# 15 - Prophylactic Anticoagulation

# Recommendation

### Guideline

S3-Leitlinie Empfehlungen zur stationären Therapie von Patienten mit COVID-19 - Living Guideline - https://register.awmf.org/de/leitlinien/detail/113-001LG

## Summary

#### German

Hospitalisierte Patienten mit COVID-19 sollen in Abwesenheit von Kontraindikationen eine standardmäßige medikamentöse Thromboembolieprophylaxe mit niedermolekularem Heparin erhalten. Alternativ kann Fondaparinux zur Anwendung kommen.

### **English (machine translation)**

Hospitalized patients with COVID-19 should receive standard drug thromboembolism prophylaxis with low molecular weight heparin in the absence of contraindications. Alternatively, fondaparinux may be used.

#### Justification

#### German

Thromboembolische Ereignisse sind eine häufige Komplikation bei COVID-19 und betreffen vorwiegend das venöse, jedoch auch das arterielle Gefäßsystem (112-114). Alle stationär behandelten Patienten sollen daher zur Prophylaxe einer venösen Thromboembolie (VTE) niedermolekulares Heparin (NMH) in einer für den Hochrisikobereich zugelassenen Dosierung erhalten, z. B. Enoxaparin 4.000 IE, Dalteparin 5.000 IE, Tinzaparin 4.500 IE, Certoparin 3.000 IE, Nadroparin (< 70kg KG 3.800 IE, > 70kg KG 5.700 IE). Alternativ, z.B. bei Heparinunverträglichkeit oder stattgehabter heparininduzierter Thrombozytopenie (HIT), ist die Gabe von Fondaparinux möglich. Die Empfehlung basiert auf der S3-Leitlinie Prophylaxe der venösen Thromboembolie (115). Der Nutzen einer medikamentösen VTE-Prophylaxe, vorzugsweise mit NMH, bei stationären Patienten mit akuten internistischen Erkrankungen und Bettlägerigkeit wurde in mehreren randomisierten Studien prospektiv untersucht. Bezüglich hospitalisierter Patienten mit COVID-19 liegen zwar keine spezifischen Studiendaten zur VTE-Prophylaxe vor; die bisher verfügbare Evidenz ist aber auf die Pandemiesituation übertragbar. Unter Berücksichtigung von Kontraindikationen reduziert die Thromboseprophylaxe mit NMH (oder alternativ mit Fondaparinux) hochwirksam das VTE-Risiko, ohne das Risiko für schwere Blutungen signifikant zu erhöhen.

#### **English (machine translation)**

Thromboembolic events are a common complication of COVID-19 and predominantly affect the venous but also the arterial vasculature (112-114). Therefore, all hospitalized patients should receive low-molecular-weight heparin (NMH) for prophylaxis of venous thromboembolism (VTE) at a dosage approved for high-risk settings, e.g., enoxaparin 4,000 IU, dalteparin 5,000 IU, tinzaparin 4,500 IU, certoparin 3,000 IU, nadroparin (< 70kg bw 3,800 IU, > 70kg bw 5,700 IU). Alternatively, e.g. in cases of heparin intolerance or previous heparin-induced thrombocytopenia (HIT) administration of fondaparinux is possible. The recommendation is based on the S3 guideline Prophylaxis of venous thromboembolism (115). The benefit of drug-based VTE prophylaxis, preferably with NMH, in hospitalized patients with acute internal diseases and bed confinement, has been prospectively investigated in several randomized trials. Regarding hospitalized patients with COVID-19, there are no specific trial data on VTE prophylaxis; however, the evidence available to date is applicable to the pandemic situation. Considering contraindications, thromboprophylaxis with NMH (or alternatively with fondaparinux) is highly effective in reducing the risk of VTE without significantly increasing the risk of major bleeding.



Note: Drug doses for determining whether an anticoagulant dose is therapeutic can be found on 18 - No Anticoagulation

# **Population**

		Inclusion  (1)  Exclusion	Name	Category	definition. type	definition.value	
PopHospitalisedCOVID1 9PatientsWOVenousThro mbosisWOCI	Population for recommendation 15: Hospitalised COVID- 19 patients without (venous) thrombosis and without contraindications to LWMH.	<b>•</b>	COVID- 19	Condition	SCT 404684 003 "Clinical finding (finding)"	\$sct#840539006 "Disea se caused by Severe acute respiratory syndrome coronavirus 2 (disorder)"	
		any-of	HIT 2	Condition	SCT 404684 003 "Clinical finding (finding)"	\$sct#111588002 "Heparin-induced thrombocytopenia with thrombosis (disorder)"	
			Heparin Allergy	Allergy	SCT 609328 004 "Allergic disposition (finding)"	\$sct#294872001 "Allergy to heparin (finding)"	
			Heparin oid Allergy	Allergy	SCT 609328 004 "Allergic disposition (finding)"	\$sct#294876003 "Allergy to heparinoid (finding)"	
PopHospitalisedCOVID1 9PatientsWOVenousThro mbosisWITHCI	PPatientsWOVenousThro contraindications to LWMH.		COVID- 19	Condition	SCT 404684 003 "Clinical finding (finding)"	\$sct#840539006 "Disea se caused by Severe acute respiratory syndrome coronavirus 2 (disorder)"	
		any-of	HIT 2	Condition	SCT 404684 003 "Clinical finding (finding)"	\$sct#111588002 "Heparin-induced thrombocytopenia with thrombosis (disorder)"	
			Heparin Allergy	Allergy	SCT 609328 004 "Allergic disposition (finding)"	\$sct#294872001 "Allergy to heparin (finding)"	
			Heparin oid Allergy	Allergy	SCT 609328 004 "Allergic disposition (finding)"	\$sct#294876003 "Allergy to heparinoid (finding)"	

# Intervention



Note: Drug doses for determining whether an anticoagulant dose is therapeutic can be found on 18 - No Anticoagulation

Name	Description	Population			Actions/Activities								
			selection- behaviour	selection- behaviour	Name	Action Category	productCodeableConcept	Route	Drug Dosage	perforn doNotP			
bLWMHP prophylax rophIn- with LWM Hospitalis hospitalis	Antithrombotic prophylaxis with LWMH in hospitalised COVID-19	phylaxis n LWMH in spitalised VID-19 WOVenous	ents WOVenous ThrombosisW OCI		Prophyla cticAntico agulation WDaltepa rin	drugAdminist ration	\$atcde#B01AB04 "Dalteparin" \$sct#372563008 "Dalteparin (substance)"	subcutan eous	• 2500 IU/d • 5000 IU/d	•			
	patients				Prophyla cticAntico agulation WEnoxap arin	drugAdminist ration	\$atcde#B01AB05 "Enoxaparin" \$sct#372562003 "Enoxaparin (substance)"	subcutan eous	• 20 mg/d • 40 mg/d	•			
				#exactly (1)									

Prophyla cticAntico 0 drugAdminist \$atcde#B01AB06 "Nadroparin" subcutan ration eous agulation \$sct#699946002 "Nadroparin WNadrop arinLow Weight Dose (substance)" (1x/d) (kg) Weight 3800 IE 70kg >70kg 5700 IE \$atcde#B01AB06 "Nadroparin" = 5700 IE/d 0 drug/Administ subcutan \$cct#600046002 "Nadroparin (for weight >70 kg) (cubstance)" Prophyla drugAdminist \$atcde#B01AB13 "Certoparin" = 3000 IE/d 0 subcutan cticAntico \$sct#395961003 "Certoparin agulation WCertop (substance) arin Prophyla cticAntico \$atcde#B01AB10 "Tinzaparin" drugAdminist ration subcutan 0 = 3.500 IEeous agulation WTinzap \$sct#412608008 "Tinzaparin (substance)" Prophyla cticAntico \$atcde#B01AB01 "Heparin" drugAdminist subcutan 0 5000 IE 2x/day ration eous agulation WHepari nSC 5000 IE 3x/day
7500 IE 2x/day \$sct#372877000 "Heparin (substance)" NoThera drugAdminist \$atcde#B01AB04 "Dalteparin" subcutan =200 IE/kg 1x/d peuticAnti coagulati ration eous \$sct#372563008 "Dalteparin onWDalte (substance)" parin1xd \$atcde#B01AB04 "Dalteparin" NoThera =100 IE/kg 2x/d drugAdminist subcutan peuticAnti coagulati onWDalte \$sct#372563008 "Dalteparin (substance)" parin2xd #all \$atcde#B01AB05 "Enoxaparin" Therapeu drugAdminist subcutan ticAnticoa ration eous gulationN MHEnoxa \$sct#372562003 "Enoxaparin Weight Daily (substance) parin2xd (kg) Dose (IE) 46 - 56 10.000 57 - 68 12.500 69 - 82 15.000 18.000 > 83 NoThera drugAdminist \$atcde#B01AB05 "Enoxaparin" subcutan 1.5 mg/kg; 1x/d peuticAnti coagulati onWEnox \$sct#372562003 "Enoxaparin (substance)" aparin1xd \$atcde#B01AB05 "Enoxaparin" Therapeu drugAdminist subcutan 1 mg/kg; 2x/d ticAnticoa ration eous gulationN MHEnoxa \$sct#372562003 "Enoxaparin (substance) parin2xd NoThera peuticAnti drug Administ\$atcde#B01AB06 "Nadroparin" subcutan · 2x/d according to: ration eous . coagulati \$sct#699946002 "Nadroparin onWNadr (substance)" Weight Dose oparin (kg) s.c. (IE; < 50 3800 50 bis 59 4750 60 bis 69 5700 70 bis 79 6650 80 bis 89 7600

#all

				NoThera peuticAnti coagulati onWCert oparin	drugAdminist ration	\$atcde#B01AB13 "Certoparin" \$sct#395961003 "Certoparin (substance)"	subcutan eous	8000 IE 2x/d		•		
					peuticAnti coagulati onWUFH OrArgatra	drugAdminist ration	\$atcde#B01AB01 "Heparin" \$sct#372877000 "Heparin (substance)"	intraveno us			•	
						-	-	drugAdminist ration	\$atcde#B01AE03 "Argatroban" \$sct#116508003 "Argatroban (substance)"	intraveno us		
				NoThera peuticAnti coagulati onWTinz aparin	drugAdminist ration	\$atcde#B01AB10 "Tinzaparin" \$sct#412608008 "Tinzaparin (substance)"	subcutan eous	175 IE/kg 1x/d	75 IE/kg 1x/d			
Antithrom bFondap ProphIn- Hospitalis edCOVID 19 PatientsR ecommPl an	Antithrombotic prophylaxis with Fondaparinux in hospitalized COVID-19 patients	PopHospitalised COVID19- PatientsWOVe nous ThrombosisWI THCI	#allI boticProp hylaxisFc ndaparin uxSubcut aneous  Therapet ticAnticoa gulationF			Antithrom boticProp hylaxisFo ndaparin uxSubcut aneous	drugAdminist ration	\$atcde#B01AX05 "Fondaparinux"  \$sct#708189008 "Fondaparinux (substance)"		=2.5 'mg'/day		•
				Therapeu ticAnticoa	coa ration	\$atcde#B01AX05 "Fondaparinux"  \$sct#708189008 "Fondaparinux (substance)"	subcutan eous			•		
				ondapari				Weight (kg)	Dose (1x/d)			
								< 50	5 mg			
									>= 50, <= 100	7.5 mg		
									> 100	10 mg		