



From the Chief Medical Officer

## **HSS(MD)10-2007**

Chief Executives of HSC Trusts

Medical Directors of Trusts for cascade to:

Clinical Directors

Hospital Doctors

Directors of Nursing of HSC Boards and Trusts

Directors of Pharmacy of HSC Boards and Trusts

Northern Ireland Medicines Governance Team

Each GP and Community Pharmacy Practice

Chief Executive RQIA for cascade to:

Independent Hospitals and relevant establishments

Chair- Cardiovascular Service Framework Group

Chair- Respiratory Service Framework Group

Professor R J Hay, Head of School of Medicine and Dentistry, QUB

Professor James McElroy, Dean of Life and Health Science, QUB

Professor Hugh McKenna, Dean of Life and Health Science, UU

Professor Jean Orr CBE, Head of School of Nursing and Midwifery, QUB

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Our Ref:

Date:

HSS(MD)10-2007

24 April 2007

Dear Colleagues

### **RE: RECOMMENDATIONS OF THE EXPERT WORKING GROUP ON THE PREVENTION OF VENOUS THROMBOEMBOLISM (VTE) IN HOSPITALISED PATIENTS**

Following the publication, in 2005, of the Health Committee Report in England on the prevention of venous thromboembolism, an expert group was convened by the Department of Health in England to consider how current best practice and guidance on the prevention of venous thromboembolism can be promoted and implemented. Further information on this, including a selection of the key existing guidelines that aid prevention of venous thromboembolism in hospitalised patients is available on [www.dh.gov.uk/vte](http://www.dh.gov.uk/vte).

The independent expert report is now available. It recommends a number of systems and processes needed to develop a coherent approach to the prevention of venous thromboembolism.

In addition, the group has made recommendations on the use of thromboprophylaxis following their assessment of existing clinical guidance and evidence on the prevention of VTE, and specifically the use of mechanical devices (foot pumps), aspirin and other pharmacological preparations (heparin or other anti-Xa agent).

As the expert group recommendations are based on existing guidance and evidence, and have the potential to prevent avoidable deaths from VTE, we are taking this opportunity to bring these to your attention immediately. The VTE expert group recommends that:

- All medical patients should, as part of a mandatory risk assessment, be considered for thromboprophylaxis measures; in particular, patients likely to be in hospital for longer than four days and with reduced mobility, with either severe heart failure, respiratory failure (due either to exacerbation of chronic lung disease or pneumonia), acute

