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Ambulatory treatment of low-risk pulmonary embolism in fragile patients: a subgroup analysis of the multinational Home Treatment of Pulmonary Embolism (HoT-PE) Trial

Lukas Hobohm ^{1,2}, Toni Anušić³, Stavros V. Konstantinides ^{1,4} and Stefano Barco ^{1,5}, for the HoT-PE Investigators⁶

Affiliations: ¹Center for Thrombosis and Hemostasis (CTH), University Medical Center of the Johannes Gutenberg University, Mainz, Germany. ²Center for Cardiology, Cardiology I, University Medical Center of the Johannes Gutenberg-University, Mainz, Germany. ³Institute of Medical Biostatistics, Epidemiology and Informatics (IMBEI), University Medical Center, Mainz, Germany. ⁴Dept of Cardiology, Democritus University of Thrace, Alexandroupolis, Greece. ⁵Clinic of Angiology, University Hospital Zurich, University of Zurich, Zurich, Switzerland. ⁶A list of the HoT-PE Investigators can be found in the acknowledgements section.

Correspondence: Stavros V. Konstantinides, Center for Thrombosis and Hemostasis (CTH), University Medical Center Mainz, Langenbeckstraße 1, 55131 Germany. E-mail: stavros.konstantinides@unimedizin-mainz.de



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Early discharge and home treatment of acute pulmonary embolism in fragile patients appears to be feasible and acceptably safe. Caution is warranted due to the higher risk of major bleeding among fragile patients. <https://bit.ly/2YtStiU>

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To the Editor:

Pulmonary embolism is the third most frequent acute cardiovascular disease with an annual incidence of approximately 100 cases per 100 000 population and an annual mortality of ≥ 7 deaths per 100 000 population in the European region [1, 2]. Initial management is adjusted to the risk of in-hospital death or early complications, which depend both on the severity of pulmonary embolism and the presence of comorbidities [3].