

## **Venous thromboembolism in eating disorders: A retrospective observational study**

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## **Abstract**

Eating disorders (EDs) are associated with a high mortality rate. Patients with EDs often experience severe dehydration due to food restriction and/or vomiting. Severely underweight patients are often prescribed bed rest during inpatient care to reduce their energy consumption, and they may thus develop multiple risk factors for venous thromboembolism (VTE). We compared the clinical features of ED inpatients with VTE to those of ED inpatients without VTE. Seventy-one inpatients with ED were treated at Okayama University Hospital's psychiatric ward in 2016–2020; five were experienced a VTE. Compared to the non-VTE group, the VTE group's median age and disease duration were greater and the median body mass index (BMI) was lower. The VTE group's D-dimer peak values were  $>5$  mg/L. Physical restraint and central venous catheter use were associated with VTE. Longer ED duration and lower BMI might be risk factors for VTE. To make inpatient treatment for ED safer, it is important to avoid the use of physical restraints and central venous catheters. Continuous D-dimer monitoring is necessary for the early detection of VTE in ED patients at high risk of VTE.

**Key words:** eating disorder, anorexia nervosa, venous thromboembolism, deep vein thrombosis