



Accurate Counselling of VTE Prevention in Pregnancy

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Background

- LMWH is the first line treatment choice across the NHS for VTE prophylaxis/treatment, given its safety profile and ease of correction if therapeutic dose exceeded.
- Commonly used in obstetrics as patient cohort have more risk factors for thromboembolism. Routinely given in the postnatal period if patient has a VTE score >1.
- Green Top Guideline 37a – “LMWHs are the agents of choice for antenatal and postnatal thromboprophylaxis” (1)
- “Fondaparinux should be reserved for women intolerant of heparin compounds. Fondaparinux use in pregnancy should be in conjunction with a consultant haematologist with expertise in haemostasis and pregnancy”
- All LMWH are derived from Porcine origins and therefore a subset of patients across the UK have raised objections about receiving the treatment and requested an alternative non-animal derived option.
- Current demographic of the population served by our hospital has a significant number of patients who voiced this objection.
- Given the importance of VTE Prophylaxis in high-risk groups such as pregnant women, we wanted to explore if an alternative was available and whether implementing it as an established treatment pathway was a viable option.
- Additionally, a lack of staff awareness on the issue meant that patient’s were not able to make informed decision making

Aims

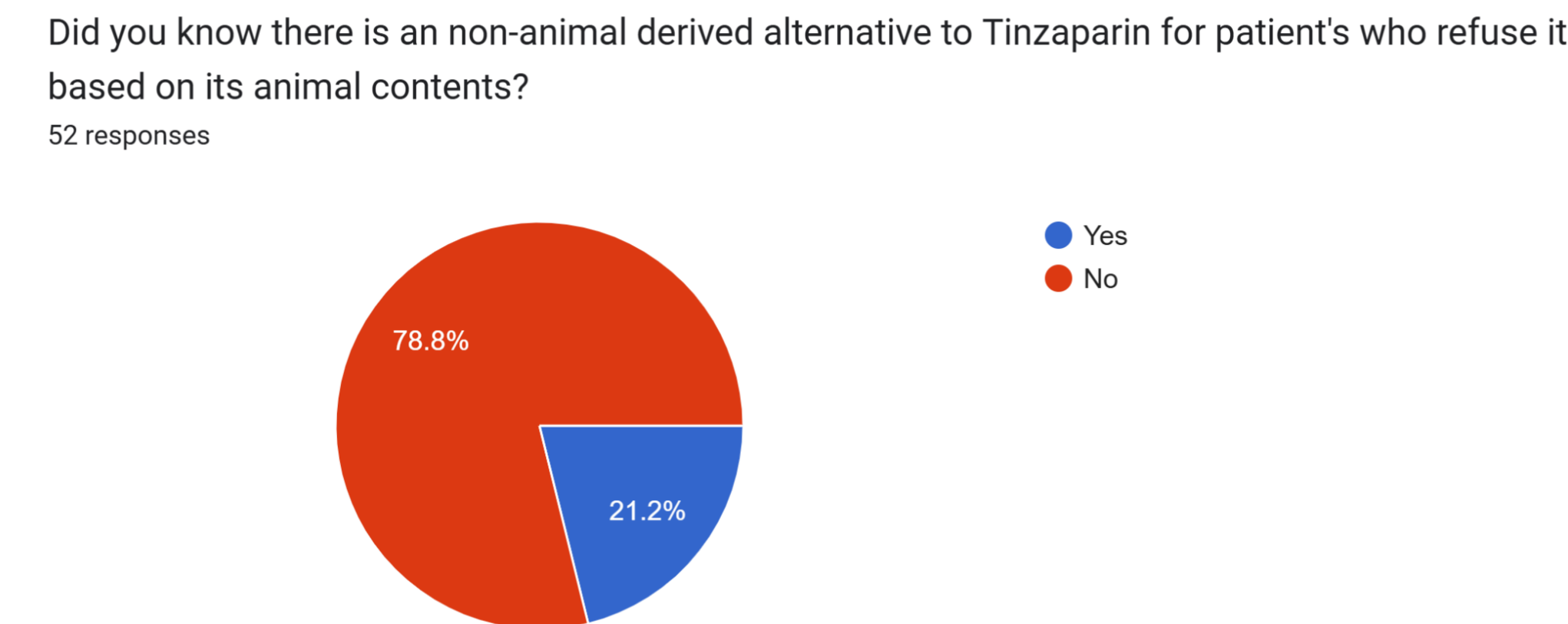
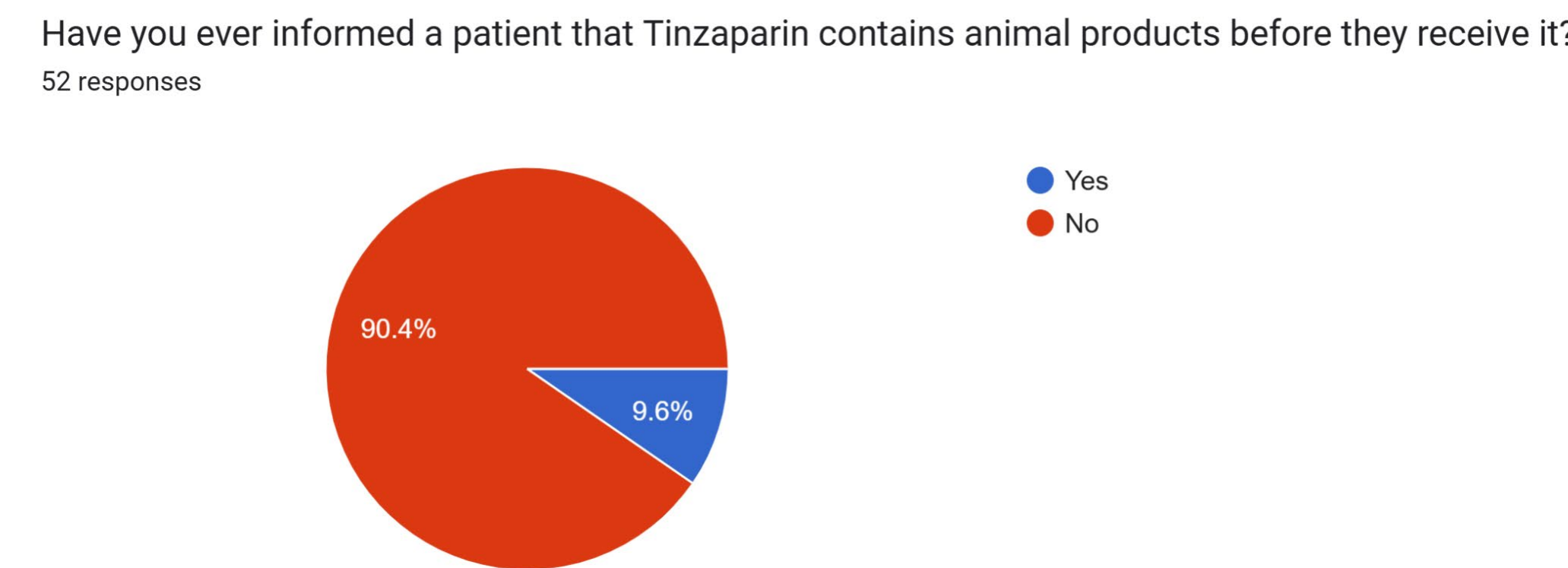
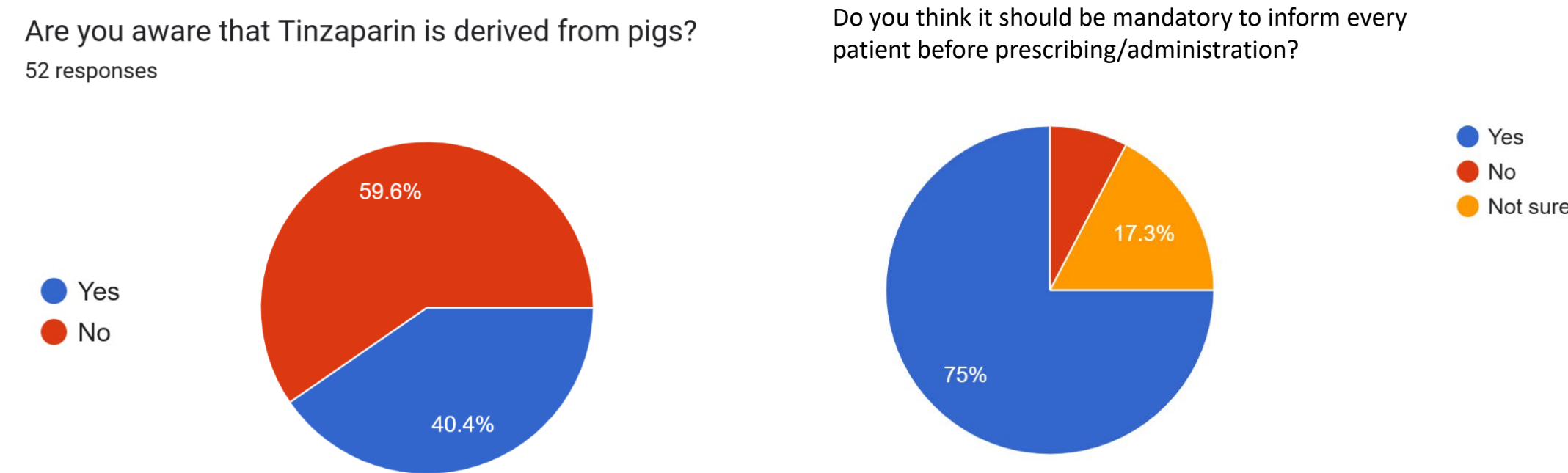
- To highlight the proportion of patients who object to LMWH in the peripartum period
- To investigate the reasons behind patient objections
- To investigate the practicality of offering alternative anticoagulation
- To identify current awareness on the issue by staff
- To create a Standard Operating Procedure (SOP) for clinicians to refer to if patients object to having LMWH

Methodology

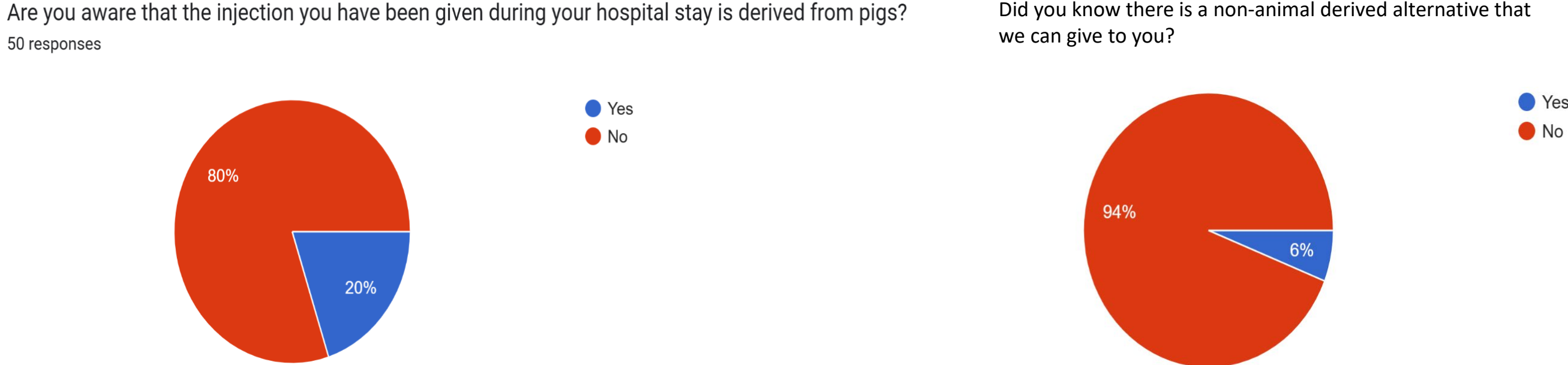
- A questionnaire was given to staff and patients working within the maternity unit at the North Middlesex Hospital
- A QR code was scanned which directed respondents to an online link.
- Responses gathered over a time frame of 3 months were collated and analysed
- A mixture of quantitative and qualitative data was obtained

Results

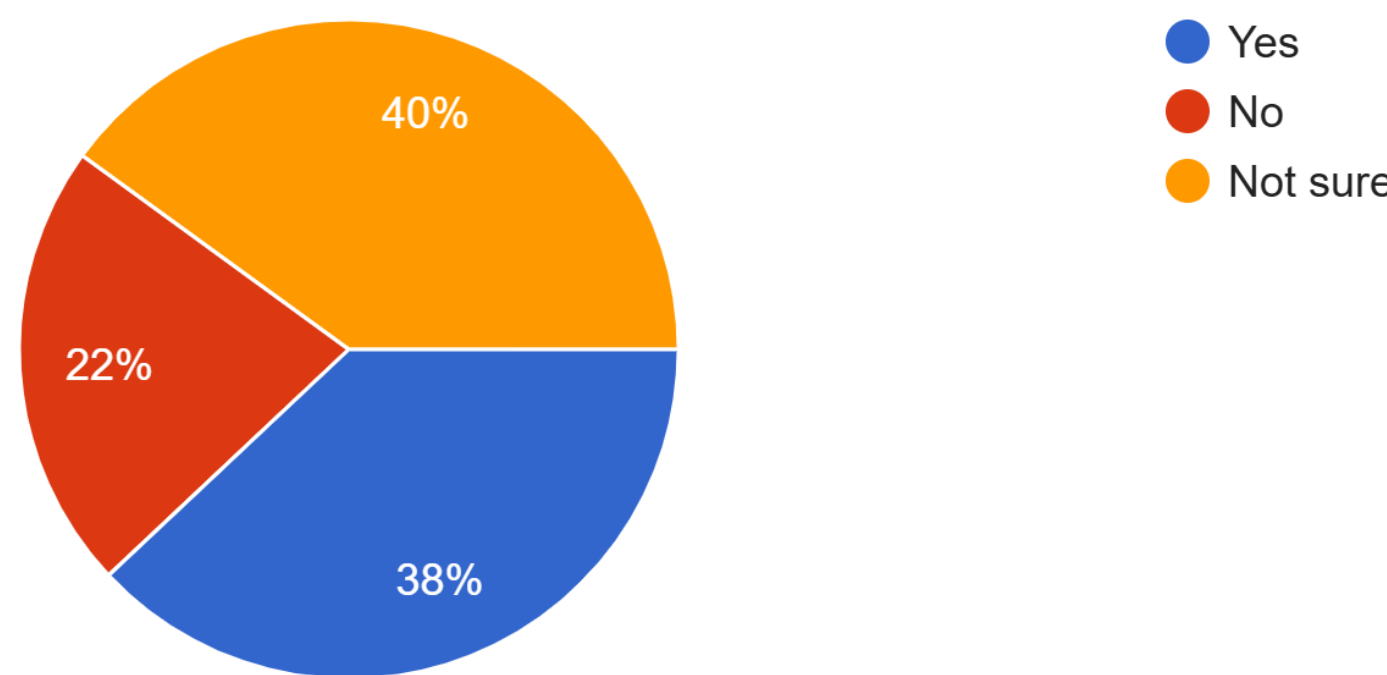
Staff Responses



Patient Response



If you were told it was derived from pigs before receiving it would you have still accepted having it?
50 responses



Patient Feedback

- “If made aware regarding the source of medication, I would have not taken it”
- “Would have preferred to have been informed of the alternative options”
- “It would be better to just use the non-animal derivative in the first place”
- “Patients should always be fully informed about the medication they receive”
- “Give me the choice next time, being a vegetarian it would have been respectful to share this information”

Staff Feedback

- “More awareness is needed”
- “We need more evidence-based information regarding this medication”
- “I was not aware until recently after being informed by a colleague and agree that clients should make an informed decision based on their beliefs and diet”
- “Have had patients raise this with me before and have used alternative (fondaparinux) - a formal guideline may be helpful.”

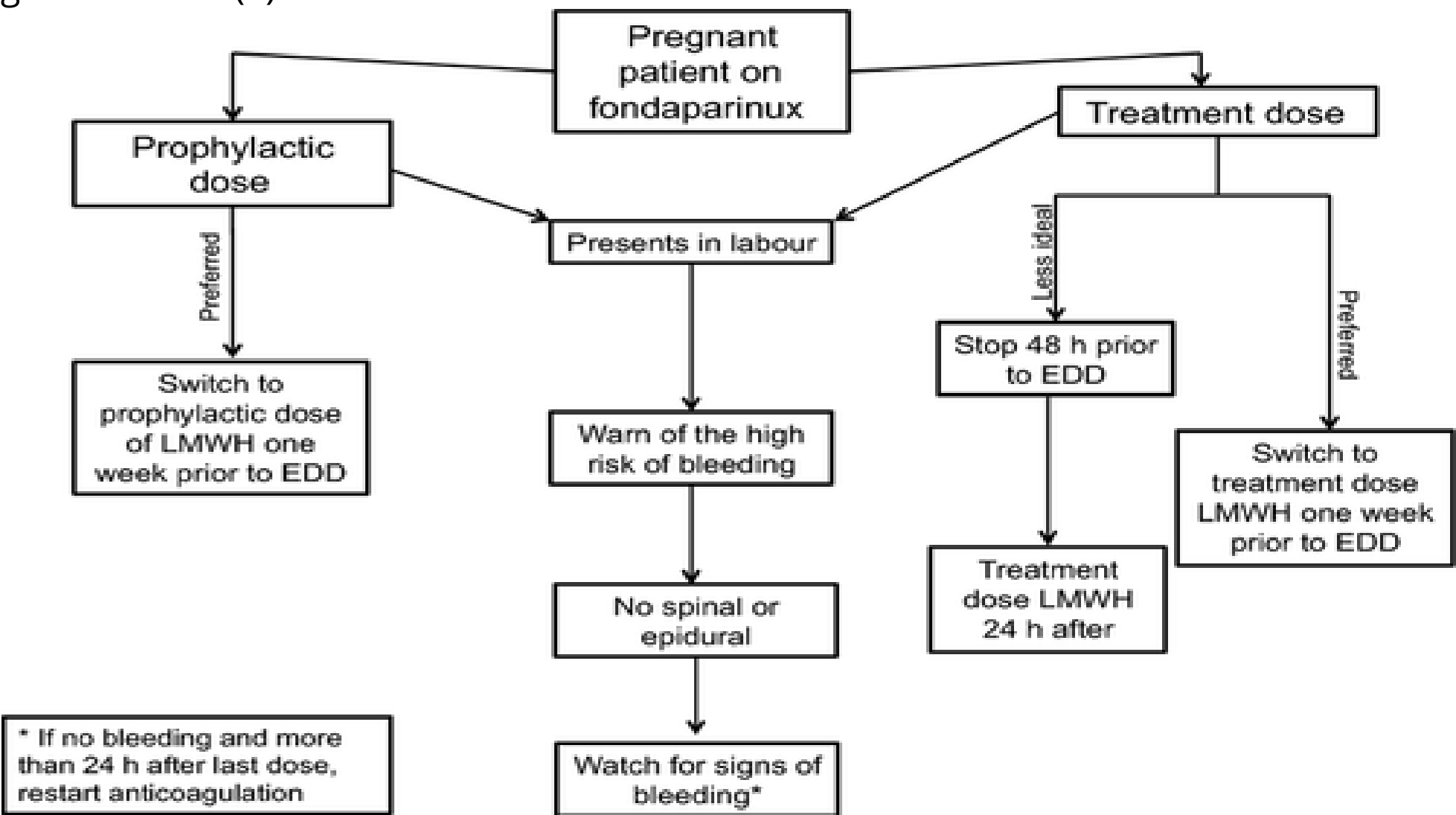
Conclusion

Key Points from the Audit:

- 80%** of patients had not been counselled about the contents of LMWH before being given it.
- 90%** of staff did not counsel patients regarding the animal contents as part of their normal practice.
- Only **38%** of patients said they would still have accepted having the LMWH if they knew about its animal contents
- Nearly **80%** of staff did not know there was an alternative medication that could be offered to patients if they objected to LMWH.
- More need to be done to educate staff and patients regarding the contents of commonly given medications such as LMWH
- A clear SOP needs to be in place for patients who opt against LMWH for its animal contents

Discussion

- Patient informed decision is something which can often be overlooked with commonly prescribed medications. Important to always inform patients of contents of any medications that may lead to objections.
- Lack of staff education could be a contributing factor to the lack of patient informed decision making.
- Vegetarianism was raised as a reason for objecting LMWH – This is common in many patients and further highlights the need for clarification in this area.
- Lack of clear SOPs can contribute to patient's being without anticoagulation despite being high risk. This is a patient safety issue and a clear alternative needs to be readily available.
- Fondaparinux has been used in patients with Heparin induced thrombocytopenia (HIT) and has been found to be just as or even more effective than LMWH. The biggest issue associated with it is the half life can exceed 24hrs which poses issues for epidural/spinal anaesthesia in women presenting in labour/requiring caesarean section.
- A pathway created by a haematologist for its use in the pregnant population has been suggested below (2).



References

- Rcog.org.uk. [cited 2025 Jun 7]. Available from: https://www.rcog.org.uk/media/m4mbpjwi/gtg-no37a-2015_amended-2023.pdf
- Elsaigh E, Thachil J, Nash MJ, Tower C, Hay CRM, Bullough S, et al. The use of fondaparinux in pregnancy. Br J Haematol [Internet]. 2015;168(5):762–4. Available from: <http://dx.doi.org/10.1111/bjh.13147>