



Health Awareness

How To Avoid Taking A HIT In The Hospital

(NAPSA)—If you or someone you care about is considering surgery, you may find it useful to know what medications may be used in the hospital.

For example, for 50 years, the blood thinner heparin has been used to prevent or treat blood clots, which is very important for your physician to prevent or treat. An estimated 12 million people are given this medicine each year. Many people undergoing surgery, however, may not be aware that this medicine can cause a life-threatening, serious allergic reaction called heparin-induced thrombocytopenia or HIT.

Every year, approximately three percent to five percent of patients (360,000 to 600,000 people) develop HIT, which is almost twice the number of new breast cancer cases diagnosed annually. If not detected early and treated promptly, this reaction to heparin can cause complications such as strokes, heart problems, limb amputation, organ damage, skin problems, even death.

The good news is that doctors have discovered alternative blood thinners known as direct thrombin inhibitors that can be used to stop the clotting process and help avoid problems associated with HIT in the event that this side effect occurs.

For instance, consider the case of a critical care nurse named Cheryl Cusac, RN, CCRN, MBA, whose arm began to swell seven days after receiving heparin therapy following routine knee surgery: "The fact that I survived was incredible. My blood began to clot and my body simply was shutting down. My hand had turned blue and my arm had swollen to the shoulder, and was two to three times its normal size."

Because of her near-death experience, Cusac is on a new mission—to educate others about the condition that nearly took her life.



Surgery patients should speak to their doctors about heparin-induced thrombocytopenia.

She says health care workers should be on the lookout for HIT. "One of my goals is to educate health care workers to be more aware of monitoring the levels of platelets (important blood cells) prior to surgery and to recognize that one cause of platelet count decreases is HIT," she said. In her hospital, patients are given a questionnaire about their allergies that includes a question about heparin.

"HIT is a serious drug reaction found in today's hospitals, yet frequently, unacceptable delays occur before treatment is initiated. When the signs of HIT are not recognized, and treatment is not initiated speedily, then the outcome becomes progressively worse for the patient," said Lawrence Rice, M.D., professor of medicine and hematology program director, Baylor College of Medicine, Houston. Dr. Rice is an expert on HIT and has many years of experience diagnosing and treating the disease.

According to Dr. Rice, "It is very important to stop all heparin exposure when HIT is suspected and to begin therapy with an alternative blood thinner such as a direct thrombin inhibitor to stop the clotting process and to prevent

HIT Q & A

Q. What is heparin-induced thrombocytopenia (HIT)?

A. HIT is a severe, life-threatening allergic reaction to heparin. Blood clots can form which may lead to serious consequences including loss of a leg, stroke and even death.

Q. What is heparin?

A. Heparin, referred to as a 'blood thinner,' is used to prevent blood clot formation.

Q. When is heparin used?

A. Heparins (unfractionated and low molecular weight heparins) are commonly used in patients during and/or following medical and surgical procedures ranging from abdominal surgeries to procedures designed to open blocked arteries in the heart. Heparin also is an important treatment for such clotting conditions as deep vein thrombosis.

Q. Should I try to avoid heparin?

A. No, unless your doctor indicates you are at risk for HIT or other complications associated with heparin.

Q. What should I discuss with my doctor about HIT?

A. If you had HIT in the past, then let your doctor know. Once you have experienced HIT, the doctor will want to help you avoid heparin because alternative blood thinners are available.



the formation of new clots."

Only your doctor can decide if you should receive heparin, and he or she can also monitor your therapy to look for a low platelet count or other signs of HIT during heparin therapy.

To learn more about HIT, call toll free 1-877-GSK-4HIT for a free Question and Answer sheet.