THE RISK OF THROMBOSIS (BLOOD CLOTS) WITH THE USE OF THALIDOMIDE AND/OR REVLIMID

In January 2007, Dr. Bob did an extensive and comprehensive medical literature review regarding the risk of thrombosis (blood clots) associated with the use of Revlimid and/or thalidomide.

For patients treated with Revlimid or thalidomide alone, the risk of blood clots appears to be very small, especially if they are also treated with aspirin or low-molecular weight heparin (LMWH) along with their Revlimid or thalidomide.

If you are using aspirin as your blood thinner, Dr. Bob recommends taking one adult-strength Ecotrin (enteric-coated aspirin that looks like an M&M candy) per day with food. Taking it with food may reduce the risk to develop heartburn, indigestion and/or ulcers. You might also consider taking a proton pump inhibitor (PPI) medication (such as Prilosec, Prevacid, Nexium, Protonix, Acid) to help prevent ulcers. Other categories of antacid medicines such as Tagamet, Zantac and/or Pepcid do not work nearly as well as a PPI. Use a PPI, and if you want to also take Tagamet, Zantac, or Pepcid, do so, but you still must take a PPI (in my opinion).

If you are using a LMWH as your anticoagulant (Lovenox, Innohep, Fragmin), you must use full-dose therapeutic LMWH, not the lower dose preventive schedule (once again, this is only my opinion).

In the various thalidomide/Revlimid studies reported in our medical literature, patients treated with thalidomide or Revlimid alone, who were also treated with full-dose aspirin or full-dose LMWH, had a risk of blood clots that was typically less than 1%.

For patients who were treated with thalidomide or Revlimid, but who were also treated with a high-dose Decadron protocol, such as is used in multiple myeloma, 40 mg per day, four days at a time every week or so, and/or if the treatment protocol...
involved using various types of chemotherapy (such as are used in patients with multiple myeloma), then the risk to develop blood clots was much greater.

As always --

Be happy,
Be well,
Live long and prosper,

DR. BOB

** None of the above should be construed as medical advice or consultation, and anything discussed in this paper is meant for information only. All medical treatments, consultations, decisions and recommendations can only be made by the patient and his/her treating physician. There are side effects associated with all medicines, and the reader is reminded to discuss the risks, benefits, and alternatives of every medication with their prescribing doctor before taking any medicine.

2/1/07