

Enoxaparin sodium/heparin

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Heparin-induced thrombocytopenia: case report

A 57-year-old man developed heparin-induced thrombocytopenia (HIT) while receiving heparin and enoxaparin sodium.

The man presented, requiring treatment in an ICU for HIT and phlegmasia cerulea dolens. Two weeks earlier, he had undergone right total knee arthroplasty. Following the surgery, he had developed a right popliteal vein deep vein thrombosis (DVT) and had started receiving heparin [*dosage, route and duration of therapy not stated*]. Following his initial treatment with heparin, he received enoxaparin sodium [*dosage and route not stated*] and warfarin. He developed right foot pain with cyanosis, oedema and absent pedal pulses 1 week later, and was diagnosed with an extension of DVT. Laboratory investigations found a 40% decline in his platelet count.

Enoxaparin sodium was discontinued and the man received lepirudin. HIT was confirmed, and continued to progress despite treatment. He underwent fasciotomy for compartment syndrome related to phlegmasia cerulea dolens. He responded to plasma exchange therapy and his platelet count recovered. No further thrombotic events occurred.

Author comment: "*Treatment of HIT involves discontinuation of all heparin products and preventing thrombosis with non-heparin based anticoagulants. However, despite the implementation to this strategy, the patient continued to have clinical deterioration.*"