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ASSESSMENT OF VENOUS THROMBOEMBOLISM RISK IN PATIENTS WITH HODGKIN LYMPHOMA

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INTRODUCTION

The current venous thromboembolism (VTE) risk assessment models for patients with cancer were developed using cohorts that were underrepresented in patients with hematological malignancies.

The incidence of VTE in different types of lymphoma ranges from less than 5% to 59.5%.

OBJECTIVE

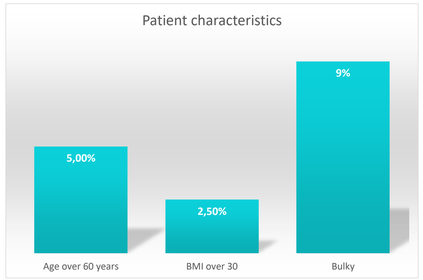
To ascertain the risk of VTE in patients diagnosed with Hodgkin lymphoma (HL).

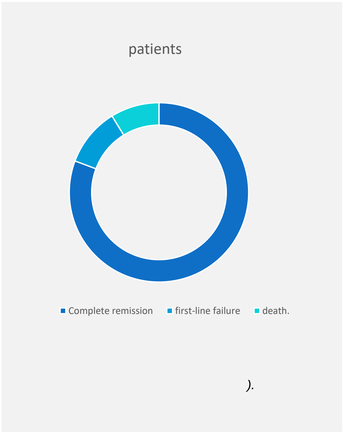
METHOD

- We analyzed data from a prospective single-institution observational cohort to determine the frequency of VTE in our patients initiating a new chemotherapy regimen.
- The recruitment started January 01, 2023. Eligible patients were informed about the study procedures and gave consent.
- The patients were categorized into low- (0-1 point), intermediate- (2-3points), and high-risk categories (>3 points) using the Khorana score (KRS).
- The association of VTE with clinical variables was characterized using univariate and multivariate analysis in R.

RESULTS

58 patients with HL from a total of 292 (20%) were enrolled. Median follow-up was 5.4 months.





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Khorana Risk stadification	Patient
Low Risk	8.6%
Intermediate	53.5%
High Risk	37.9%,

27.5% received thromboprophylaxis.

VTE was reported in 5.2% of patients.

CONCLUSIONS

Multivariate analysis indicated that VTE affected patient survival, and body mass index was the only variable found to be relevant in this study.

VTE is a relatively common complication of HL and its treatment, causing increased acute and long-term morbidity1 . However, due to limited number of events we could not demonstrate risk-factors for VTE that would identify patients who might benefit from thromboprophylaxis.

REFERENCES

1 **A Schönning et al**. Venous thrombosis in children and adolescents with Hodgkin lymphoma in Sweden

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