

Aspirin therapy appears safe before thyroid surgery

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therapy was associated with a statistically significant increase (3.3 percent; 95 percent confidence interval, 0.4 to 9) in total hematoma formation. However, aspirin therapy was not associated with a statistically significant increase in recurrent laryngeal nerve injury, though these results were also inconclusive (2.6 percent; 95 percent confidence interval, ?1.1 to 8.6).

"Further research with a larger sample size and more outcome events are required to make definitive conclusions regarding the association between [aspirin](#) use and complications, including hematoma and recurrent laryngeal nerve injury," the authors write.

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(HealthDay)—Continuing aspirin therapy before thyroid surgery does not appear to increase the risk of intraoperative bleeding, according to a study published online March 1 in *JAMA Otolaryngology-Head & Neck Surgery*.

Blake S. Raggio, M.D., from the Tulane University Medical Center in New Orleans, and colleagues retrospectively analyzed data from a consecutive sample of 570 patients (aged 18 to 100 years) who underwent thyroid surgery by a single surgeon for benign and malignant disease from 2010 through 2015. Comparisons were made between patients receiving and not receiving preoperative [aspirin therapy](#).

The researchers found that 18.6 percent of surgeries were performed in patients receiving aspirin (21.7 percent in men and 99.1 percent in patients >45 years). There were no statistically significant or clinically meaningful increases in intraoperative blood loss with aspirin [therapy](#). Although the results were inconclusive, aspirin

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