



## ENOXAPARIN

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### Treatment of VTE

<b>Standard dose</b>	1.5mg/kg once daily or 1mg/kg twice daily
<b>Duration</b>	Minimum 5 days Continue enoxaparin until therapeutic anticoagulant effect (INR 2-3) has been achieved for 2 consecutive days. Initiate warfarin within 72 hours where appropriate.
<b>Exceptions</b>	
CrCL < 30mL/min	1mg/kg once daily (after initial standard dose)
Weight > 100kg	1mg/kg twice daily
Weight > 200kg*	Consider dosing as per lean body weight
Pulmonary embolism	1mg/kg twice daily
Active malignancy	1mg/kg twice daily for 2 weeks, then 1.5mg/kg once daily for 2 weeks, then 1mg/kg once daily (on advice from haematologist)

\*Refer to a haematologist for advice if patient weighs over 150kg

**Lean body weight: Male:** 50kg + (0.9kg/cm >150cm)

**Female:** 45kg + (0.9kg/cm >150cm)

For convenience, prescribe to the nearest 10mg dose (as per graduations on the pre-filled syringe) until 120mg, and then round to 135mg or 150mg. Always measure precisely.

### SPECIAL AUTHORITY CRITERIA

**Enoxaparin is available fully subsidised for 1 year for:**

- Pregnant women who require LMWH
- Treatment of VTE for patients with a malignancy

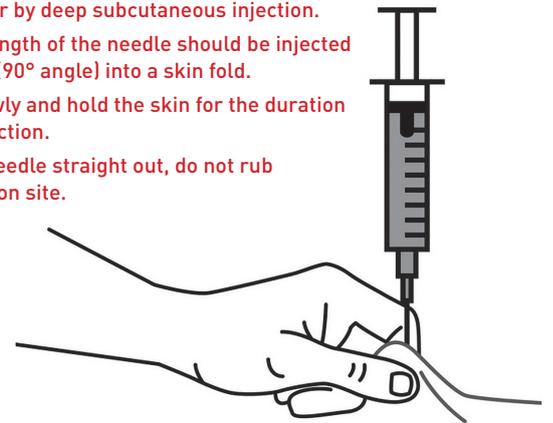
**Subsidy is valid for 1 month for:**

- Short-term treatment of VTE prior to establishing a therapeutic level of oral anticoagulant treatment
- Prophylaxis and treatment of VTE in high-risk surgery
- Cessation or re-establishment of existing oral anticoagulant treatment pre or post-surgery
- Prophylaxis and treatment for VTE in ACS (Acute Coronary Syndrome) with surgical intervention
- Cardioversion of AF (Atrial Fibrillation)

### CHECK ADMINISTRATION TECHNIQUE

Do not expel the air bubble before injection. If the volume needs to be adjusted, hold the syringe down to dispel excess enoxaparin without expelling the air bubble. Administer by deep subcutaneous injection as below.

- Administer by deep subcutaneous injection.
- The full length of the needle should be injected vertically (90° angle) into a skin fold.
- Inject slowly and hold the skin for the duration of the injection.
- Pull the needle straight out, do not rub the injection site.



To avoid scarring from multiple injections, alternate the injection site between the left and right abdomen. Ask patients to check their injection sites, and to report any painful skin reactions. Emphasise safe storage of new and used syringes to all patients.

### ACKNOWLEDGEMENTS

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### KEY REFERENCES

1. Sanofi-Aventis New Zealand Limited. Clexane<sup>®</sup> and Clexane Forte<sup>®</sup> (Enoxaparin sodium) datasheet 28-05-14 [www.medsafe.govt.nz/profs/datasheet/c/Clexaneinj.pdf](http://www.medsafe.govt.nz/profs/datasheet/c/Clexaneinj.pdf) (Accessed 11-03-15)
2. Application for subsidy by special authority. Enoxaparin sodium. Form SA1174 April 2015 [www.pharmac.govt.nz/2015/04/01/SA1174.pdf](http://www.pharmac.govt.nz/2015/04/01/SA1174.pdf) (Accessed 30-03-15)
3. Low molecular weight heparin use in primary care. Best Practice Journal Nov 2009 (24) 32-36 [www.bpac.org.nz/BPJ/2009/November/heparin.aspx](http://www.bpac.org.nz/BPJ/2009/November/heparin.aspx) (Accessed 30-03-15)
4. New Zealand Formulary. Enoxaparin sodium. [http://nzf.org.nz/nzf\\_1453](http://nzf.org.nz/nzf_1453) (Accessed 11-03-15)

[CLICK HERE FOR FURTHER INFORMATION ON ENOXAPARIN AND A FULL REFERENCE LIST](#)

For further information on other high-risk medicines visit our website at: [www.saferx.co.nz](http://www.saferx.co.nz)

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