HEMODYNAMICALLY SIGNIFICANT GASTROINTESTINAL BLEEDING AFTER MUCOSAL BIOPSY DURING UPPER ENDOSCOPY IN AN ANTICOAGULATED PATIENT

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Introduction

The periprocedural management of anticoagulated patients undergoing endoscopy remains an area of controversy.

According to the American Society of Gastrointestinal Endoscopy (ASGE) 2009 guideline on the management of antithrombotic agents for endoscopic procedures, upper endoscopy with or without mucosal biopsy is considered a low-risk procedure for bleeding even in the setting of therapeutic warfarin.

Case

32 year-old Asian female hospitalized for 1 week of severe epigastric pain, nausea with emesis and weight loss. She was Also noted to have right sided pelvic pain.

Computed Tomography (CT) Scan showed right ovarian vein thrombosis

Weight based therapeutic enoxaparin (Lovenox) at 50mg subcutaneously twice daily was given.

Elective upper endoscopy was performed due to unremitting symptoms despite acid blockage and antiemetic therapy. Mucosal biopsies were obtained.

Discussion

Low risk procedures, such as EGD +/- mucosal biopsy, are defined by the ASGE as having a bleeding risk of <1% with a thromboembolic event risk of 1.9%.

The current ASGE guidelines do not recommend the discontinuation of anticoagulation prior to these low risk endoscopic procedures.

The literature suggesting that mucosal biopsy during endoscopy in the setting of anticoagulation is low risk was done primarily with patients on therapeutic warfarin. The absolute risk of an embolic event for patients with a low risk condition such as deep vein thrombosis is 1-2 per 1000 patients. Complications from ovarian vein thrombosis include sepsis, pulmonary embolism, and death.

Conclusions

Management is controversial when balancing the risk of gastrointestinal hemorrhage versus the risk of thromboembolic events in an anticoagulated patient.

The ASGE recommendations are based from studies involving anticoagulation with warfarin for both the risk of bleeding and thromboembolism during endoscopy.

This case highlights that enoxaparin may pose an increased risk of gastrointestinal bleeding in the setting of mucosal biopsy.

References