PEARLS

Home treatment has benefits over in-patient treatment for deep vein thrombosis

Clinical Question	Compared to standard in-patient hospital regimens, how effective is home-based treatment for venous thromboembolism (VTE)?
Bottom Line	Low-quality evidence suggested that patients treated at home with low molecular weight heparin (LMWH) were less likely to have recurrence of VTE than those treated in hospital. There were no clear differences in major or minor bleeding complications, nor in mortality (low-quality evidence), indicating that treatment at home with LMWH was not more harmful than treatment in an in-patient setting with LMWH or unfractionated heparin. Despite the limitations of reviewed trials, low-quality evidence suggested that home treatment of patients with VTE was more effective than standard hospital treatment. Studies that looked at cost found that cost of home management was lower per incident of treatment.
Caveat	A large number of participants in the home treatment group were not treated solely at home. There was heterogeneity in the findings of the larger trials, making it difficult to interpret and apply the results. A large number of eligible participants were excluded from trials before randomisation, raising concerns about applicability.
Context	LMWHs allow people with VTE to receive their initial treatment at home instead of in hospital.
Cochrane Systematic Review	Othieno R et al. Home versus in-patient treatment for deep vein thrombosis. Cochrane Reviews, 2018, Issue 1. Art. No.: CD003076.DOI: 10.1002/14651858. CD003076.pub3. This review contains seven studies involving 1,839 participants.

Pearls No. 590, August 2018, written by Brian R McAvoy. C27

Cochrane systematic review link: http://cochranelibrary-wiley.com/doi/10.1002/14651858.CD003076.pub3/full