

# INTERVENTIONS FOR PREVENTING VENOUS THROMBOEMBOLISM IN ADULTS UNDERGOING KNEE ARTHROSCOPY

Ramos Jorge, Perrotta Carla, Badariotti Gustavo, Berenstein Graciela

Ramos Jorge, Perrotta Carla, Badariotti Gustavo, Berenstein Graciela

Cochrane Database of Systematic Reviews, Issue 08, 2011 (Status in this issue: EDITED (NO CHANGE TO CONCLUSIONS))

Copyright © 2009 The Cochrane Collaboration. Published by John Wiley & Sons, Ltd.

DOI: 10.1002/14651858.CD005259.pub2

This review should be cited as: Ramos Jorge, Perrotta Carla, Badariotti Gustavo, Berenstein Graciela. Interventions for preventing venous thromboembolism in adults undergoing knee arthroscopy. Cochrane Database of Systematic Reviews. In: *The Cochrane Library*, Issue 08, Art. No. CD005259. DOI: 10.1002/14651858.CD005259.pub2

## ABSTRACT

### Background

Knee arthroscopy is a frequent surgical procedure. Arthroscopy procedures are considered minimally invasive. However, some patients will need extended surgical time, suffer injury and immobilization thus increasing the risk for thromboembolic events. Incidence of deep venous thrombosis (DVT) in patients undergoing knee arthroscopy is reported to be from 0.6% to 17.9% depending on the diagnostic method used. Different approaches are available for thromboprophylaxis (mechanical or pharmacological).

### Objective

To assess the effectiveness and safety of thromboprophylaxis to reduce the incidence of DVT in patients undergoing knee arthroscopy.

### Criteria for considering studies for this review

We searched the Cochrane Peripheral Vascular Diseases Group Specialized Register (last searched October 2006) the CENTRAL (last searched Issue 4, 2006), MEDLINE (1966 to 2006), EMBASE (1980 to 2006), and Lilacs (1988 to 2006). We contacted specialists known to be involved in phlebology and interested in post thrombotic syndrome for details of unpublished and ongoing trials.

### Selection criteria

Randomized clinical trials (RCTs) and controlled clinical trials (CCTs), whether blinded or not (i.e. double blinded, single blinded or unblinded) of all type of interventions, whether mechanical or pharmacological, single or in combination, used to prevent DVT in males and females over 18 years old undergoing knee arthroscopy. There was no restriction on language.

### Data collection and analysis

Two authors independently assessed trial quality and extracted data. Study authors were contacted for additional information.

### Main results

Four trials involving 527 predominantly male participants were included. The main weakness of the studies was the lack of correct stratification of the arthroscopic intervention.

### Authors' conclusions

This meta-analysis suggests that LMWH reduces the incidence of distal DVT diagnosed by sonogram. The clinical benefit of this is uncertain. No strong evidence was found to conclude thromboprophylaxis is effective to prevent thromboembolic events and safe, in people with unknown risk factors for thrombosis, undergoing knee arthroscopy.

---