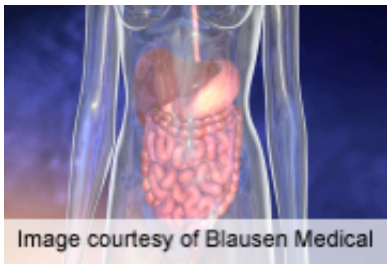
Restrictive transfusion strategy safe for acute GI bleeding

3 January 2013



For patients with severe acute gastrointestinal bleeding, a restrictive transfusion approach is safe and effective compared with a liberal approach, according to a study published in the Jan. 2 issue of the *New England Journal of Medicine*.

(HealthDay)—For patients with severe acute gastrointestinal bleeding, a restrictive transfusion approach is safe and effective compared with a liberal approach, according to a study published in the Jan. 2 issue of the *New England Journal of Medicine*.

Càndid Villanueva, M.D., from the Hospital de Sant Pau in Barcelona, Spain, and colleagues conducted a randomized trial to compare the efficacy and safety of a restrictive transfusion strategy (461 patients; transfusion when hemoglobin level fell below 7 g/dL) with a liberal transfusion strategy (460 patients; transfusion when hemoglobin level fell below 9 g/dL) for severe acute upper gastrointestinal bleeding.

The researchers found that 51 percent in the restrictive-strategy group and 15 percent in the liberal-strategy group did not receive a transfusion (P

"Our results suggest that, in patients with acute gastrointestinal bleeding, a strategy of not performing transfusion until the hemoglobin concentration falls below 7 g per deciliter is a safe and effective approach," the authors write.

One author disclosed a financial tie to Sequana Medical.

More information: Full Text (subscription or payment may be required)
Editorial (subscription or payment may be required)