

News from ISTH

The following findings were presented at the Congress of the International Society on Thrombosis and Haemostasis.

Nadroparin saves for DVT

Nadroparin calcium [Fraxiparine Forte] appears to be an effective, well tolerated and cost-saving outpatient strategy for treatment of deep vein thrombosis (DVT), according to researchers from the Czech Republic.¹ In their open, multicentre, observational study, 635 patients were scheduled to receive self-administered SC nadroparin (adjusted to body weight) once daily for 10 days; oral anticoagulants were commenced concomitantly on day 3, and continued for 3 months. DVT recurrence was documented in 4 patients (0.6%). There were no thromboembolic events, deaths or episodes of major bleeding observed. The researchers noted that QOL was improved, and the cost reduction related to outpatient management of venous thromboembolism (average 6.5 days hospitalisation) was CZK6 645 275.*

FEIBA worth it for haemophilia

For preventing bleeds in haemophiliac patients with inhibitors, the use of factor VIII inhibitor bypassing fraction [FEIBA] is cost-saving, compared with eptacog- α [recombinant factor VIIa], report US-based researchers.² Using data from the literature, they conducted a cost-effectiveness evaluation of FEIBA 75 U/kg on alternate days versus eptacog- α 90 mg/kg/day from a payer's perspective; costs (2006 US dollar) included prophylaxis drug cost, and a 51kg patient was used in the analyses. The frequency of bleeding episodes was reduced from 5.6 per month to 2.8 with FEIBA, and 2.5 with eptacog- α . Savings of \$US49 082 per bleed prevented per month were provided with FEIBA over eptacog- α . Sensitivity analyses did not affect the strength of these results.

* Czech koruna

1. Maly J, et al. Confirmation of efficacy, safety and cost effectiveness of Fraxiparine (Rm) forte in the outpatient treatment of deep venous thrombosis. 21st Congress of the International Society on Thrombosis and Haemostasis : abstr. P-T-518, 6 Jul 2007.

2. Bonnet P, et al. Cost-effectiveness of activated prothrombin complex concentrate vs. recombinant FVIIa in prophylaxis in hemophilia patients with inhibitors. 21st Congress of the International Society on Thrombosis and Haemostasis : abstr. P-M-168, 6 Jul 2007.