



Challenges in Cancer-Associated Thrombosis

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Message from the Guest Editor

Cancer patients are at increased risk of venous thromboembolism (VTE). VTE incidence associated with cancer has increased due to VTE detection in routine-imaging testing for cancer staging. VTE in cancer presents an increased risk of recurrence, bleeding, and mortality. The updated guidelines recommend either apixaban, rivaroxaban, or low molecular weight heparin (LMWH) for thromboprophylaxis in selected high-risk outpatients with cancer without a contraindication to anticoagulation or drug–drug interactions. Guidelines also consider rivaroxaban, edoxaban or LMWH as options for the treatment of VTE in cancer patients. LMWH, edoxaban, and rivaroxaban are preferred for long-term anticoagulation (at least 6 months). It is considered anticoagulation beyond 6 months in select patients with metastatic disease or those receiving chemotherapy, but biomarkers that guide us on the duration of VTE treatment in cancer patients are not yet established.

In this Special Issue, articles about direct oral anticoagulant drugs in cancer patients and about different approaches to select cancer patients for thromboprophylaxis or to decide the suitable anticoagulation duration will be reported.





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Message from the Editor-in-Chief

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