# Article information:

Enoxaparin for primary thromboprophylaxis in symptomatic outpatients with COVID-19 (OVID): a randomised, open-label, parallel-group, multicentre, phase 3 trial - The Lancet Haematology
[https://www.thelancet.com/journals/lanhae/article/PIIS2352-3026(22)00175-2/fulltext](https://www.thelancet.com/journals/lanhae/article/PIIS2352-3026%2822%2900175-2/fulltext)

# Article summary:

1. OVID was a phase 3 trial investigating whether thromboprophylaxis with enoxaparin would prevent untoward hospitalisation and death in symptomatic, but clinically stable outpatients with COVID-19.

2. The 30-day risk of the primary outcome (untoward hospitalisation and all-cause death) was similar in participants allocated to receive enoxaparin and in controls.

3. No major bleeding events were recorded, and no deaths were reported during the study.

# Article rating:

Appears well balanced: The article presents the information in a reliable and balanced way, without biases and prejudices. The claims made in the article are well supported and, where applicable, all sides of the argument are given opportunity to present their point of view. The article appears trustworthy and reliable.

# Article analysis:

The article is generally reliable and trustworthy, as it is based on a randomized, open-label, parallel-group, investigator-initiated, phase 3 trial conducted at eight centres in Switzerland and Germany. The study was registered in ClinicalTrials.gov (NCT04400799), which adds to its credibility. Furthermore, the authors have provided detailed information about the methods used for the study as well as the results obtained from it.

The article does not appear to be biased or one-sided; rather, it presents both sides of the argument equally by providing evidence for both the efficacy of enoxaparin for thromboprophylaxis in COVID-19 patients as well as its lack thereof. Additionally, potential risks associated with using enoxaparin are noted throughout the article.

The only potential issue with this article is that it does not explore any counterarguments or alternative treatments that could be used instead of enoxaparin for thromboprophylaxis in COVID-19 patients. However, this does not detract from its overall reliability or trustworthiness since this is beyond the scope of this particular study.

# Topics for further research:

* Alternative treatments for thromboprophylaxis in COVID-19 patients
* Risks associated with enoxaparin use
* Clinical trials for thromboprophylaxis in COVID-19
* Evidence-based guidelines for thromboprophylaxis in COVID-19
* Long-term effects of enoxaparin use
* Comparative effectiveness of enoxaparin and other treatments for thromboprophylaxis in COVID-19

# Report location:

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