, 2.5; 95 percent CI, 1.03 to 5.88), fewer major bleeds (OR, 0.40; 95 percent CI, 0.17 to 0.94), and fewer deaths (OR, 0.58; 95 percent CI, 0.33 to 1.00) at day 30. On propensity analysis, [patients](#) on enoxaparin once daily had fewer bleeds at 15 and 30 days (hazard ratios, 0.30 [95 percent CI, 0.10 to 0.88] and 0.16 [95 percent CI, 0.04 to 0.68]) and fewer deaths at 15 and 30 days (hazard ratios, 0.37 [95 percent CI, 0.14 to 0.99] and 0.19 [95 percent CI, 0.07 to 0.54]).

"Enoxaparin prescribed once daily results in fewer major bleeds than [enoxaparin](#) twice daily," the authors write.

The RIETE registry was supported by Sanofi Spain and Bayer Pharma AG.

More information: [Full Text \(subscription or payment may be required\)](#)

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Citation: Fewer major bleeds with once- versus twice-daily enoxaparin (2017, February 6)
retrieved 27 April 2024 from
<https://medicalxpress.com/news/2017-02-major-once-twice-daily-enoxaparin.html>

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