



Peri-Operative Systemic Anticoagulation in Vascular Trauma: A Prospective Study

Jha Manvendu

Military Hospital, Srinagar, India

Abstract:

From Jan 2016 to Dec 2019, 53 patients with 73 vascular injuries underwent vascular repair at this center. All isolated arterial and mixed (arterial and venous both) prospectively received a fixed dose of intraoperative and post-operative infusion of Unfractionated heparin. Patients with vascular injuries in conjunction with other injuries; abdominal, thoracic and head injuries were also included in the study. Patients who presented with class III limb or with primary traumatic amputation and isolated venous injuries were not included in this study. Methods of repair included autologous conduit, synthetic interposition graft and primary repair. Primary end point was defined as vessel patency during index hospitalization, defined as absence of clinical or radiographic evidence of vessel thrombosis. Secondary endpoints included limb salvage, return to the operating room for bleeding and mortality. All patients were healthy males in the age group of 21 to 47 years with no known comorbidities. Nineteen patients were cases of isolated vascular trauma while 34 patients had some concomitant injury in form of orthopedic, abdominal, thoracic or head injury. Of patients with arterial injuries, 36 patients underwent RSVG (reversed saphenous vein bypass graft), 03 patients underwent primary repair, 01 patient underwent vein patch repair while one patient with Axillary artery transection underwent PTFE interposition graft. There were three amputations (2 trans-tibial and 1 transfemoral).

Nineteen cases had clinical and biochemical evidence of reperfusion injury in the form of foot wrist drop. 16 cases had foot drop while 03 cases had wrist drop. No patient had any evidence of intracranial or any bleeding at any other site. Only three patients, who had associated abdominal and thoracic trauma required massive perioperative transfusion due to extensive intraoperative blood loss. Limb salvage rate was 92.68%. There were 03 mortalities. Two patients had Acute kidney injury, while one



patient, who had concomitant splenic, kidney and aortic injury died on 7th post of day due to sepsis and multiorgan dysfunction.

Biography:

Dr Manvendu Jha, completed his MBBS from Armed forces Medical college, Pune followed Masters in General surgery and Vascular surgery. He is a certified instructor for CCRISP course for the Royal College of surgeons and presently employed as a vascular surgeon at a peripheral trauma center.

Publication of speakers:

1. Kaur, Jaspreet & Sarma, Anil & Jha, Mithilesh & Gera, Poonam. (2020). Valorisation of crude glycerol to value-added products: Perspectives of process technology, economics and environmental issues. *Biotechnology Reports*. 27. e00487. 10.1016/j.btre.2020.e00487.
2. Kaur, Jaspreet & Gera, Poonam & Jha, M. & Sarma, Anil. (2020). A Study on Conversion of Glycerol into Solketal Using Rice Husk-Derived Catalyst. 10.1007/978-981-15-2662-6_54.
3. Kaur, Ravneet & Biswas, Bijoy & Kumar, Jitendra & Jha, Mithilesh & Bhaskar, Thallada. (2020). Catalytic hydrothermal liquefaction of castor residue to bio-oil: Effect of alkali catalysts and optimization study. *Industrial Crops and Products*. 149. 112359. 10.1016/j.indcrop.2020.112359.

[International Conference on Surgery and Anesthesia | August 10, 2020 | London, UK](#)

Citation: Jha Manvendu; Peri-Operative Systemic Anticoagulation In Vascular Trauma: A Prospective Study; Euro Surgery 2020: August 10, 2020; London, UK