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POSTER ABSTRACTS

332.THROMBOSIS AND ANTICOAGULATION: CLINICAL AND EPIDEMIOLOGICAL

Recurrent Thromboembolism in Patients with Congenital Heart Disease and Prior Thromboembolism: A Prospective Cohort Study

Amy L Kiskaddon¹, Marisol Betensky, MD², Nhue Do, MD MBA³, Arabela Stock, MD², James Quintessenza, MD², Neil Goldenberg, MDPhD²

¹ Johns Hopkins All Children's Hospital, Tarpon Springs, FL

² Johns Hopkins All Children's Hospital, Saint Petersburg, FL

³Vanderbilt University Medical Center, Nashville, TN

Introduction:

Patients with congenital heart disease (CHD) are at increased risk of thromboembolism (TE) due to changes in blood flow, type of cardiac lesion, exposure to cardiopulmonary bypass, and cardiac catheterization. There are limited data describing the rate of and risk factors associated with recurrent TE in pediatric patients with CHD and prior TE. Therefore, the primary aim of this study was to describe the rate of recurrent TE in pediatric patients with CHD and a prior episode of TE. Secondary aims included: characterize the type of index and recurrent TE and site, as well as compare characteristics and risk factors of patients with CHD and history of index TE who developed recurrent TE versus to those who did not develop a recurrent TE. **Methods**:

Patients in this study were enrolled and prospectively followed in the Johns Hopkins All Children's (St. Petersburg, FL) Institution-wide Prospective, Inception Multi-Cohort Study of Pediatric TE anytime between 2013 to present. For this analysis, patients were eligible for inclusion if they were <21 years of age, presented with an index TE, and had a diagnosis of CHD. Data collection included patient characteristics, clinical laboratory testing, radiologic results, type and site of TE, acute and chronic risk factors, and treatment agents. Frequencies/proportions were compared between groups by chi-squared or Fisher's exact test, as appropriate.

Results:

Thirty patients with CHD and index TE were included in this study. Of these, 11 (36.7%) patients had a total of 23 recurrent TEs. Five (45.5%) patients had one recurrent TE, 3 (27.3%) had two recurrent TEs, and another 3 patients had >2 recurrent TEs. Of the 23 recurrent TE, 3 events (13%) were arterial and 20 (87%) were venous. All 3 (100%) arterial TEs were provoked, and catheter related. Of the 20 venous TEs, 16 (80) were provoked and of these, 15 (93.8%) were catheter related. When compared to those who did not develop recurrent TE, patients who developed recurrent TE were more likely to have immobility (p=0.005), an arterial TE (p=0.041), or a lower extremity deep venous thrombosis (p=0.045) at the time of index TE. A greater proportion of patients with recurrence had a central catheter-associated TE compared to those with no recurrent TE but this difference was not statistically significant (73% vs 55%, p=0.057).

Conclusions:

In this single center prospective cohort we describe a high rate of recurrent TE (37%) among children with CHD and history of prior TE, and identified risk factors for TE recurrence. The vast majority of recurrent TE was provoked and catheter associated. Identified risk factors include immobility, and type and location of the index TE. Future multicenter prospective cohort studies are needed to validate these findings and identify additional risk factors.

Disclosures Betensky: Janssen Pharmaceuticals: Consultancy, Honoraria. **Goldenberg:** Astra Zeneca: Consultancy; Bayer: Consultancy; Boehringer-Ingelheim: Consultancy; Chiesi: Consultancy; Novartis: Other: Data and Safety Monitoring Committee; Daiichi Sankyo: Consultancy; University of Colorado-affiliated Academic Research Organization CPC Clinical Research: Other: Serves on clinical trials oversite committees for pharma studies; Anthos Therapeutics: Consultancy.

Variable at the time of index TE	Thromboembolism without recurrent events(s) (arterial and venous) (patienty=19)	Thromboembolism with recurrent event(s) (arterial and venous) (patients=11)	p-value	
Weight, kg	i Semenana in the	Contraction and Contraction of Contraction		
median (min, max)	4.5 (1.3-83)	3.6 (2.5-19.7)	0.197	
Height, cm				
median (min, max)	56.5 (38.5-158)	52 (48.3-110)	0.491	
Congenital heart disease				
n (%)	10.000.00	2.000		
Single ventricle	10 (52.6)	7 (63.6)	0.798	
Bi-ventricular	8 (42.1)	4 (36.4)	0.999	
Heart Transplant	1 (5.3)	0(0)	0.999	
Index TE type		-		
n (%)				
Classification		10201300410		
Arterial	6* (31.6)	6* (54.5)	0.216	
Venous	13* (68.4)	7* (63.6)	0.789	
Provoked	15 (78.9)	11 (100)	0.268	
Catheter related	18 (94.7)	11 (100)	0.999	
Index TE site				
n (%)				
Upper extremity				
Deep venous thrombosis	5 (26.3)	1 (9.1)	0.372	
Lower extremity				
Arterial thrombosis	6 (31.6)	4 (36.4)	0.999	
Deep venous thrombosis	6 (31.6)	7 (63.6)	0.132	
Inferior vena cava	2 (10.5)	1 (9.1)	0.999	
Cardiac	3 (15.8)	1 (9.1)	0.999	
Other arterial thrombosis	0 (0)	3 (27.3)	0.041	
Index TE risk factors				
n (%)				
Cardiac catheterization	9 (47,4)	3 (27.3)	0.443	
Cardiac surgery	9 (47.4)	7 (63.7)	0.466	
Central venous catheterization	6 (54.5)	8 (72.7)	0.057	
Diabetes type 2	1 (5.3)	0(0)	0.999	
Positive antiphospholipid antibodies	7 (36.8)	3 (27.3)	0.215	
Flare of chronic condition	2 (10.5)	0(0)	0.519	
Immobility	1 (5.3)	6 (54.5)	0.005	
Hospitalization	6 (31.6)	7 (63.6)	0.132	
Trisomy 21	2 (10.5)	1 (9.1)	0.999	

Variable	Patients without recurrent TE (arterial) (patients=6)	Patients with recurrent TE (arterial) (patients=6)	p-value		Patients without recurrent TE (venous) (n=13)	Patients with recurrent TE (venous) (n=7)	p-value
Weight, kg median (min, max)	4 (1.3-7.4)	3.5 (2.7-5)	0.936	Weight, kg median (min, max)	5.9 (2.9-83)	3.7 (2.5-19.7)	0.267
Height, cm median (min, max)	54.8 (38.5-65)	51.4 (49.5-61)	0.936	Height, cm median (min, max)	64 (47-158)	52 (48.3-110)	0.503
Congenital heart disease n (%) Single ventricle Bi-ventricular	3 (50) 3 (50)	2 (33.3) 4 (66.7)	0.999 0.999	Congenital Heart Disease n (%) Single ventricle Bi-ventricular Heart Transplant	7 (53.8) 5 (38.5) 1 (7.7)	5 (71.4) 2 (28.6) 0 (0)	0.642 0.648 0.999
Index TE type n (%) Provoked Catheter related	6 (100) 6 (100)	6 (100) 6 (100)	0.999	Index TE type n (%) Provoked Catheter related	12 (92.3) 9 (69.2)	7 (100) 7 (100)	0.999
Index TE site n (%) Lower extremity Arterial flarombosis Inferior vena cava Cardiac Other arterial thrombosis	6 (100) 0 (0) 0 (0) 1 (16.7) 0 (0)	3 (50) 2 (33.3) 0 (0) 2 (33.3) 3 (50)	0.182 0.455 0.999 0.999 0.182	Index TE iste n (%) Upper extremity Lowre extremity Arterial thrombosis Deep venous thrombosis Inferior vena cava Cardiac	5 (38.5) 0 (0) 6 (46.2) 2 (15.4) 2 (15.4)	1 (14.2) 2 (28.6) 7 (100) 1 (14.2) 0 (0)	0.354 0.111 0.045 0.999 0.521
Index TE risk factors n (%) Cardiac catheterization Cardiac wagery Central vessois catheterization Immobility Hospitalization Positive antiphospholipid antibodies Trisomy 21	5 (83.3) 4 (66.7) 0 (0) 2 (33.3) 2 (33.3) 0 (0) 1 (16.7)	3 (50) 4 (66.7) 3 (50) 3 (50) 3 (50) 1 (16.7) 1 (16.7)	0.546 0.999 0.182 0.999 0.999 0.999 0.999	Index Risk Factors n (%) Cardiac catheterization Cardiac surgery Central woods and the catheterization Daketer mellina 2 Pontive antihopsholpid antibodies Flare of chronic condition Immobility Honetesilization Trisonv 21	4 (30.8) 5 (38.5) 6 (46.2) 2 (15.4) 0 (0) 1 (7.7) 4 (30.8) 3 (23.1)	2 (28.6) 5 (71.4) 6 (85.7) 0 (0) 2 (28.6) 0 (0) 5 (71.4) 6 (85.7) 0 (0)	0.999 0.349 0.158 0.521 0.351 0.999 0.159 0.051 0.521

Figure 1

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