[P-T-595] MONITORING AND DOSAGE MODULATION OF ENOXAPARIN DURING PREGNANCY

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Introduction: Low molecular weight heparin (LMWH) are widely used in pregnancy for prophylactic or therapeutic anticoagulation. The need to adapt and monitor LMWH dosage during pregnancy remains controversial.
Methods: We studied 25 women receiving LMWH (Enoxaparin) prophylaxis during pregnancy. LMWH was administered alone in women with a past history of venous thrombo-embolism (VTE) (14) and in combination with low dose aspirin in those with thrombophilia and previous complicated pregnancies (11). Treatment was initiated at about 11 (4-20) weeks of gestation. The starting daily dose was 40 mg except in one obese patient who received 60mg. Monitoring of the anti-Xa activity, D-dimers (DD) level and full blood count was performed every 4.5 (3-7) weeks.
Patients were followed during approximately 20 (11-32) weeks. Target anti-Xa activity was 0.3-0.5 for 23 patients and increased to 0.5-0.7 for 2 high-risk patients.
Results: The average number of monitoring visits during pregnancy was 4.5. The target anti-Xa was reached in 77.8%. For 20 patients, the initiation dose of 40 mg had to be inceased to 60 mg (10) or 80 mg (9). Tolerance of Enoxaparin was good with the exception of one allergic skin reaction that required a switch to Nadroparin. No significant thrombocytopaenia, bleeding complications, recurrence of VTE or adverse pregnancy outcome were reported. Mean DD level of 541 ng/ml slightly decreased to 450 ng/ml after initiation of Enoxaparin and culminated at 929 ng/ml during the third trimester, a value very close to that measured in normal pregnancy. No significant relationship was found between the DD level, the anti-Xa activity and the LMWH dosages.
Conclusions: LMWH during pregnancy is safe and effective. Anti-Xa monitoring and dosing adaptations are however required to maintain the anti-Xa in the target ranges. DD changes, although reflecting treatment efficacy, show wide inter-individual variability and cannot be used to tailor LMWH treatment.
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