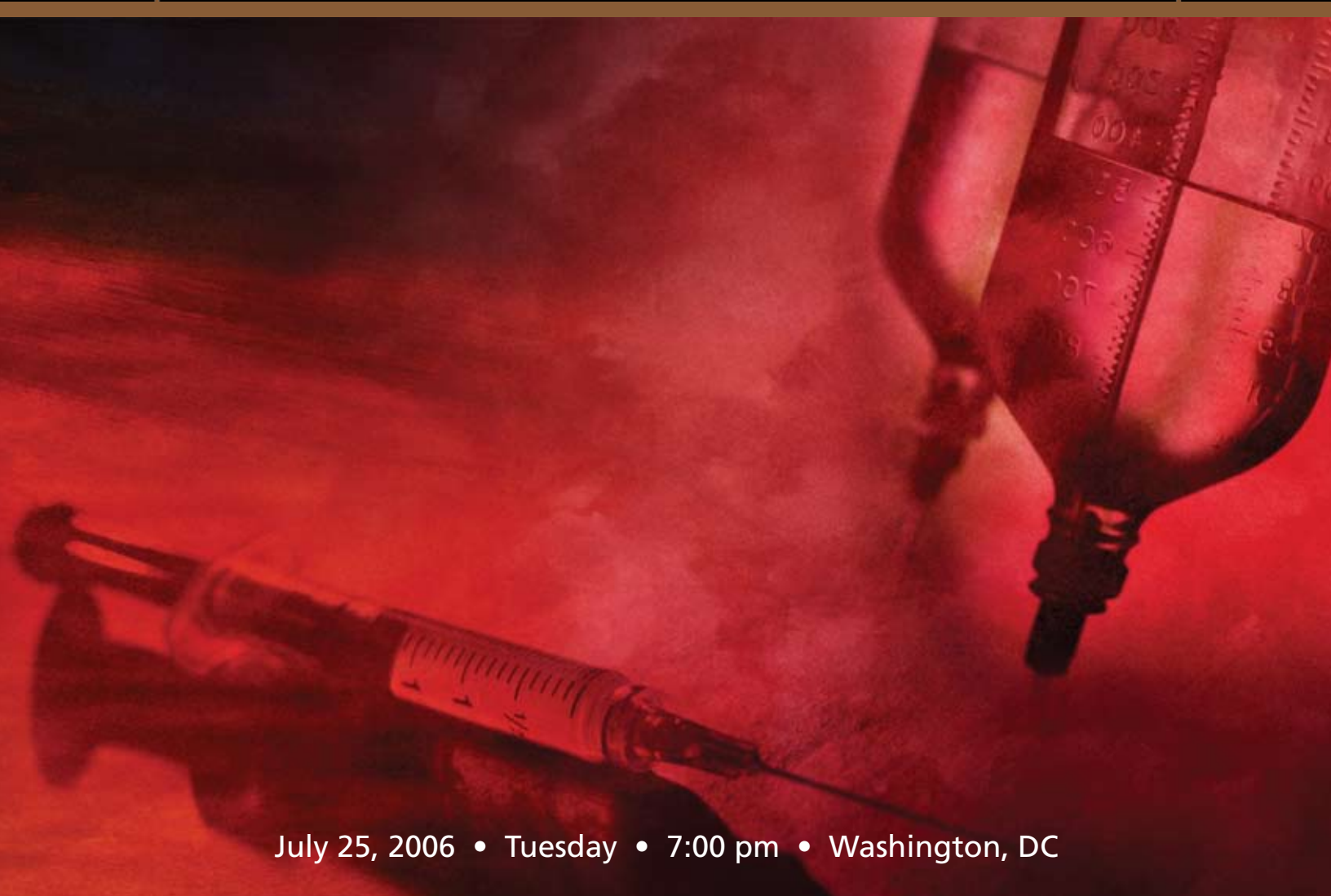


CME **discovery.com** *presents...*

REAL WORLD
BEST PRACTICES

for
DVT PROPHYLAXIS



July 25, 2006 • Tuesday • 7:00 pm • Washington, DC

Supported by an unrestricted educational grant from Sanofi-Aventis.



REAL WORLD BEST PRACTICES OF

5:00 pm – 5:30 pm	Registration
5:30 pm – 7:00 pm	Dinner Reception
7:00 pm – 7:15 pm	Addressing challenges in managing patients with VTE including treatment and secondary prophylaxis in VTE
7:15 pm – 7:30 pm	Q&A
7:30 pm – 7:45 pm	Treatment strategies/applying special considerations for the critically ill or patients with comorbidities
7:45 pm – 8:00 pm	Q&A
8:00 pm – 8:15 pm	When is monitoring necessary and how should it be done?
8:15 pm – 8:30 pm	Q&A

DVT PROPHYLAXIS

PROGRAM DESCRIPTION

Venous thromboembolism (VTE) is a major cause of morbidity and mortality in the United States. While unfractionated heparin (UFH) has been the standard treatment of VTE for many years, low-molecular-weight-heparins (LMWHs) are now commonly used as a therapeutic alternative. Effective prophylaxis and intervention are essential in minimizing VTE risk and reducing the incidence of life-threatening events. There exists a gap in knowledge for the treatment of VTE with secondary prophylaxis, acute PE, as well as a special consideration for the critically ill (e.g. volume overloaded) or patients with comorbidities (e.g. renal insufficiency). Furthermore, the existing clinical data needs to be discussed and interpreted in order to be applied, as well as a discussion surrounding current issues and controversies in VTE treatment and prophylaxis. This program provides concise and contemporary insight addressing concerns practitioners have regarding the management of patients with VTE.

TARGET AUDIENCE

This activity is intended for healthcare providers who treat DVT.

EDUCATIONAL OBJECTIVES

Upon completion of this educational activity participants will be able to:

- Discuss the management of patients with venous thromboembolism: Challenges and Opportunities.
- Understand treatment and secondary prophylaxis in VTE.
- Discuss treatment options for management of acute PE.
- Understand the current issues and controversies in VTE treatment and prophylaxis.
- Discuss the new and current treatment options for DVT by examining current data.
- Identify special considerations for the medically ill or patients with comorbidities.

ACCREDITATION

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of ArcMesa Educators and Scinexa, LLC. ArcMesa Educators is accredited by the ACCME to provide continuing medical education for physicians.

ArcMesa Educators designates this educational activity for a maximum of *1 AMA PRA Category 1 credit*[™]. Physicians should only claim credit commensurate with the extent of their participation in the activity.

DISCLAIMER

It is the policy of ArcMesa Educators to ensure balance, independence, objectivity, and scientific rigor in all its educational activities. All faculty/authors are expected to disclose any relevant financial relationships they may have with commercial interests in relation to this activity. These relationships, along with the educational content of this program, have been reviewed and any potential conflicts of interest have been resolved to the satisfaction of ArcMesa Educators.

Published by: ©2006 Scinexa, LLC / CMEdiscovery.com. All rights reserved. None of the contents may be reproduced in any form without prior written permission from Scinexa, LLC.

The views and opinions expressed in this activity are those of the faculty. They do not reflect the views of Sanofi-Aventis, any other manufacturer of pharmaceuticals, ArcMesa Educators, or Scinexa, LLC.

The recommendations made in this program are based upon a combination of randomized clinical trials, current guidelines, and the clinical practice experience of the participating panelists. Any medications, diagnostic procedures or treatments discussed by the panelists should not be utilized without evaluation of their patient's conditions. Participants are urged to consult the full prescribing information on any drug mentioned in this activity for recommended dosage, indications, contraindications, warnings, precautions, and adverse effects before prescribing any medication.



REAL WORLD BEST PRACTICES OF



PAUL E. MARIK, MD, FCCP, FCCM

Professor of Medicine
Director, Pulmonary and Critical Care Medicine
Thomas Jefferson University

Dr. Marik received his medical degree from the University of the Witwatersrand, Johannesburg, South Africa. He did his internship at Hillbrow Hospital and then completed his medical residency at Johannesburg Hospital, Johannesburg, South Africa. He was an attending at Baragwanath Hospital, in Soweto, South Africa. During this time he obtained a Master of Medicine Degree, Bachelor of Science Degree in Pharmacology, Diploma in Anesthesia as well as a Diploma in Tropical Medicine and Hygiene. Dr. Marik did a Critical Care Fellowship in London, Ontario, Canada, during which time he was admitted as a Fellow to the Royal College of Physicians and Surgeon of Canada. Dr. Marik is currently Professor of Medicine and Chief of Pulmonary and Critical Care Medicine, Thomas Jefferson University in Philadelphia. Dr. Marik has written over 200 peer reviewed journal articles, 30 book chapters and authored two critical care hand-books. He has presented over 160 lectures at National and International Meetings and Invited Grand Rounds.

Disclosure: Nothing to disclose

DVT PROPHYLAXIS



ARTHUR P. WHEELER, MD, FCCP

Associate Professor
Division of Allergy, Pulmonary and Critical Care Medicine
Vanderbilt University, School of Medicine
Director, Medical Intensive Care Unit

Dr. Wheeler is an Associate Professor in the Division of Allergy, Pulmonary and Critical Care Medicine at Vanderbilt University. He is a graduate of the University of Maryland School of Medicine then completed training programs in Internal Medicine, Pulmonary Disease and Critical Care at Vanderbilt University.

He is a member of the American Thoracic Society, Society of Critical Care Medicine, and American Federation for Clinical Research and is a Fellow of the American College of Chest Physicians. His research in sepsis, thromboembolic disease, and acute lung injury has resulted in more than 100 publications. He is the co-author of a successful textbook of Critical Care Medicine now in its third edition. Dr. Wheeler has delivered hundreds of National and International lectures and is the recipient of numerous teaching awards. He currently serves as the Director of the Vanderbilt ICU.

Disclosure: Consultant/Speakers Bureau: Sanofi-Aventis



REAL WORLD BEST PRACTICES OF



JAMIE ELLEN SIEGEL, MD

Clinical Associate Professor of Medicine
Cardeza Foundation for Hematologic Research
Director, Hemophilia and Thrombosis Center
Thomas Jefferson University Hospital
Medical Director, Cardeza Foundation Special Hemostasis Laboratory

Dr. Jamie E. Siegel is Clinical Associate Professor of Medicine at Cardeza Foundation for Hematologic Research and the Division of Hematology, Director of the Hemophilia and Thrombosis Center at Thomas Jefferson University Hospital in Philadelphia as well as Medical Director of the Cardeza Foundation Special Hemostasis Laboratory.

Dr. Siegel received her undergraduate degree from Lehigh University in the Medical College of Pennsylvania joint BA-MD program. She went on to attend the Medical College of Pennsylvania in Philadelphia, PA where she also completed her internal medicine residency and fellowship in Hematology/Oncology. She did an additional year as a Cardeza Clinical and Research Fellow in Hematology at Thomas Jefferson University.

Dr. Siegel became a National Boards Diplomate over 20 years ago and subsequently Diplomate in Internal Medicine, Diplomate in Medical Oncology, and Diplomate in Medical Hematology. Her memberships in professional organizations include International Society on Thrombosis and Hemostasis, American Society of Hematology, American College of Physicians, and American Society of Clinical Pathologists. She has served on the boards of the Hemophilia Foundation, Delaware Valley and Hemophilia Association of New Jersey, and is the Co-director of the Medical Advisory Board for Hemophilia Federation of America.

Publications, studies and lectures by Dr. Siegel have addressed laboratory monitoring of heparin, heparin thrombocytopenia, as well as various bleeding disorders including von Willebrand Disease and Hemophilia. Her concentration in this work has gained her national recognition.

Dr. Siegel has also received the Humanitarian Award from the Hemophilia Association of New Jersey, the Ron Niederman Humanitarian Award from the Hemophilia Federation of America and the Gender Equity Award from MCP/MCPHU Student AMWA Chapter.

Disclosure: Nothing to disclose

DVT PROPHYLAXIS



SANDRA L. KANE-GILL, PharmD, MSc

Assistant Professor
Pharmacy and Therapeutics
University of Pittsburgh

Sandra L. Kane-Gill, PharmD, MSc received her baccalaureate pharmacy degree from Wayne State University in 1994. She completed an ASHP accredited pharmacy practice residency at West Virginia University Hospital in 1996. In 1998 she received her Doctorate of Pharmacy from the University of Toledo. Dr. Kane-Gill then pursued her Masters of Science in Pharmacy Administration with emphasis on Pharmacoeconomics and Health Outcomes at the Ohio State University in Columbus, Ohio from 1999-2001. Between 1998-2001 she completed her Critical Care Fellowship at the Ohio State University. Upon completion of her training she joined the faculty of the University of Pittsburgh, School of Pharmacy in 2001 with an appointment as Assistant Professor in the Department of Pharmacy and Therapeutics for the Center for Pharmacoinformatics and Outcomes Research.

Dr. Kane-Gill's research interests focus on economic, clinical and humanistic evaluations for critically ill patients; specifically patient safety, quality of life in patients receiving sedatives/neuromuscular blockers, and developing models of cost for acute illness. She has served as Principal Investigator and Co-Investigator on several funded research grants in this area of study. Her research projects spanned the areas of anticoagulation, infectious disease, antidysrhythmics, sedation and adverse drug events. Her work has been presented as both oral and poster presentations at several national and international professional meetings including the Society of Critical Care Medicine (SCCM), European Society of Intensive Care Medicine, Annual American Society of Health-System Pharmacists (ASHP), American College of Clinical Pharmacy (ACCP), as well as local professional meetings. She has published over 30 abstracts and 20 peer-reviewed manuscripts.

Dr. Kane-Gill is very involved in national and international organizations through active membership in ACCP, SCCM, ASHP, International Society for Pharmacoeconomics and Outcomes Research. Currently she holds the appointment of past-chair for the Clinical Pharmacy and Pharmacology Section of SCCM. Also, she has recently been elected as a member of the United States Pharmacopeia Therapeutic Decision Making Expert Committee.

Disclosure: Nothing to disclose

DVT PROPHYLAXIS

REFERENCES

1. Cook D, McMullin J, Hodder R, et al. Prevention and Diagnosis of Venous Thromboembolism in Critically Ill Patients. *Crit Care* 2001;5(6):336-342.
2. Davidson BL. Risk Assessment and Prophylaxis of Venous Thromboembolism in Acutely and/or Critically Ill Patients. *Haemostasis* 2000;30 (Suppl 2): 77-81.
3. Deloughery TG. Venous Thromboembolism in the ICU and Reversal of Bleeding on Anticoagulants. *Crit Care Clin* 2005;21:497-512.
4. Douketis JD, Rabbat C, Crowther MA, et al. Anticoagulant Prophylaxis in Special Populations with Indwelling Epidural Catheter or Renal Insufficiency. *J Crit Care* 2005;20:324-329.
5. Haas CE, Nelsen JL, Raghavendran, et al. Pharmacokinetics and Pharmacodynamics of Enoxaparin in Multiple Trauma Patients. *J Trauma* 2005; 59:1336-1344.
6. Kalfarentzos F, Yarmenitis S, Kehagias I, et al. Prophylaxis of Venous Thromboembolism Using Two Different Doses of Low-Molecular-Weight-Heparin (Nadroparin) in Bariatric Surgery: A Prospective Randomized Trial. *Obesity Surg* 2001;11:670-676.
7. Kane-Gill SL, Feng Y, Bobek MB, et al. Administration of Enoxaparin by Continuous Infusion in a Naturalistic Setting: Analysis of Renal Function and Safety. *J Clin Pharm Ther* 2005; 30:207-213.
8. Laposata M, et al. The Clinical Use and Laboratory Monitoring of Low Molecular Weight Heparin. *Arch Path Lab Med* 1998;122:799-807.
9. National Consensus Standards for Prevention and Care of Venous Thromboembolism (VTE) – Last updated 6/14/06 [http://www.jointcommission.org/PerformanceMeasurement/PerformanceMeasurement/National+Consensus+Standards+for+Prevention+and+Care+of+Venous+Thromboembolism+\(VTE\).htm](http://www.jointcommission.org/PerformanceMeasurement/PerformanceMeasurement/National+Consensus+Standards+for+Prevention+and+Care+of+Venous+Thromboembolism+(VTE).htm)
10. Pringlinger U, Karth GD, Geppert A, et al. Prophylactic Anticoagulation with Enoxaparin: Is the subcutaneous Route Appropriate in the Critically Ill? *Crit Care Med* 2003;31:1405-1409.
11. Rabbat CG, Cook DJ, Crowther MA, et al. Dalteparin thromboprophylaxis for critically ill medical-surgical patients with renal insufficiency. *J Crit Care* 2004; 20(4):357-363.
12. Rocha AT, Tapsan VF. Venous Thromboembolism in Intensive Care Patients. *Clin Chest Med* 2003;24:103-122.
13. Rutherford EJ, Schooler WG, Sredzienski, et al. Optimal Dose of Enoxaparin in Critically Ill Trauma and Surgical Patients. *J Trauma* 2005;58:1167-1170.
14. Söhne M, Ten Wolde M, Boomsma F, et al. Brain natriuretic peptide in hemodynamically stable acute pulmonary embolism. *J Thrombosis & Haemostasis* 4(3): 2006 March. 552-556.
15. van Dongen CJ, Mac Gillavry MR, Prins MH. Once Versus Twice Daily LMWH for the Initial Treatment of Venous Thrombolism (Review). *Cochrane Database of Systematic Reviews* 2005;3:CD003074.
16. Warkentin TE, Cook DJ. *Cri Care Clin* 2005;21:513-529.

Supported by an unrestricted educational grant from

sanofi aventis

Accredited by

ArcMesa
EDUCATORS

Presented by

scineXa

For questions regarding this program, email: info@scinexa.com

©2006 Scinexa, LLC / CMEdiscovery.com. All Rights Reserved.