

Deep vein thrombosis (DVT) and pulmonary embolism (PE): Awareness and prophylaxis practices reported by patients with cancer.

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Background. The goals of this study were to measure DVT/PE awareness among patients with cancer and to identify gaps in evidence-based prophylaxis reported by these patients. **Methods.** A survey was conducted among 500 adults, screened from an online research panel, diagnosed with cancer within 12 months of sampling. Responses from patients who required a hospital stay for treatment (n=206) were compared to responses of patients who were exclusively treated as outpatients (n=294). **Results.** Of the 500 patients surveyed, mean age was 58 (range 20-80+), 64% female, and cancer diagnoses included: breast 34%, prostate 10%, lung 9%, skin 8%, colon 5%. Among all respondents, 76% had not heard of a medical condition called DVT and 85% had not heard of PE. Significantly more outpatient respondents were unfamiliar with the terms DVT (85%; $p<.05$) and PE (91%; $p<.05$) compared to inpatient respondents. Among 155 respondents who said they could name DVT risk factors, 8% named surgery and 4% named chemo/radiation or some cancer treatments. Among 86 respondents who said they could name PE signs/symptoms, 69% cited breathing difficulties, 28% chest tightness, 5% coughing up blood. Less than one-third (27%) of all respondents said their doctor/healthcare professional (HCP) told them about blood clot risks due to cancer. When compared to inpatient responses, significantly fewer outpatient respondents (14%; $p<.05$) said their doctor/HCP told them about blood clot risks due to cancer. About half (48%) of all respondents said they were told to get out of bed and walk around. DVT prophylaxis reported by all respondents included: compression stockings 35%, mechanical compression 31%, aspirin 28%, anticoagulant pill 21%, anticoagulant injection 16%. Compared to inpatient respondents, outpatients reported significantly lower utilization of DVT prophylaxis, including: compression stockings 22% ($p<.05$), mechanical compression 16% ($p<.05$), aspirin 20% ($p<.10$), anticoagulant pill 9% ($p<.05$), anticoagulant injection 6% ($p<.05$). **Conclusion.** Oncology patient awareness of DVT/PE is low. Effective interventions are needed to optimize patient/physician dialogue about DVT/PE and prophylaxis.

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