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EVALUATION OF THE VENOUS THROMBOEMBOLISM (VTE) IN PATIENTS WITH MYELOPROLIFERATIVE NEOPLASM

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INTRODUCTION

Thrombosis is a common complication in Philadelphia-chromosome-negative myeloproliferative neoplasms (PNMPNs). There is no validated risk assessment model to predict VTE in patients with MPN.

OBJECTIVE

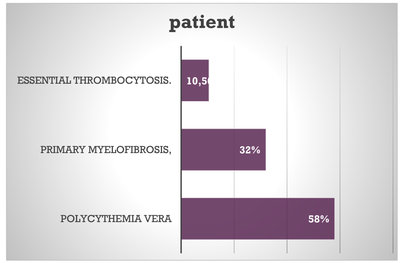
To evaluate the risk of thrombosis in patients with MPN using Khorana score (KRS) tools.

METHOD

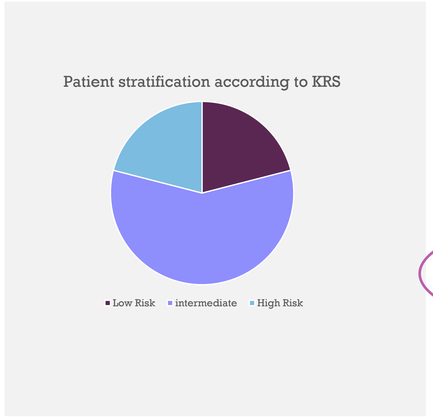
- Information was gathered from medical records on patient demographics, illness characteristics, cardiovascular and thromboembolic risk factors, and outcome data.
- The study did not include patients with mental illness or cognitive impairment.
- VTE was defined as any instance of deep vein thrombosis or pulmonary embolism identified by radiologic imaging methods, such as CT or ultrasound imaging.

RESULTS

We enrolled 19 from a total of 292 patients (6.5%):



History of VTE.:27%



Variable	P value
Age	0,45
BMI	0,06
History of VTE	0,01
JAK2V617F mutation	0,05
Khorana score	0,92

CONCLUSIONS

Patients with PNMPN are at high risk of thrombosis, especially in uncommon locations in their body. Therefore, monitoring for VTE is a crucial objective in the treatment of patients with PNMPN.

Factors identified as significant in this study after multivariate analysis included JAK2V617F mutation (P=0.05) and thrombosis history (P=0.01).

Previous thromboembolism history, V617F%≥50%, ASXL1 mutation, spleen subcostoal≥5 cm are risk factors of venous thrombosis in PV patients 1,

REFERENCES

1 **Ma JY et al**. *Analysis of risk factors for venous thromboembolism in patients with polycythemia vera and establishment of a prediction model*

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