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BACKGROUND AND IMPORTANCE

✓ Direct-acting oral anticoagulants

- ✓ Developed to minimize the drawbacks of oral vitamin K antagonists
- ✓ Goal: to keep or improve the efficacy/safety in the bleeding monitoring
- ✓ Pivotal clinical trials show a favorable benefit/risk ratio



✓ Clinical trials have methodological limitations

AIM AND OBJECTIVES

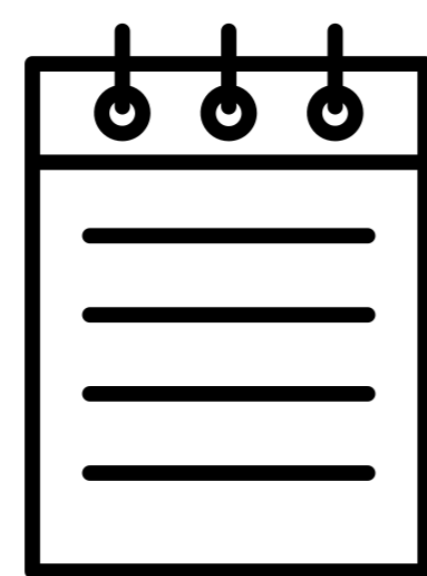
- ✓ To determine the frequency of bleeding events that require hospital admission in patients receiving DOAC treatment, analyzing the characteristics of the patients and classifying the bleeding events according to the type of DOAC and the site of bleeding

MATERIAL AND METHODS

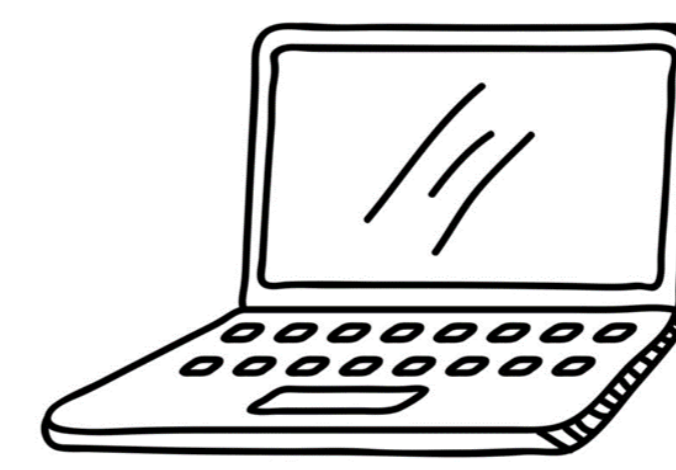
- ✓ Retrospective observational study that includes all patients treated with DOACs who required hospital admission due to a bleeding event (ICD-10-CM: T45.51)



From January
2016
to March 2022



- ✓ Sex
- ✓ Age
- ✓ DOAC and type of hemorrhage responsible for hospital admission



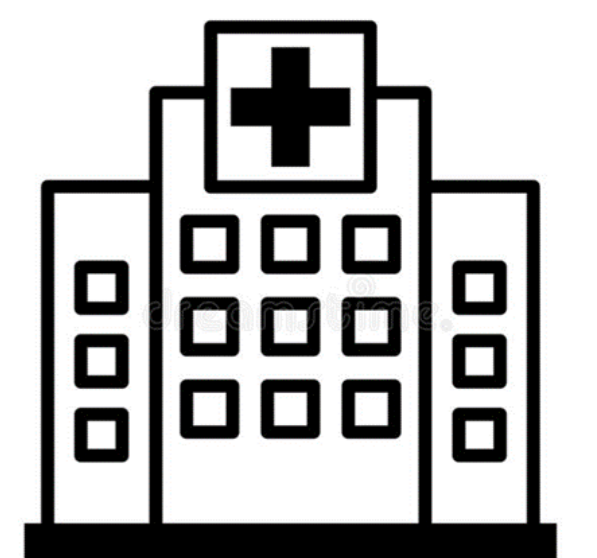
- ✓ Computerized medical records
- ✓ Statistical program SPSS®

RESULTS

✓ **53 hospital admissions**

✓ Mean age: 79.3 ± 7,1years

✓ Sex: 37 (69,8%) men



Hospital admissions / DOAC	Dabigatran	Apixaban	Rivaroxaban	Edoxaban				
Episodes	20 (37,7%)	17 (32,1 %)	8 (15,1%)	8 (15,1%)				
Hospital admissions / type of hemorrhage	Lower gastrointestinal bleeding (LGIB)	Hematuria	Upper gastrointestinal bleeding (UGIB)	Intracranial hemorrhage (ICH)				
Episodes	23 (43,4%)	11 (20,8 %)	9 (17,0%)	7 (13,2%)				
Most prevalent DOAC / type of hemorrhage	LGIB	Hematuria	UGIB	ICH				
Episodes	Dabigatran 10 (43,5%)	Apixaban 4 (36,4 %)	Apixaban 4 (44,4%)	Dabigatran 5 (71,4%)				
Type of hemorrhage / age range	LGIB	Hematuria	UGIB	ICH				
80 years or older	43,5%	54,5%	55,6%	57,1%				
Younger than 80 years	56,5%	45,5%	44,4%	42,9%				
Type of hemorrhage / sex	LGIB		Hematuria		UGIB		ICH	
	Episodes	OR (IC)	Episodes	OR (IC)	Episodes	OR (IC)	Episodes	OR (IC)
Women	9 (56,3%)	1,68 (0,74-3,83)	1 (6,3%)	0,26 (0,38-1,72)	1 (6,3%)	0,33 (0,49-2,16)	4 (25,0%)	2,19 (0,98-4,90)
Men	14 (37,8%)	0,79 (0,54-1,16)	10 (27,0%)	1,41 (1,06-1,90)	8 (21,6%)	1,35 (0,99-1,85)	3 (8,1%)	0,58 (0,24-1,39)

CONCLUSION AND RELEVANCE

- ✓ Patients who required hospitalization were elderly, having a higher risk of suffering different hemorrhages when were over 80 years old. Statistically significant differences between hematuria and men were observed. Gastrointestinal hemorrhages and hematurias were the most frequent diagnosis. Dabigatran was the cause for most of the hospital admissions, being mainly involved in LGIB and ICH, followed by apixaban, related with UGIB and hematuria