



THE ROLE OF THE ADVANCED PRACTICE NURSE IN VENOUS THROMBOEMBOLIC DISEASE ASSOCIATED WITH CANCER - AN EXAMPLE FROM DIJON (FRANCE)

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> INTRODUCTION

Venous ThromboEmbolism (VTE) and cancer are closely linked in almost one in five patients.^(1,2) Since 2018, the Advanced Practice Nurse (APN) is a new member of the paramedical population in France.

The professional development of these nurses is taking place against the backdrop of an ageing population population, the chronicisation of illnesses and the problem of medical desertification⁽³⁾.

The aim of our study is to demonstrate the value of IPA follow-up in the population suffering from VTE associated with particularly in limiting haemorrhagic complications inherent in anticoagulant therapy.





➤ METHODOLOGY.

Our single-centre, observational, real-life study was based on a collection of data collected during interviews carried out as part of routine clinical practice in IPA consultations on a series of 54 patients.

During consultations spaced 3 months apart between January and December 2023, we noted the presence of bleeding using the ISTH-BAT scale, questioning and clinical examination of the patient, as well as the presence of thrombotic recurrence.

The type of anticoagulant prescribed and compliance were recorded. Therapeutic education was also provided.

➤ RESULTS

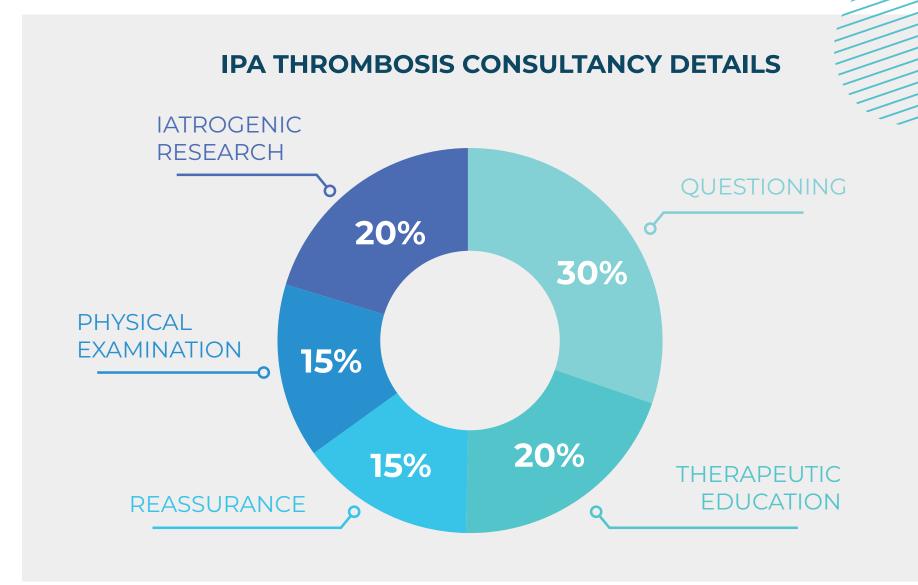
Our population comprised 9 man for 45 women, with an average age of 66. DVT-EP was the most frequent pathology (43%). Initially, 21 patients were on APIXABAN, 24 on TINZAPARINE, and 8 patients benefited from a switch to peros treatment.

At 3 months, 36 patients were on APIXABAN, 18 on TINZAPARINE. All patients had good compliance at both consultations (GIRERD). No thrombotic recurrences were observed.

Mean ISTH-BAT score improved from 1 [0-3] to 0.77 [0-2] between the two visits. Bleeding (hematoma at the injection site) was found in 15 patients on TINZAPARINE at the first visit, whereas it was found in only 8 patients at 3 months.

➤ CONCLUSION

This observational study is original in view of the paucity of studies, even monocentric, on the place and role of IPA in cancer-associated VTE. Our study highlights the safety of IPA follow-up in terms of bleeding and thrombotic recurrence, but remains to be confirmed in a larger cohort by registry-based prospective studies.



Keywords: venous thromboembolic disease, cancer, APN, anticoagulation

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