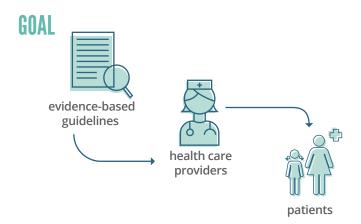


THE STATE-OF-THE-ART METHODOLOGY BEHIND NEW VENOUS THROMBOEMBOLISM (VTE) GUIDELINES

VTE is a common and serious blood clotting condition that includes both deep-vein thrombosis (DVT) and pulmonary embolism (PE). Deep-vein thrombosis is a blood clot that typically forms in the deep veins of the leg. DVT can develop into a PE, a life-threatening condition that occurs when the clot breaks free and becomes lodged in the arteries of the lung.

The American Society of Hematology (ASH) has long recognized the need for a comprehensive set of guidelines on the treatment of VTE for hematologists and other health care providers.

In partnership with the McMaster University GRADE Centre, a world leader in guideline development and an authority on thrombosis, ASH brought together more than 100 experts, including hematologists, clinicians from other specialties, and patient representatives, to synthesize the evidence and develop comprehensive clinical practice guidelines for VTE.



Produce and maintain evidence-based guidelines that will support health care providers and patients in making the best care decisions

RATIONALE

VTE is a common and serious condition treated in a variety of settings. There are treatments that are proven to work but not used consistently:

- Greater understanding of risk factors now than what existed before
- More options available for treating patients, including new medications

New medications have been approved that can reverse harmful effects

Tests can identify genetic markers for risk

CONDITIONS/TOPICS ADDRESSED



Prevention of VTE in surgical and medical patients



Diagnosis of VTE



Treatment of VTE, including both DVT and PE



Optimal management of anticoagulation therapy



Thrombophilia testing



Heparin-induced thrombocytopenia



VTE and pregnancy



VTE in patients with cancer



Treatment of VTE in pediatric populations

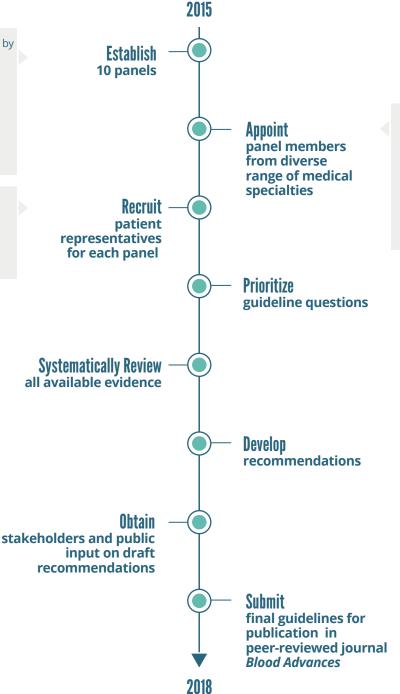
MULTI-YEAR, STATE-OF-THE-ART, TRANSPARENT, AND SCIENTIFIC PROCESS

10 panels vetted and appointed by ASH, totaling more than 100 individuals.

Panelists disclosed all financial and nonfinancial interests.

Conflicts of interest were managed through panel composition, disclosure, and recusal.

Each panel had at least one patient representative, who participated equally with the medical experts throughout the entire development process.



Every panel included U.S. and international experts from multiple disciplines, such as hematology, internal medicine, pharmacy, surgical specialties, oncology, and OB-GYN, as well as experts in evidence synthesis and guideline development.

For more information on the 2018 ASH Clinical Practice Guidelines on Venous Thromboembolism, visit www.hematology.org/VTE.

