

Few urologists follow peri-op thromboprophylaxis guidelines

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Steve Sterious, M.D., of the Temple University School of Medicine in Philadelphia, and colleagues sent an electronic survey to 10,966 AUA members to assess adherence to the AUA Best Practice Statement on the use of thromboprophylaxis for urological procedures.

The researchers found that, among 1,210 survey responses, the largest

group of respondents was urological oncologists and/or laparoscopic/robotic specialists (26.0 percent); this group reported greater use of thromboprophylaxis (odds ratio [OR], 1.3) than non-urological [oncologists](#) and/or laparoscopic/robotic specialists. About half of the respondents were aware of the guidelines, and familiarity with the Best Practice Statement was associated with a higher likelihood of use of thromboprophylaxis (OR, 1.4). Urologists who recently completed residency training (graduating after the year 2000) were significantly more likely to use thromboprophylaxis in high-[risk patients](#) undergoing radical cystectomy (79.2 percent) than were earlier graduates (63.4 percent).

"Self-reported adherence to AUA Best Practice Statement was low, even in high risk cases with clear AUA Best Practice Statement recommendations such as radical cystectomy," the authors write. "These data identify opportunities for quality improvement in patients undergoing major urological surgery."

One study author disclosed financial ties to pharmaceutical companies.

More information: [Abstract](#)
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