Venous Thrombophlebitis: Anticoagulation, Compression, Follow up

Sarah Onida BSc MBBS MRCS PhD
NIHR Clinical Lecturer in Vascular Surgery
Academic Section of Vascular Surgery
Imperial College London

Disclosures

• None

Superficial Thrombophlebitis

• Estimated annual incidence 0.64%

Risk of DVT

• 6 – 44% develop a DVT
• 33% asymptomatic PE
• 2 – 13% symptomatic PE
• Truncal phlebitis has the strongest association with VTE
• < 3 cm from junction high rates of DVT (14 - 70%) → full anticoagulation

Management

• Symptoms
• Prevent SVT extension
• Prevent SVT recurrence
• Prevent VTE
Evidence

- SVT of at least 5 cm in length
- Prophylactic fondaparinux or LMWH for 45 days over no anticoagulation (Grade 2B)
- Fondaparinux over LMWH (Grade 2C)

Patients who place a high value on avoiding the inconvenience or cost of anticoagulation and a low value on avoiding infrequent symptomatic VTE are likely to decline anticoagulation.

Evidence

- SVT of at least 5 cm in length
- Prophylactic fondaparinux or LMWH for 45 days over no anticoagulation (Grade 2B)
- Fondaparinux over LMWH (Grade 2C)

Evidence

- Fondaparinux 2.5 mg for 6 weeks
  - VTE, SVT extension and symptomatic recurrence
  - LMWH
  - SVT extension and recurrence
  - Low quality evidence

Evidence

- Fondaparinux 2.5 mg for 6 weeks
  - VTE, SVT extension and symptomatic recurrence
  - LMWH
  - SVT extension and recurrence
  - Low quality evidence

‘Efficacy of anticoagulation may vary according to the underlying risk factors. Some patients may benefit from higher intensity or longer anticoagulant treatments.’
Compression

- Symptomatic relief
- No data on class or length of time

Follow up

- No clear guidance
- Anywhere between 8 weeks – 6 months
- Individual case assessment
- Need to re-image for thrombus extension
- Context
  - Varicose veins
  - Pregnancy
  - Travel
  - Malignancy

Thrombus extension

Conclusion

- SVT is not benign
- Prophylactic fondaparinux for 45 days
  - Role for Rivaroxaban
- Little evidence on compression
- Evidence on intervention unclear
- Follow up to be guided in a case by case basis
- Further adequately powered, high quality studies required

NO ADDITIONAL BENEFIT
UNDERPOWERED
Thank You