

What Is the Bleeding Complication Risk Associated With Intrapleural Enzyme Therapy Use in Pleural Infection?

STUDY DESIGN

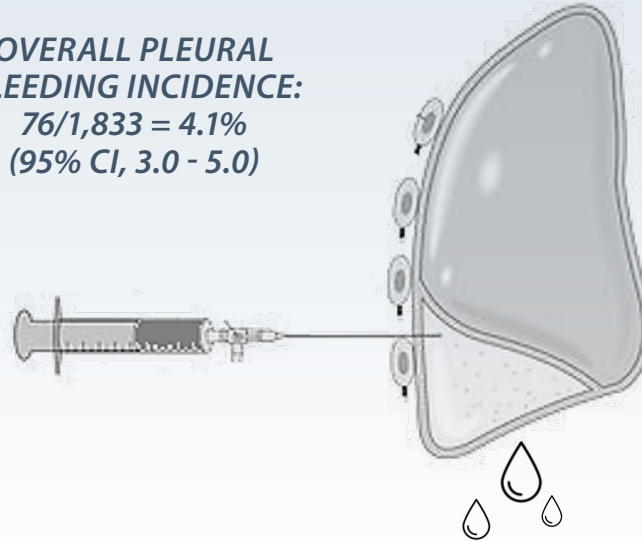
International, multicenter, retrospective, observational study from 2012 to 2019 exploring bleeding risk with intrapleural enzyme therapy (IET)

1,851 patients studied with a diagnosis of pleural infection

Primary outcome was **overall incidence of pleural bleeding**

RESULTS

OVERALL PLEURAL BLEEDING INCIDENCE:
 $76/1,833 = 4.1\%$
 (95% CI, 3.0 - 5.0)



- Therapeutic anticoagulation (AC) associated with increased bleeding rates
 - $19/197 = 9.6\%$
- Withholding AC prior to IET mitigated risk
 - $3/118 = 2.6\%$, $P = .017$
- Half-dose tissue plasminogen activator did not change risk
 - $6/172 = 3.5\%$, $P = .68$

IET confers a low overall bleeding risk. Bleeding risk is increased with concurrent AC; however, withholding AC prior to IET reduces this risk.