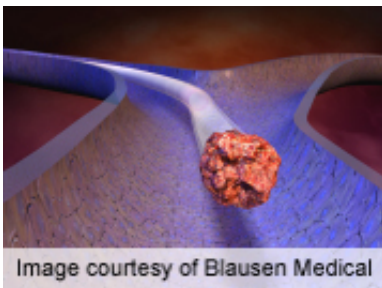


Post-spinal surgery ultrasound aids VTE management

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(HealthDay)—Perioperative ultrasonography is important for proper management of venous thromboembolism (VTE), according to a study published in the May 1 issue of *Spine*.

Koji Akeda, M.D., Ph.D., from the Mie University Graduate School of Medicine in Japan, and colleagues conducted prospective follow-up on 209 [patients](#) undergoing spinal surgery (121 males, 88 females; average age, 64 years) who had ultrasonographic assessments of both legs before and after surgery. For primary VTE prophylaxis, a pneumatic sequential compression device and standard compression stockings were used. Pharmacological agents were not used for VTE prophylaxis unless a distal type [deep venous thrombosis](#) (DVT) was found preoperatively.

The researchers found that 23 patients (11.0 percent) showed VTE in the spinal surgery perioperative period. Before surgery, nine patients (4.3 percent) had VTE (pulmonary embolism [PE] with proximal DVT, one; distal DVT, eight). New-onset VTE developed in 14 patients (6.7 percent; two PE with proximal DVT; 12 distal DVT) after spinal surgery. Two patients developed new-onset PE with proximal DVT after surgery. DVT disappeared (based on follow-up ultrasonography) completely in 85 percent of patients with a distal type DVT (17 of 20).

"DVT assessment using ultrasonography is important for proper management of VTE during the perioperative period of [spinal surgery](#), especially for high-risk patients, such as those with advanced age or neurological deficit," the authors write.

More information: [Abstract](#)
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