Press Release

Coalition to Prevent Deep-Vein Thrombosis (DVT) Applauds the National Comprehensive Cancer Network’s New Guidelines for DVT

*NCCN DVT Guidelines for cancer patients may help to reduce the risk of this serious medical condition*

Washington, D.C., April 18, 2006 – The Coalition to Prevent Deep-Vein Thrombosis (DVT) today announced its support of the National Comprehensive Cancer Network’s (NCCN) new guidelines which address how to reduce the risk of DVT in cancer patients and how to treat a DVT if one develops.

“With cancer patients proven to be at greater risk for DVT, these new guidelines may provide physicians with tools to assess patients’ risk,” said Coalition member Larry Wellikson, MD, FACP, Chief Executive Officer, Society of Hospital Medicine.

According to the American Heart Association, up to 2 million Americans are affected annually by DVT. Of those who develop pulmonary embolism (PE), a potentially fatal complication of DVT, up to 200,000 will die each year. Since the risk of DVT can be reduced, it is important to understand the risk factors and warning signs.

“Physicians need to be more aware of all of the common triggering events associated with DVT such as restricted mobility or major surgery and monitor patients with these primary risk factors more aggressively,” said Coalition Medical Advisory Board Member Samuel Z. Goldhaber, Brigham and Women’s Hospital. “Once risk for DVT is determined, physicians should consider using proven therapies to reduce the risk.”

About Deep-Vein Thrombosis and Pulmonary Embolism

DVT occurs when a thrombus (blood clot) forms in one of the large veins, usually in the lower limbs, leading to either partially or completely blocked circulation. If left untreated, this clot has the potential to move into the lungs and block circulation to this vital organ creating a life threatening condition – known as pulmonary embolism (PE) – requiring immediate medical attention. Up to 600,000 Americans are hospitalized each year for DVT and its primary complication, PE. Fatal PE may be the most common preventable cause of hospital death in the United States. Complications from DVT kill more people each year in the U.S. than breast cancer and AIDS combined.

Certain individuals may be at increased risk for developing DVT; however, it can occur in almost anyone. Additional risk factors include, but are not limited to restricted mobility, cancer, certain heart or respiratory diseases, major surgery, such as hip or knee replacements, advanced age, oral contraceptives or hormone therapy.
It is important to consult your healthcare provider about the signs and symptoms associated with DVT.

**About the Coalition to Prevent Deep-Vein Thrombosis**

In February 2003, more than 60 organizations assembled at the Public Health Leadership Conference on Deep-Vein Thrombosis in Washington, D.C. to discuss the urgent need to make DVT a major U.S. public health priority. As a result of this meeting, which was co-hosted by the American Public Health Association and Centers for Disease Control and Prevention and funded by sanofi-aventis, participants agreed to establish a Coalition of organizations committed to educating the public and healthcare community about DVT. To date, 39 organizations have joined the Coalition to Prevent Deep-Vein Thrombosis, comprised of national thought leaders and representatives from key organizations, including the American College of Chest Physicians, the American Public Health Association and the Society of Hospital Medicine.

The Coalition to Prevent Deep-Vein Thrombosis is funded by sanofi-aventis U.S. LLC.

The mission of the Coalition to Prevent Deep-Vein Thrombosis is:

*To reduce the immediate and long-term dangers of deep-vein thrombosis (DVT) and pulmonary embolism (PE), which together comprise one of the nation’s leading causes of death. The Coalition will educate the public, healthcare professionals and policy-makers about risk factors, symptoms and signs associated with DVT, as well as identify evidence-based measures to prevent morbidity and mortality from DVT and PE.*

#  #  #