

Venous Thromboembolism is Still Undermined in Bangladesh

Salma Afrose

Ex-Professor of Haematology, Dhaka Medical College & Hospital

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Correspondence: Professor Salma Afrose. email: salma_afrose@yahoo.com, phone: +8801552428020

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Venous thromboembolism (VTE) has got much attention in western world as it is an important cause of death in hospitalized patients. VTE not only causes mortality, but also causes morbidity, and increases hospital stay which produces burden on treatment cost and healthcare expenditure.

It comprises of deep vein thrombosis and pulmonary embolism. The risk lies in their presentation. Both can be asymptomatic and cannot be suspected at all. If undiagnosed, this will lead to chronic venous disease, repeated VTE and chronic thromboembolic pulmonary hypertension.^{1,2}

Trend of VTE is increasing. Factors responsible are increasing age, surgery, prolonged stay in bed, malignancy, central venous catheter and trauma surgery. Increasing age is important as elderly people have more co-morbidities like diabetes mellitus and hypertension. Pregnancy, oral pills intake and hormone replacement therapy are added cause in women. Young patients are also found to have VTE as increasing DM, HTN in younger patients, lifestyle and sedentary works make them vulnerable to this situation.

With western data VTE is predominantly a disease of older age but a study in India shows 44% patient are between 40-59 years and 34% below 40 yrs.³ We do not have any large study on VTE patients. Few small studies have been done among surgical patients.

Incidence of VTE is not known in our hospital admitted patient population. Many times, the cause of sudden death is unknown to us. It is believed that incidence of VTE is less in Asian people than Western people. But studies show the prevailing notion is wrong. Prophylaxis, early diagnosis and

intervention lower the mortality and morbidity in these patients.

It is essential to find out the incidence of VTE in hospitalized patients. Feasible methods for early detection are to be decided. Intervention and necessary prophylaxis will be planned to reduce the deleterious effect of VTE, especially PE.

Lastly, VTE is a global disease. Its risk assessment, if practiced and implemented for all hospitalized patients at admission and discharge, many deaths can be prevented

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