



Incidence of Venous Thromboembolism and Hematoma Following Placement of Inflatable Penile Prosthetic: Safety of Perioperative Subcutaneous Heparin

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Introduction/Objective

- AUA and EAU do not address VTE in IPP patients
- IPP patients are high risk for VTE ~1%¹
- ED and Caprini risk score comorbidities overlap
- Administer SqH perioperatively, no drain
- VTE Incidence, Hematoma formation, Caprini Scores

Inflatable Penile Prosthetic = IPP
Venous Thromboembolism = VTE
Subcutaneous Heparin = SqH
Erectile Dysfunction = ED



Methods

- Retrospective review Jan 2021-July 2023
- Reviewed demographics, comorbidities, VTE incidence, hematoma formation, and 90-day post-operative complications
- Calculated Caprini risk factor score
- Statistical analyses performed



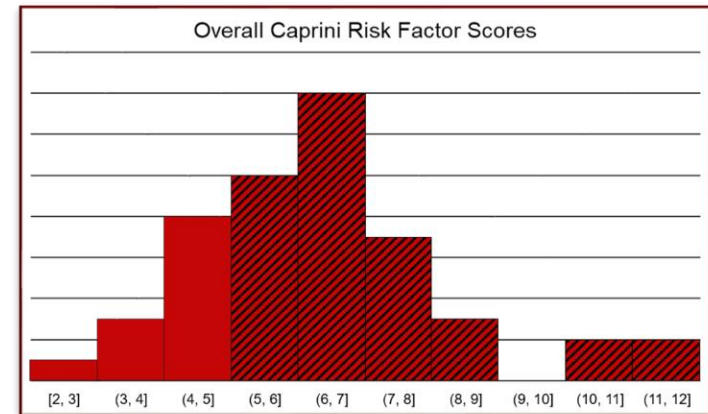
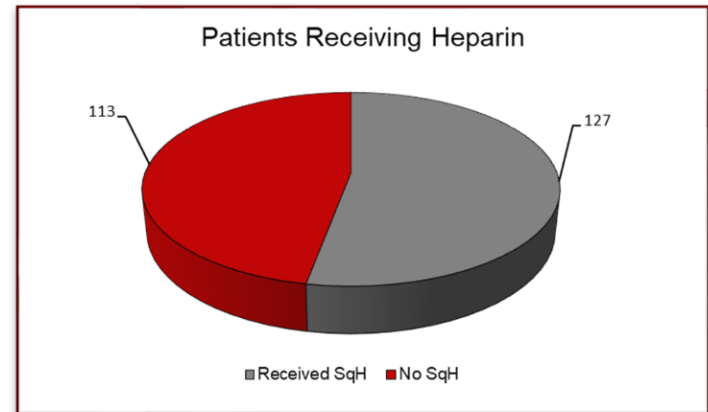
Results

	SqH (n=127)	No SqH (n=113)	P-value
Diabetes (%)	44.1	38.1	0.343
BMI	30.1	31.2	0.078
HTN (%)	74.8	62.8	0.045
Peripheral/Central Vasc. Disease (%)	22	30.1	0.155
Average Caprini Score	6.79	6.82	0.474
Immunosuppressed (%)	3.1	4.4	0.604
Smoker (%)	30.7	34.5	0.530
History of Malignancy (%)	40.9	45.1	0.513
COPD (%)	4.7	10.6	0.084
History of MI (%)	3.1	2.7	0.820
CVA/TIA (%)	10.2	5.3	0.158
HLD (%)	63.0	54.0	0.157
CHF (%)	7.9	12.4	0.244
Average Operative Time (min)	78.1	85.9	0.032
VTE Incidence (%)	0	0.9	0.288
Hematoma Incidence (%)	5.5%	6.2%	0.898



Results Cont.

- 53% (n=127) of 240 total patients received SqH
- VTE – 0.9% (non-SqH only)
- Hematoma formation similar
 - SqH 5.5% vs. non-SqH 6.2%
p=.898
- 94% of all patients ≥ 5 Caprini Risk factor score



Conclusions

- Perioperative SqH is safe and effective
- No VTE observed in SqH group
- In our patient cohort, did not increase hematoma
- Should consider SqH for IPP surgery patients

