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To the Editor

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With great interest, we read the article “Aspirin Is an Effective Prophylaxis for Venous Thromboembolism in Ambulatory Patients with Femoral Neck Fracture Undergoing Hip Arthroplasty” (2022;104:603-9), by Chisari, et al. This study got the conclusion that aspirin is an effective option for venous thromboembolism (VTE) prophylaxis in patients with femoral neck fracture who undergo hip arthroplasty. However, there are some issues in this study that deserve mention:

1. Thromboprophylaxis prior to surgery can effectively reduce the risk of preoperative deep vein thrombosis (DVT) for patients with femoral neck fracture [1]. This manuscript didn't show how long the surgery was done after fracture. If the surgery cannot be performed at once, is there any precaution was taken preoperatively for VTE prevention? If yes, it would be valuable to list the therapeutic schedule in the manuscript.
2. As a kind of physical VTE preventive methods, weight bearing of lower limb is of great significance for VTE prevention postoperatively. An early mobilisation less than 24 hours after knee replacement resulted in a 30-fold reduction in the risk of post-operative DVT [2]. In hence, the author should tell us when the patients started weight bearing after surgery.
3. Clopidogrel is a kind of antiplatelet drug, which is the mainstay of treatment and secondary prevention of cardiovascular disease, including acute coronary syndrome, transient ischemic attack, and peripheral artery disease [3]. As is known that VTE manifests as either pulmonary embolism (PE) and/or DVT. We didn't find solid evidence to support that clopidogrel could be used for VTE treatment or prophylaxis. In this study, clopidogrel was regarded as “other” group when compared with “aspirin” group. It may affect the accuracy of the final results.

We commend the author's previous work on VTE prevention. Except the mentioned points above, we think this is a rigorous study. If the above research data can be further provided, the author's conclusion can be more scientific and persuasive.

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References

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Conflict of Interest: None Declared