

Preventing Clotting Disorders

Venous Thromboembolism (VTE)

What is the problem?

- Venous Thromboembolism (VTE) is an underdiagnosed, serious, preventable medical condition.
- Approximately 100,000 people die each year from VTE.
- There are evidence-based clinical guidelines for preventing hospital-associated VTE; however, hospitals and practitioners are not using or fully implementing the guidelines.



What do we know?

- Many of the risk factors for VTE are well described and include: recent hospitalization, cancer, immobility, pregnancy, obesity, history of an inherited clotting disorder, and older age (over age 60).
- An estimated one-third to one-half of VTE events occur without any known risk factors.
- During pregnancy, a woman's risk of blood clots increases about four to five fold because of the extra clotting factors present which protect them at the time of childbirth.

What can we do?

- We are focusing on helping hospitals to follow recommended protocols that will reduce preventable conditions like VTE.
- We are working with the U.S. Department of Health and Human Services to reduce the incidence of hospital-associated conditions like VTE through the Partnership for Patients: Better Care, Lower Costs initiative. The initiative brings together, federal, state and local agencies, private sector businesses, hospitals and others to make hospital care safer.

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- We are developing a VTE event-reporting module for the Patient Safety Component of the National Healthcare Safety Network (NHSN). The reporting system will quantify the burden of VTE in hospital patients and evaluate and translate evidence of effective interventions. CDC's NHSN is a voluntary hospital reporting system for preventable hospital-associated conditions. Healthcare facilities in all 50 states report to NHSN and more than 4400 facilities are enrolled nationwide.

Accomplishments

- The *"This is Serious"* campaign, developed in collaboration with the Venous Disease Foundation was the recipient of a Gold Aster Award (patient education category), one of the largest national competitions for outstanding excellence in healthcare advertising. The campaign encourages women to be alert to the symptoms of DVT. The first module targeting pregnant and postpartum women has been implemented. A new module is beginning development and will focus on the risk of VTE in surgery and trauma.
- Convened an expert panel meeting on the prevention of hospital-associated VTE to develop recommendations to improve VTE prophylaxis (measures to prevent a disease or condition), such as the use of blood thinners and compression stockings, in hospitalized patients.
- Provided \$875,000 to five thrombosis and hemostasis centers, the Thrombosis and Hemostasis Research and Prevention Network, to conduct research that will help identify risk factors for VTE and improve early diagnosis and treatment.
- Funded the National Blood Clot Alliance to conduct patient education forums on VTE through its *"Stop the Clot"* campaign.
- Funded research that will analyze data on surgical patients seen at Veterans Administration medical centers throughout the United States to determine patterns of VTE and VTE prophylaxis.

Did you know?

About 30-50% of VTEs occur among current patients or patients recently discharged from acute care hospitals, 20% are associated with cancer, and another 10% among residents of long-term-care facilities.

Caught early, DVT can be safely treated by a health care provider. Untreated it can be life-threatening.

Looking to the future

- Advance the prevention of clotting disorders.
- Complete development and begin testing a VTE event reporting module for the Patient Safety Component of the National Healthcare Safety Network.

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- Provide funding for two sites to conduct population-based tracking to identify the majority of VTE diagnoses that occur in outpatient settings, including people with recent hospital discharges.
- Publish public health recommendations in CDC's *MMWR* Recommendations and Report for decreasing the incidence of hospital-associated VTE.

Notable 2011 NCBDDD Scientific Publications

- Austin H, De Staercke C, Lally C, Bezemer ID, Rosendaal FR, Hooper WC. New gene variants associated with venous thrombosis: a replication study in White and Black Americans. *J Thromb Haemost.* 2011;9(3):489-95.
- Beckman MG, Grosse SD, Kenney KM, Grant AM, Atrash HK. Developing surveillance activities for deep vein thrombosis and pulmonary embolism. *American Journal of Preventive Medicine* 2011;41(6S4):S428-34.
- Mili FD, Hooper WC, Lally C, Austin H. The impact of co-morbid conditions on family history of venous thromboembolism in Whites and Blacks. *Thrombosis Research* 2011;127:309-316.



Featured Video

[View "A Look at Deep Vein Thrombosis and Pulmonary Embolism" Video>>](#)

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