New oral anticoagulants for the prevention of thromboembolic events in patients with atrial fibrillation

Canadian Agency for Drugs and Technologies in Health

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Authors' objectives
Compare the clinical effectiveness and safety of these anticoagulants with warfarin Determine the cost and economic impact of these anticoagulants compared with warfarin Compare these anticoagulants with optimal warfarin therapy Review available strategies to identify over-anticoagulation and bleeding risk with new oral anticoagulants Review available strategies to prevent and treat bleeding associated with new oral anticoagulants Develop recommendations for the use of new oral anticoagulants Determine what tools are available to help health practitioners and consumers manage therapy with new oral anticoagulants and, if needed, develop new tools

Authors' conclusions
Compared with warfarin, the benefits of new oral anticoagulants are small. The estimated number of patients who would avoid a stroke or other blood clot if treated with a new drug rather than warfarin was 2 to 6 people for every 1,000 patients treated per year. Bleeding risks for patients treated with the newer drugs compared with warfarin were similar overall, with a modest decrease in intracranial bleeding and a small increase in gastrointestinal bleeding. A systematic review showed that there is no reversal agent or proven management strategy if bleeding occurs with the new drugs. The cost-effectiveness of the new drugs was uncertain.

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