



Vascular Medicine

SEX DIFFERENCES IN UTILIZATION AND OUTCOMES OF CATHETER DIRECTED THROMBOLYSIS IN PATIENTS WITH PROXIMAL LOWER EXTREMITY DEEP VENOUS THROMBOSIS

Poster Contributions
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Background: Catheter directed thrombolysis (CDT) is being increasingly used for the treatment of proximal lower extremity (LE) deep venous thrombosis (DVT). However, sex differences in utilization and safety outcomes of CDT in these patients are unknown.

Methods: Nationwide Inpatient Sample (NIS) database was used to identify all patients with a principal discharge diagnosis of proximal LE or caval DVT who underwent CDT between January 2005 and December 2011. We evaluated the temporal trends and safety outcomes of CDT among men and women in the United States. Propensity scores were used to construct two matched groups (1,731 men and 1,731 women) for comparative analysis.

Results: Among 108,243 patients with proximal LE or caval DVT, 4,826 patients (4.5%) underwent CDT. Overall, women underwent CDT less often compared to men (4.1% vs. 4.9%, $p < 0.01$, respectively). The rates of CDT increased between 2005 and 2011 for both women (2.3% to 6.7%, $p < 0.01$) and men (2.5% to 7.5%, $p < 0.01$). Comparative outcomes analysis revealed higher rates of blood transfusions in women but lower rates of intracranial and gastrointestinal bleeding compared to men (Table 1).

Conclusion: In this nationwide observational study we found that CDT was utilized less often in women than men. However, the rates of intracranial and gastrointestinal bleeding were higher among men.

Matched Sex-Based Outcomes in Patients Undergoing CDT			
	Male (n = 1,731)	Female (n = 1,731)	P value
Death (%)	1.3	1.2	0.76
Blood Transfusion (%)	8.8	11.7	< 0.01
Intracranial Hemorrhage (%)	1.2	0.5	0.03
Procedure Related Hemorrhage (%)	1.4	1.2	0.97
Gastrointestinal Bleeding (%)	2.2	0.9	< 0.01