

## Low molecular weight heparin effective for prevention of venous thromboembolism in patients with lower-leg immobilisation

Clinical question	How effective is low molecular weight heparin (LMWH) for prevention of venous thromboembolism (VTE) in patients with lower leg immobilisation?
Bottom line	LMWH significantly reduces VTE when immobilisation of the lower leg is required in outpatients. Further analysis showed a significant reduction in the occurrence of DVT when using LMWH in the following patient subgroups: surgical patients; non-surgical patients; patients with fractures; patients with soft-tissue injuries; patients with below-knee casts; a group with proximal thrombosis and a group with distal thrombosis. LMWH should be used for both below-knee and above-knee casts or braces.
Caveat	The six studies each used a different LMWH. The total number of patients was insufficient to evaluate which LMWH to choose. Complications of major bleeding events were extremely rare (0.3%) and there were no reports of heparin-induced thrombocytopenia.
Context	Immobilisation of the lower limb with plaster casts or braces in adult patients is associated with DVT and pulmonary embolism. In order to prevent these complications, preventive treatment with anticoagulants is often used, most commonly LMWH.
Cochrane Systematic Review	Testroote M et al. Low molecular weight heparin for prevention of venous thromboembolism in patients with lower-leg immobilisation. Cochrane Reviews 2008, Issue 4. Article No. CD006681. DOI:
PEARLS 149, March 2009, written by Brian R McAvoy	

[References]



PEARLS are succinct summaries of Cochrane Systematic Reviews for primary care practitioners. They are funded by the New Zealand Guidelines Group.

PEARLS provide guidance on whether a treatment is effective or ineffective. PEARLS are prepared as an educational resource and do not replace clinician judgement in the management of individual cases.

View PEARLS online at: