

Stop the Clot: Evaluation of Apixaban Use

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BACKGROUND

Although apixaban is a widely prescribed anticoagulant, safety concerns with its use still exist.¹ Previous studies suggest that its appropriateness in the clinical setting is suboptimal and research is lacking on assessing this within NSW hospitals.^{1, 2}

AIM

To investigate the current prescribing patterns of apixaban and to assess its concordance with local guidelines^{2, 3} and impact on patient readmission rates.

METHOD

1

- 3-month retrospective observational study conducted
- 221 electronic medical records screened for inclusion

2

- Data collated on
 - Patient demographics
 - Apixaban prescribing
 - Whether apixaban was reviewed when clinically indicated
 - Evidence of bleeding incidents
 - Evidence of bleed-related hospital readmissions within 1 and 6 months of discharge
 - Consequent length and cost of hospital stay

3

- Descriptive statistics used to analyse findings

RESULTS

Percentage Concordance of Apixaban to Guidelines (n=78)

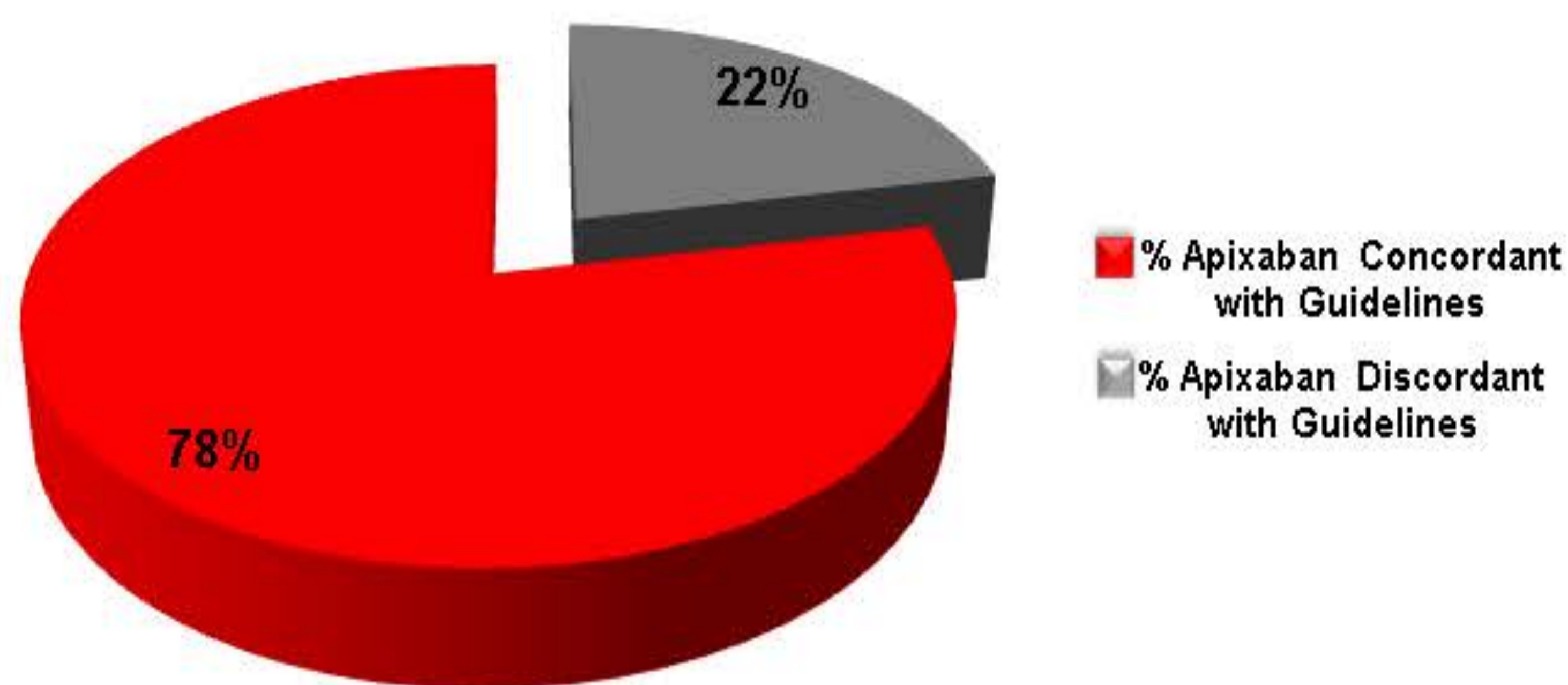


Figure 1: Percentage Concordance of Apixaban to Guidelines

Prevalence of Bleeding Incidents, Apixaban Clinical Review and Hospital Re-admission within Six Months

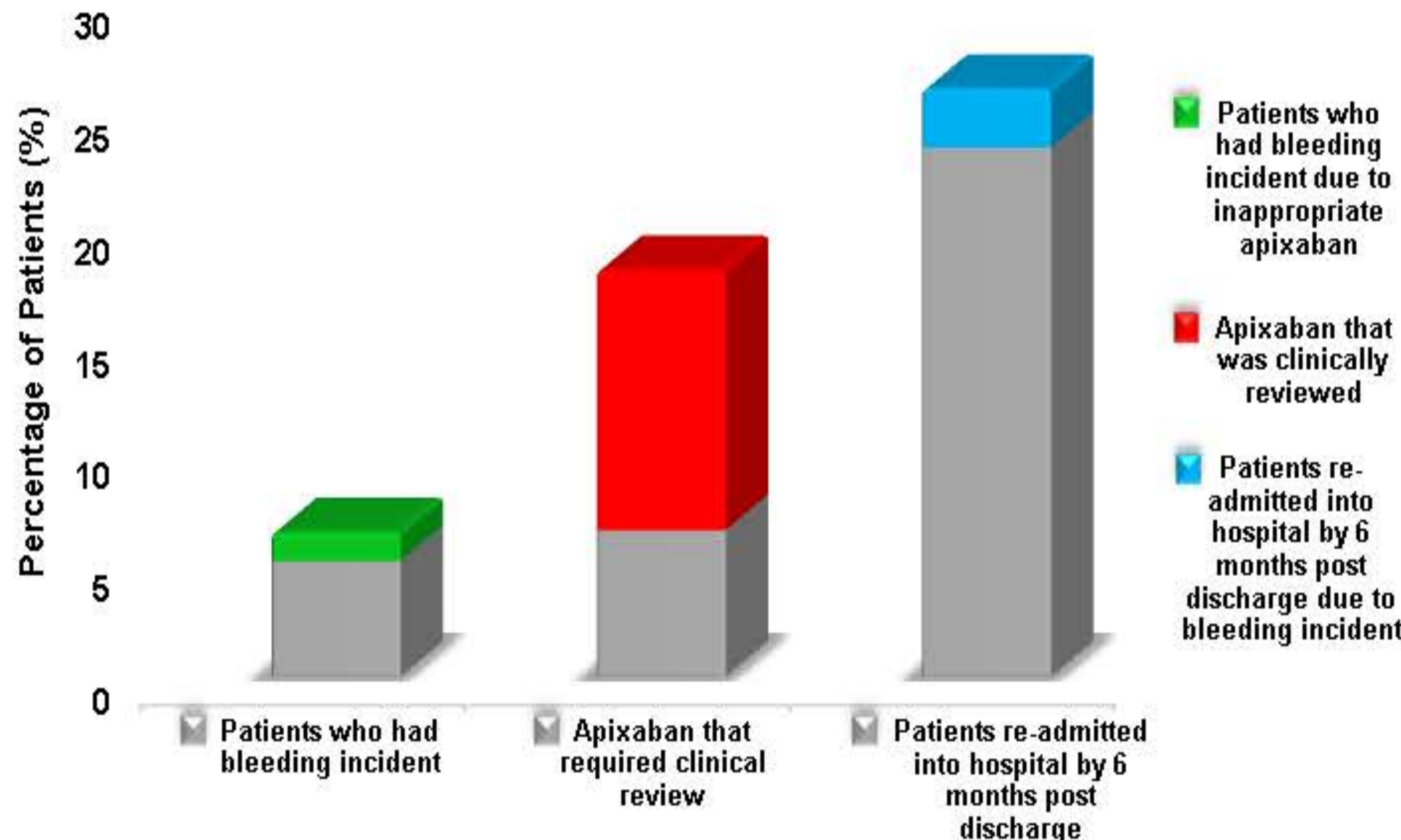


Figure 2: Prevalence of Bleeding Incidents, Apixaban Clinical Review and Hospital Re-admission within Six Months

CONCLUSION

Although the majority of apixaban was concordant with guidelines, inappropriate therapy led to higher rates of bleeds and hospital readmissions. Future studies could explore the pharmacist's role in optimising apixaban use in the hospital setting.

REFERENCES

1. Clinical Excellence Commission, 2017, Non-vitamin K Antagonist Oral Anticoagulant (NOAC) Guidelines, Updated July 2017, Sydney: Clinical Excellence Commission
2. South Western Sydney Local Health District, 2017, New Oral Anticoagulants (NOACs), Issues November 2017, Sydney: NSW Health
3. Australian Medicines Handbook, 2018, Apixaban, Updated July 2018, Adelaide: Australian Medicines Handbook Pty Ltd