

PUBLIC HEALTH WEBINAR SERIES ON BLOOD DISORDERS

BRINGING SCIENCE INTO PRACTICE

The Division of Blood Disorders is proud to offer this webinar series, providing evidence-based information on new research, emerging issues of interest in blood disorders, as well as innovative approaches to collaboration.

Update on COVID-19 and Thrombosis Risk SEPTEMBER 17, 2020 • 2:00–3:00PM ET



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Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), the causative agent of coronavirus disease (COVID-19), has now spread to more than 180 countries. As of August 2, 2020, more than 17 million confirmed cases of COVID-19 and more than 680,000 associated deaths have been reported worldwide.

Peer-reviewed reports from centers in several different parts of the world have raised the concern that the risk of venous thromboembolism (VTE) may be unusually high in patients with SARS-CoV-2 infection, even when standard pharmacologic prophylaxis is administered. However, the published evidence varies with respect to the magnitude of risk increase, and there are still many unanswered questions, including:

- What are the mechanisms by which this virus may promote venous thrombosis more than other infectious diseases that cause critical illness?
- Should higher-intensity anticoagulant therapy be used in some patients or would thrombosis prevention strategies (e.g. anti-inflammatory or immunosuppressive agents) be more effective?
- Would the benefits of post-discharge VTE pharmacologic prophylaxis outweigh the risks after hospitalization for COVID-19?

LEARNING OBJECTIVES:

1. Summarize the evidence from peer-reviewed publications of COVID-19-associated VTE.
2. Describe proposed mechanisms by which COVID-19 may increase the risk for VTE.
3. Recount the latest guidelines for preventing VTE in patients who are hospitalized for COVID-19.

This webinar is free and open to public health professionals, clinicians, and researchers who desire more information about thrombosis and COVID-19. Advance registration is required, and the number of attendees is limited.

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