



Improving Care Transitions in Patients with Venous Thromboembolism

Objectives & Agenda



Session Objectives

- Understand the prevalence, burden, challenges and risks associated with patients with venous thromboembolism (VTE)
- Takeaway key learnings on how to better manage transitions of care for patients with VTE

Agenda Topics











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Prevalence & Burden of VTE

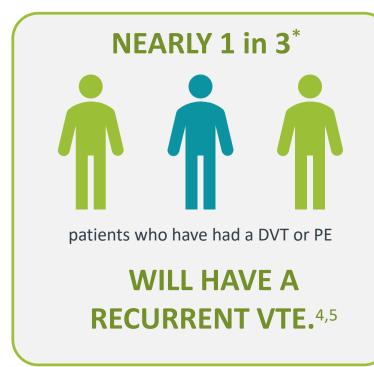




Approximately
900,000 patients
will have a VTE
every year in the
US1

Up to 100,000 deaths are due to VTE, primarily PE.²

Upon presentation, of those who experience a PE, 1 in 4 will die.³





MORE THAN 1 in 5 VTEs

are due to a recurrent or recent hospitalization in medically ill patients.⁶



The risk of clots remains after hospital discharge.

67% of VTEs occur within the **FIRST 30 DAYS** after hospital discharge.⁷

DVT, deep vein thrombosis; PE, pulmonary embolism; VTE, venous thromboembolism

References: 1. CDC. Data and statistics on venous thromboembolism. Accessed November 24, 2021. https://www.cdc.gov/ncbddd/dvt/data.html. 2. Rathbun S. Circulation. 2009;119:e480–e482. 3. Heit JA. Venous thromboembolism: disease burden outcomes and risk factors. J Thromb Haemost. 2005;3(8):1611-1617. 4. Heit JA. Epidemiology of venous thromboembolism. Nat Rev Cardiol. 2015;12(8):464-74. doi:10.1038/nrcardio.2015.83. 5. What is Venous Thromboembolism? CDC. Reviewed February 7, 2020. Accessed November 24, 2021. https://www.cdc.gov/ncbddd/dvt/facts.html. 6. Heit JA, O'Fallon WM, Petterson TM, et al. Relative impact of risk factors for deep vein thrombosis and pulmonary embolism: a population-based study. Arch Intern Med. 2002;162(11):1245-1248. doi:10.1001/archinte.162.11.1245. 7. Spencer FA, Lessard D, Emery C, Reed G, Goldberg RJ. Venous thromboembolism in the outpatient setting. Arch Intern Med. 2007;167(14):1471-1475.

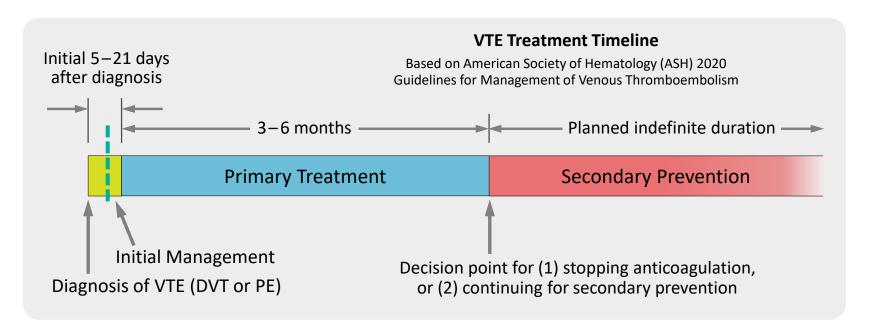


^{*}Within 10 years

VTE Treatment & Guidelines

Anticoagulation therapy is a delicate balance¹

- Suppress the coagulation cascade, while
- Minimizing the risk of a major bleed
- There is often the discontinuity of hospital discharge, early in the process² ---
- Treatment must be maintained over a long time, in multiple settings, with multiple providers^{3,4}



References: 1. Wells PS, et al. *JAMA*. 2014;311(7):717-728. doi:10.1001/jama.2014.65. **2.** Jaffray, et al. *Thrombosis Research*. 2018; 163:146-152. **3.** Ortel, et al. *Blood Adv*. 2020;4(19):4693-4738. **4.** Lenchus JD. *Adv Ther*. 2016;33(1):29-45.



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VTE Guidelines

ACCP ESC

ACP NATF

ASH ISTH

Care Process Model
Intermountain Healthcare

ACCP American College of Chest Physicians

ACP American College of Physicians
ASH American Society of Hematology

ESC European Society for Cardiology

NATE North America Thrombosis Forum

ISTH International Society on Thrombosis

and Haemostasis

AMGA VTE Care Transitions – Roundtables & Research



 Roundtables: AMGA recently conducted roundtables with 12 member organizations, selected to share their VTE expertise



- Advocate Aurora Health
- Billings Clinic
- Cleveland Clinic
- Geisinger
- HealthPartners Park Nicollet
- Henry Ford Health System

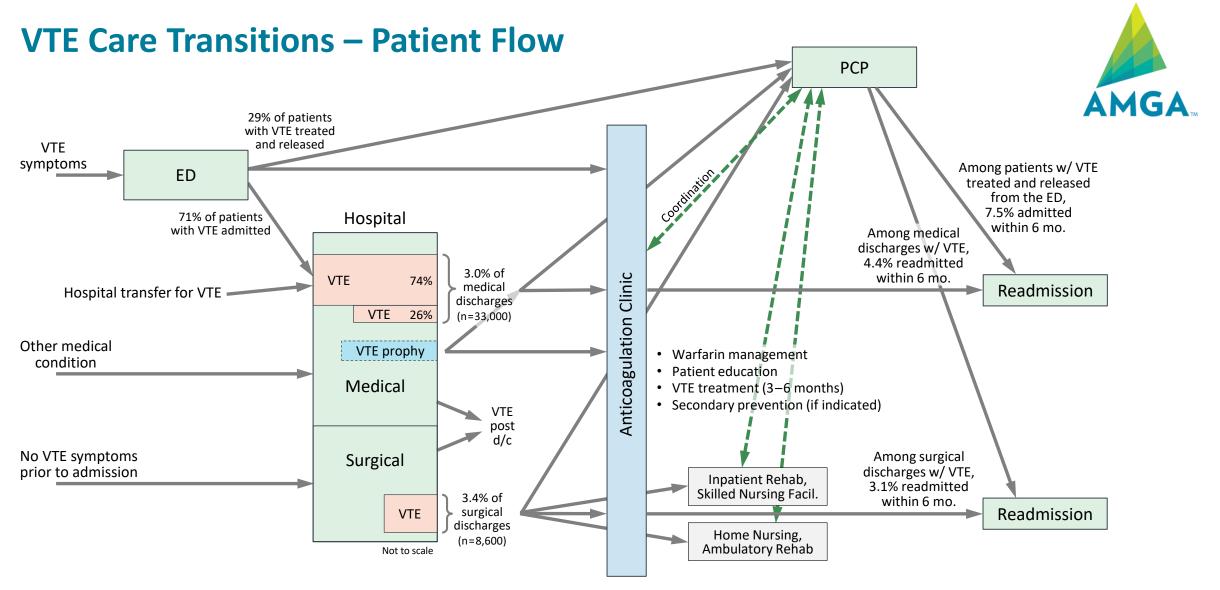
- Intermountain Healthcare
- Lehigh Valley Health Network
- Mercy (St. Louis)
- Ochsner Health System
- Permanente Medical Group
- University of Wisconsin Health

VTE Expertise

- Clinical protocols
- Care team structures
- Risk assessment tools
- Anticoagulation clinics

 Research: To understand the flow of patients with VTE, AMGA analyzed adjudicated claims data from AMGA member organizations participating in the Collaborative for Performance Excellence, a partnership between AMGA and Optum







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Disclaimer: The data represented in this figure were prepared by AMGA Analytics who take full responsibility for the accuracy of the results. The figure is based on AMGA's analysis of Optum adjudicated claims data for 2018 and 2019.

Strategies for Improving Care Transitions in Patients with VTE





team



Protocols











Patient Education



Follow-Up Process



Thank You!

