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FEDERAZIONE
CENTRI PER LA DIAGNOSI
DELLA TROMBOSI E LA
SORVEGLIANZA DELLE TERAPIE
ANTITROMBOTICHE (FCSA)

Risultati dello Studio ITEM (confronto tra due modelli gestionali)

S. Testa, A. Tosetto

ASST Cremona - Cremona
AULSS 8 Berica - Vicenza

PREMESSA

- Diversi modelli gestionali sono stati suggeriti per il management dei pazienti trattati con farmaci anticoagulanti orali
- Finora non ci sono studi che confrontino le diverse strategie gestionali e l'efficacia dei diversi modelli organizzativi dei Centri Emostasi e Trombosi

AVK: MODELLI GESTIONALI

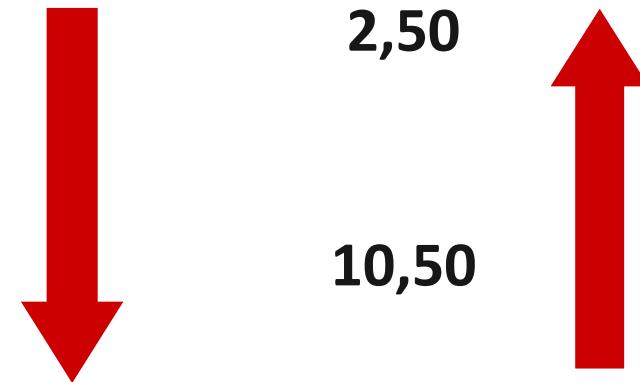
- Centri di Sorveglianza Anticoagulati (CSA/AC)
- Medici di Medicina Generale o altri specialisti (MMG/RMC)
- Pazienti in Self-Testing (PST)
- Pazienti in Self-Management (PSM)
- Integrazione in rete Ospedale-Territorio

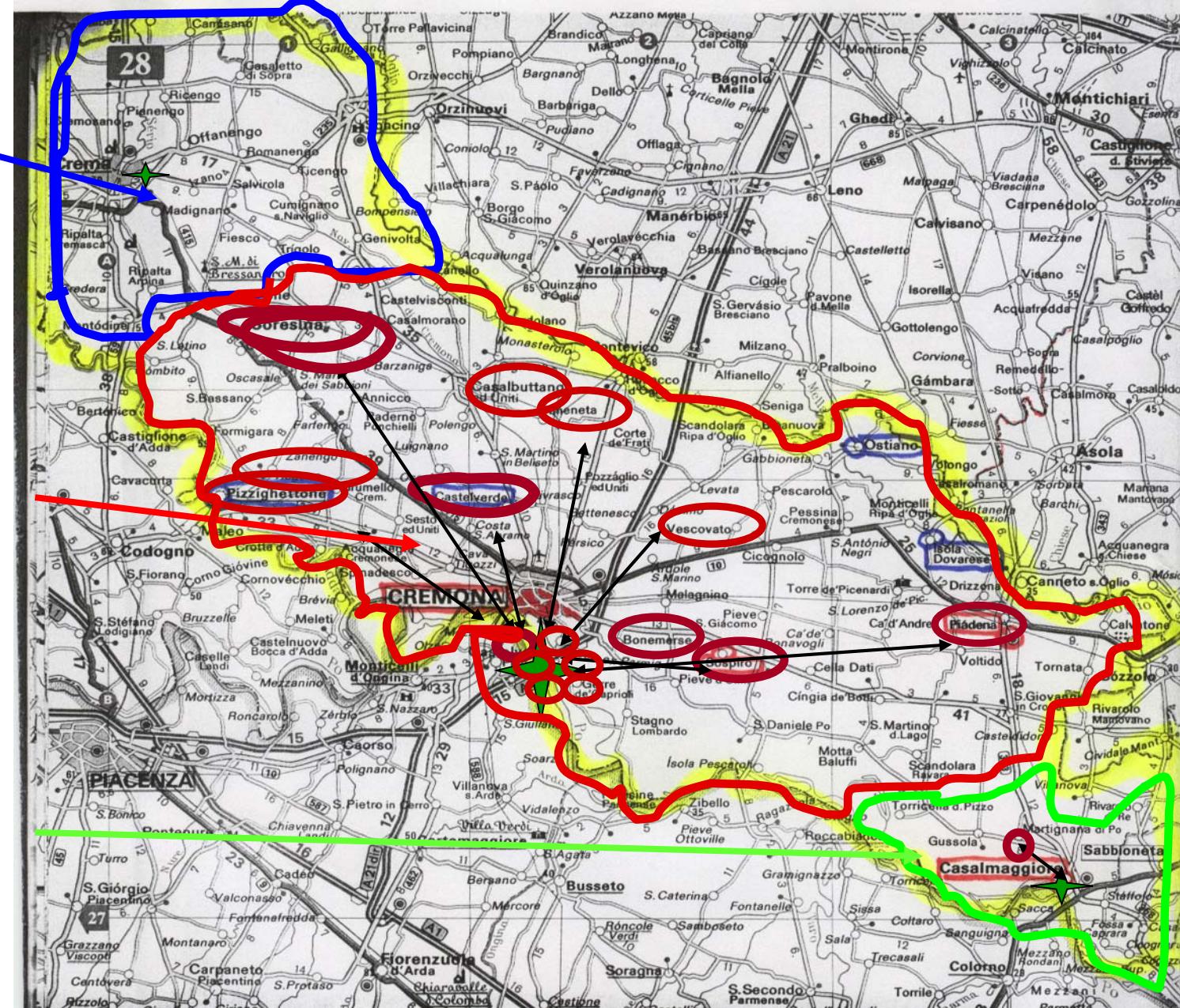
CSA vs AMG: complicanze

COMPLICANZE	CSA	AMG
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EMORRAGIE (% a-p)	1,25	2,50
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TROMBOSI (% a-p)	3,50	10,50
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20
km

RETE CREMONA

- Al 31.12.2017 sono state attivate 17 sedi periferiche in collegamento telematico (6 in Cremona città, 11 in provincia + Casalmaggiore) + 26 PST
- 115 MMG e 24 infermieri, appartenenti a 15 gruppi associati, hanno seguito corsi di formazione. Tre gruppi hanno seguito i corsi di II livello per effettuare la prescrizione della terapia (Cremona Via Dante, Piadena, Casalmaggiore).
- Piadena e Casalmaggiore hanno iniziato l'attività di prescrizione nel 2013



GPs

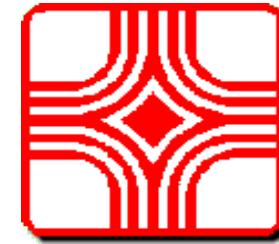


PST/PSM

ANTICOAGULATION
CLINICS/THROMBOSIS
CENTER



Nursing Homes



Peripheral Hospitals





ANTICOAGULATION
CLINICS/THROMBOSIS
CENTER



4x Medicina Gruppo Integrata - PST/PSM

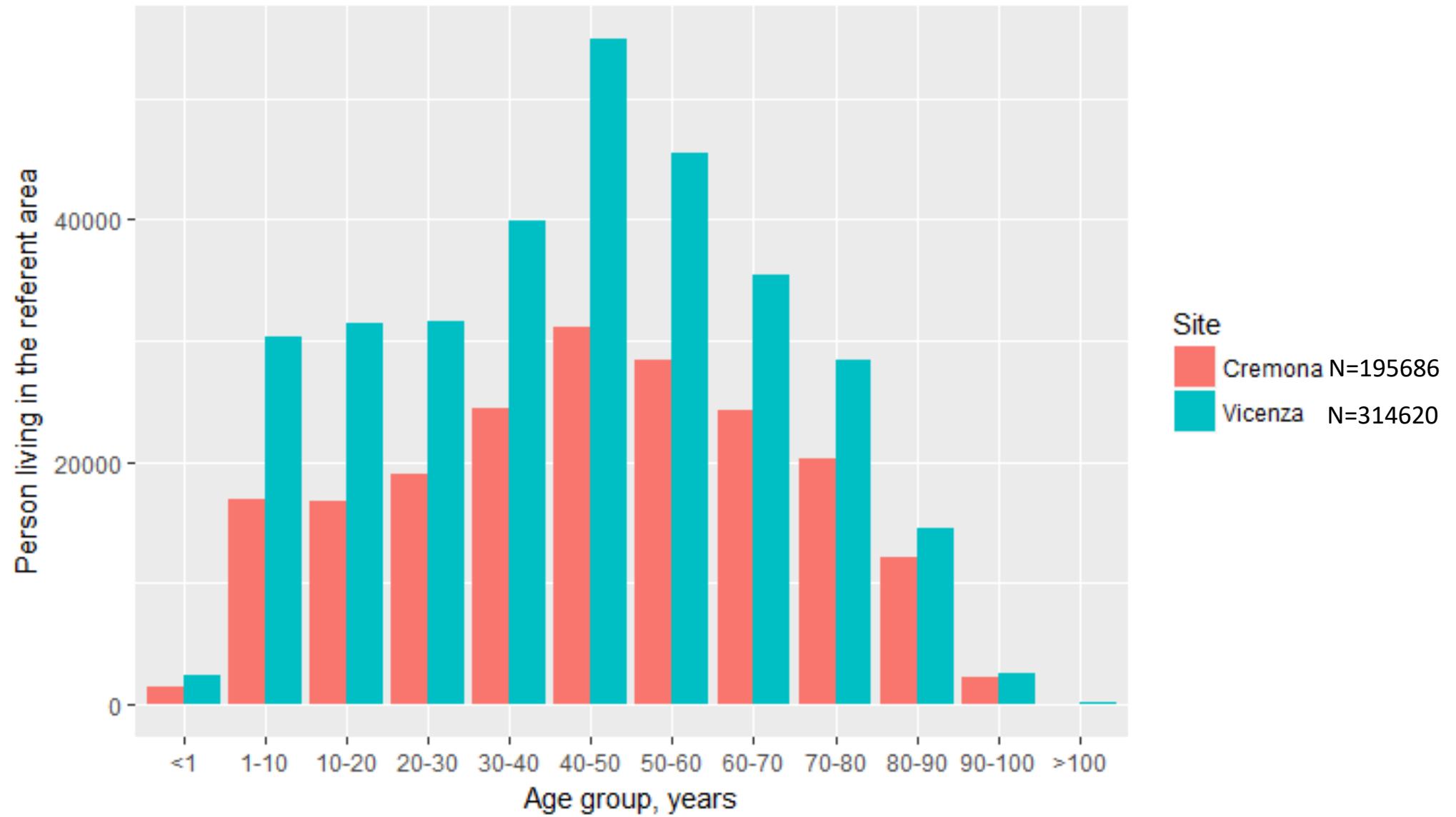


GPs

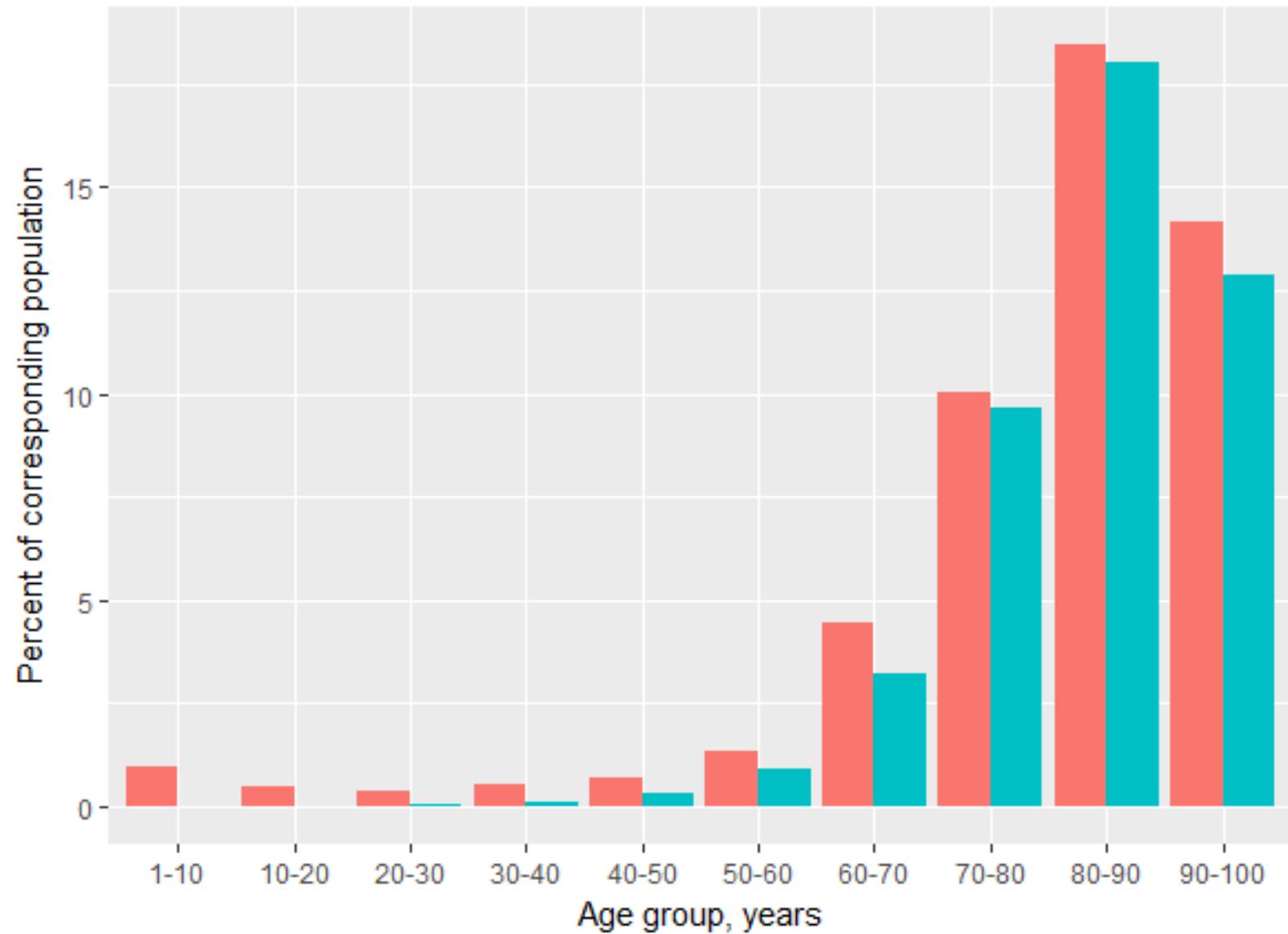


Methods

- From March 1st 2016 to June 30th 2017, all admissions to the EDs were monitored on a daily basis and reviewed for major complications of anticoagulant treatment (either bleeding or thrombotic)
- All discharge diagnoses reviewed
- Primary study outcome: Stroke or systemic embolism
- All cases adjudicated (G. Castaman, M. Sessa)
- Use of anticoagulant drugs ascertained by analysis of administrative pharmacy data



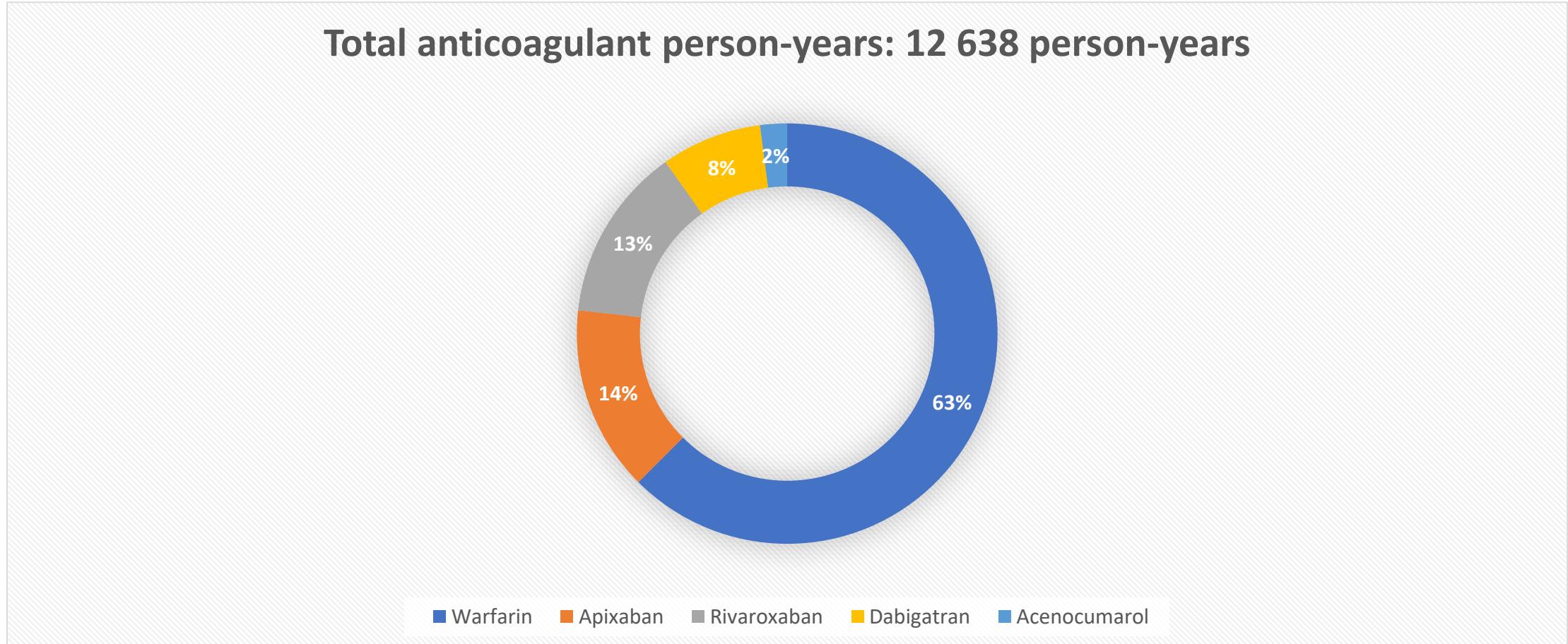
(http://dati.istat.it/Index.aspx?DataSetCode=DCIS_POPRES1)



Site
Cremona
Vicenza

Rate of AVK or DOAc use
(Cremona/Vicenza):
1.44 (1.39-1.48)

Anticoagulants used: 65% VKA

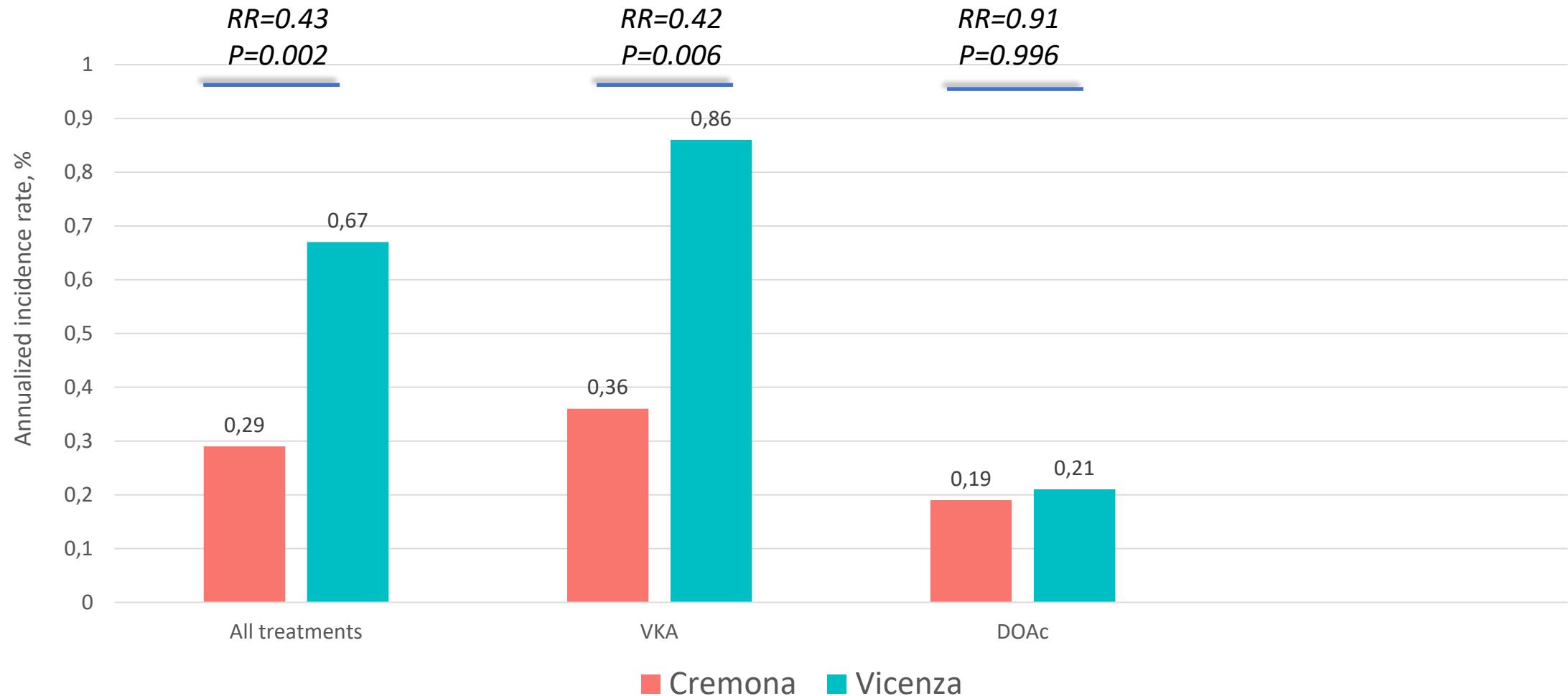


	Cremona N=58	Vicenza N=139	p.overall
Sex:			0.824
Female	28 (48.3%)	63 (45.3%)	
Male	30 (51.7%)	76 (54.7%)	
Mean age	77.4 (9.04)	79.2 (11.2)	0.253
Reason for anticoagulation			0.007
Mechanical Prosthesis	8 (14.5%)	13 (9.77%)	
NVAF	39 (70.9%)	116 (87.2%)	
VTE	8 (14.5%)	4 (3.01%)	
Thrombotic complications:			0.324
PE	1 (3.57%)	0 (0.00%)	
DVT	0 (0.00%)	1 (1.39%)	
IMA	6 (21.4%)	8 (11.1%)	
Stroke	16 (57.1%)	40 (55.6%)	
TIA	3 (10.7%)	17 (23.6%)	
Peripheral Embolism	2 (7.14%)	4 (5.56%)	
Other	0 (0.00%)	2 (2.78%)	
Bleeding complications:			<0.001
Intracerebrale	6 (20.0%)	14 (25.9%)	
Subdurale	5 (16.7%)	4 (7.41%)	
Gastrointestinale	11 (36.7%)	2 (3.70%)	
Emoftoe / Emottisi	1 (3.33%)	0 (0.00%)	
Ematuria	1 (3.33%)	7 (13.0%)	
Ematoma muscolare	1 (3.33%)	2 (3.70%)	
Emotorace	1 (3.33%)	0 (0.00%)	
Altro	2 (6.67%)	4 (7.41%)	

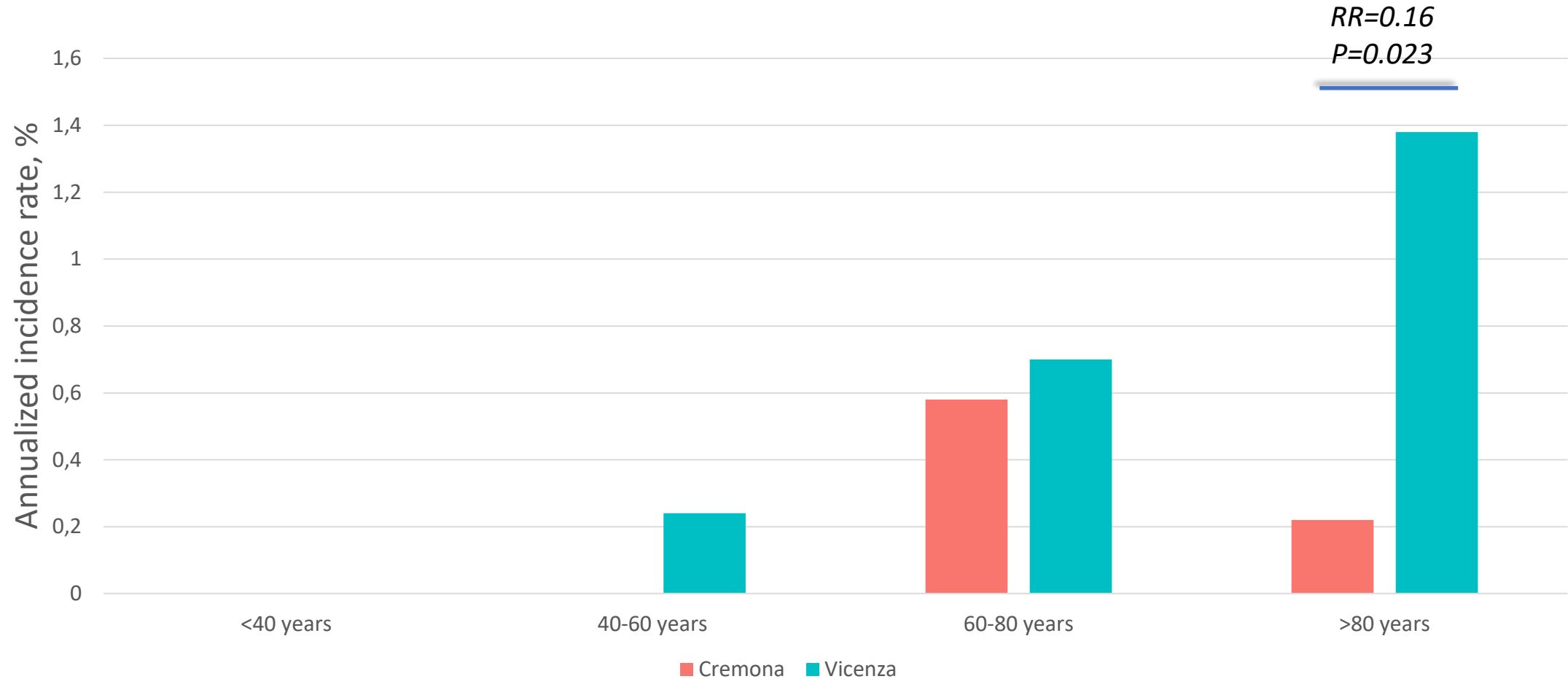
Prevention of cardioembolic events



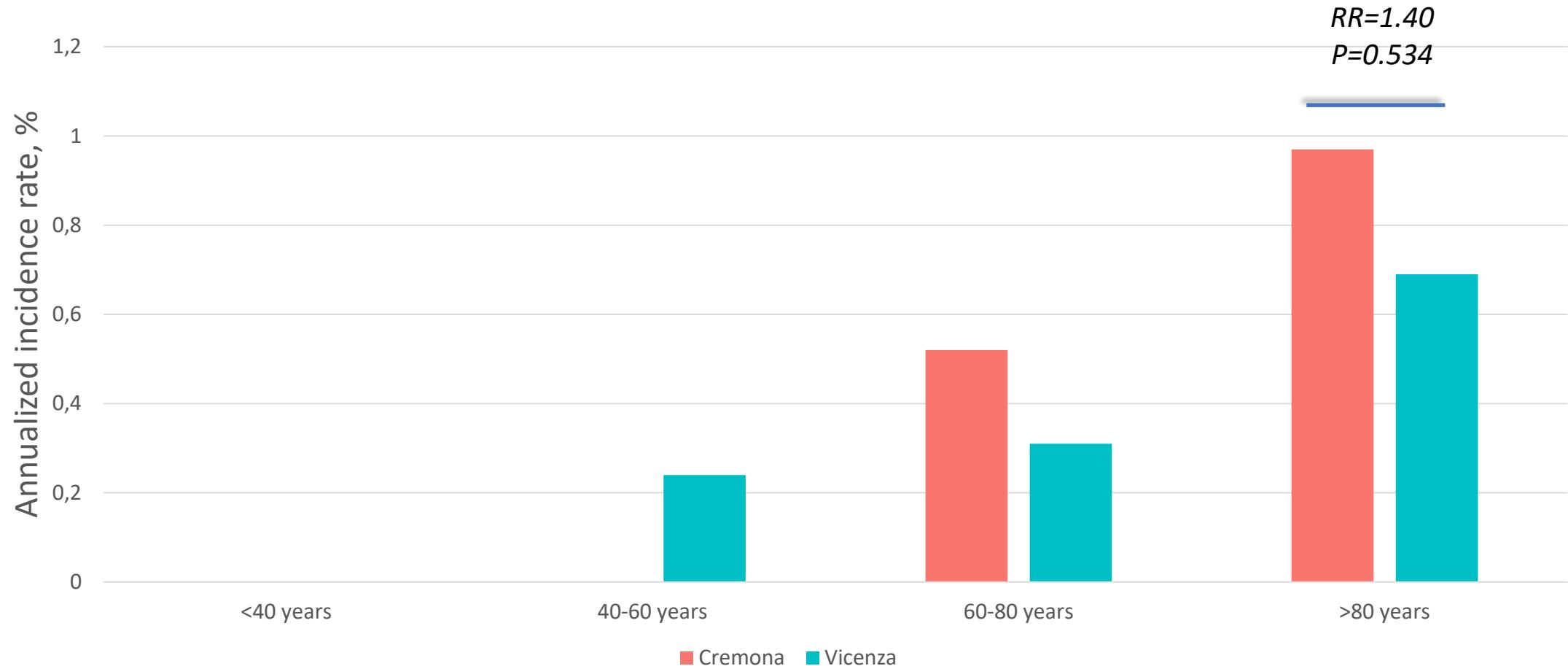
Prevention of cardioembolic events



Incidence of cardioembolic events in VKA patients, by age groups



Incidence of bleeding events in VKA patients, by age groups



Conclusions

- The Cremona model is associated with an increased use of anticoagulants in the population
- *In those treated*, the Cremona model lowers the rate of cardioembolic events
- Potentially saving 1 embolism every 263 treated patients
- The advantage is almost entirely attributable to the significantly lower rate in patients receiving VKA
- Under evaluation
 - Cost/benefit of the strategy
 - Bleeding complications

Acknowledgments

- Cremona

S. Testa, O. Paoletti, F. Catalano, M. Tala, P. Esteban, S. Mannino, R. Morandini, M. Sessa

- Vicenza

A. Tosetto, I. Nichele, M. Di Paolo, A. Maroni, F. Cora'

G. Palareti, G. Castaman