

Rates of VTE, major bleeding high in primary CNS lymphoma

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mortality was seen in association with pulmonary embolism and major bleeding (hazard ratios, 1.61 and 2.36, respectively).

"Development of a clinical prediction model for both VTE and [major bleeding](#) in patients with PCNSL may also help guide decisions on thromboprophylaxis which could mitigate the need for therapeutic anticoagulation in this high risk population," the authors write.

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(HealthDay)—For patients with primary central nervous system lymphoma (PCNSL), the incidence of venous thromboembolism (VTE) and major bleeding is high, according to a study published in the November issue of *Leukemia & Lymphoma*.

Anjlee Mahajan, M.D., from the University of California Davis School of Medicine in Sacramento, and colleagues determined the cumulative incidence of VTE and major bleeding using California hospitalization data for 992 PCNSL patients using the California Cancer Registry (2005 to 2014).

The researchers found that the 12-month cumulative incidence of VTE and major bleeding was 13.6 and 12.4 percent, respectively. An [increased risk](#) for VTE was seen in association with chemotherapy and [radiation therapy](#) (hazard ratios, 2.41 and 1.56, respectively). The risk for major bleeding was increased in association with [pulmonary embolism](#) and proximal deep vein thrombosis, likely due to anticoagulation. Increased

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