

AB071. SOH23ABS_227. Caprini score risk calculator as a tool to guide anticoagulation post-endovenous ablation to minimize risk of venous thrombo-embolism

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Background: Endovenous ablation is a commonly performed procedure to treat varicose veins. However, many of these patients have multiple co-morbidities and are at high risk for venous thrombo-embolism (VTE). We describe the outcome of a case series of 169 patients having endovenous ablation and VTE prophylaxis guided by the Caprini score.

Methods: This is a retrospective single centre study conducted in University Hospital Galway. The electronic database and patient records were searched to identify all patients having varicose vein surgery from the period October 2021 to October 2022. Demographic data and clinical data were compiled. The Caprini score was calculated and the post- operative outcome was recorded.

Results: A total of 169 patients were evaluated during this study period. Seventy-five were male and 84 were female. The average age was 58 years. All patients underwent either endovenous clarivein or endovenous foam ablation. Fifty-four of these had active ulcerations. One hundred patients had a Caprini score risk of <0.7%. Fifty-nine patients had a Caprini score risk of >1.8%. Of those 59 patients, 48 received post-procedure anticoagulation. Twenty-nine of these had a post-procedure deep vein thrombosis (DVT)

check at 2 weeks with 28 negative and 1 positive test. The overall incidence of DVT was 0.6%. No bleeding events were recorded.

Conclusions: Endovenous ablation can be performed safely in high-risk patients when using the Caprini score to guide post-procedure VTE prophylaxis. Further studies with more power need to be performed to confirm the utility of the Caprini score in this patient group.

Keywords: Vascular; varicose veins; endovenous ablation; surgery; deep vein thrombosis (DVT)

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Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.

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