■ **Use of dalteparin sodium for thromboprophylaxis in high-risk pregnancies is effective and safe without anti-FXa* monitoring,** report researchers from the UK. In this study, unmonitored dalteparin sodium** was used in 27 pregnancies in 25 women who had a history of thrombotic events. No thromboembolic episodes occurred in these 27 pregnancies. Only one woman, who had a placental abruption at 35 weeks, had a major postpartum haemorrhage. None of the other deliveries were complicated by bleeding. Three women had minor, self-limiting bleeding during their pregnancies, such as epistaxis or vaginal bleeding.

* anti-activated factor X

** SC dalteparin sodium was given initially at 5000 IU/day, increased to 5000IU twice daily at 16–20 weeks, omitted during labour and restarted immediately after placenta delivery. The dose was reduced to 5000 IU/day at 3 days' postpartum and continued for 6 weeks, unless warfarin was restarted.

Hunt BJ, et al. Thromboprophylaxis with unmonitored intermediate-dose low molecular weight heparin in pregnancies with a previous arterial or venous thrombotic event. Blood Coagulation and Fibrinolysis 14: 735-739, No. 8, Dec 2003

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