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Although bleeding has traditionally been regarded as the most frequent and severe hemostatic complication of liver disease, there is increasing awareness that an elevated international normalized ratio (INR) in patients with cirrhosis and 'autoanticoagulation' may not be protective from thrombosis.

1

**Name of Journal:** *World Journal of Hepatology*

**Manuscript NO:** 45521

**Manuscript Type:** ORIGINAL ARTICLE

*Retrospective Study*

**Effectiveness of venous thromboembolism prophylaxis in patients with liver disease**

Yerke J *et al.* Effect of chemoprophylaxis in cirrhotic liver disease

Jason Yerke, Seth Bauer, Stephanie Bass, Heather Torbic, Michael Militello, Erin Roach, Ibrahim Hanounch, Sarah Welch

**Abstract**

**BACKGROUND**

1 Patients with liver disease are concomitantly at increased risk of venous thromboembolism (VTE) and bleeding events due to changes in the balance of pro- and anti-hemostatic substances. As such, recommendations for the use of pharmacological VTE prophylaxis are lacking. Recent studies have found no difference in rates of VTE in those receiving and not receiving pharmacological VTE prophylaxis, though most studies have been small. Thus, 1 our study sought to establish if pharmacological VTE prophylaxis is effective and safe in patients with liver disease.

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