Drug use evaluation of conventional versus new oral anticoagulants at discharge from a department of internal medicine

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BACKGROUND AND OBJECTIVE
The recently introduced Oral Direct Anticoagulants (ODAs), presumably safer, and with comparable efficacy to the Vitamin K Antagonists (VKAs), may re-shape the world of anticoagulation medicine. To analyze this potential change, this study aimed to review the prescription habits of ODAs and VKAs at discharge.

SETTING AND METHOD
☆ One year retrospective study in the department of internal medicine of a regional hospital (HVS Sion) using electronic medical records.
☆ All patients receiving an ODA were included and matched to a patient treated with a VKA.

MAIN OUTCOME MEASURES
☆ Definition of an appropriate prescription at discharge:
  • adequate indication
  • absence of contraindication
  • adequate dosing
  • minimal risk of drug-drug interaction
  • no major bleeding or venous thromboembolism during the hospitalization
☆ Evaluation of bleeding risk when the indication was atrial fibrillation (AF): HAS-BLED score.

RESULTS
☆ 44 patients included (VKA: 22; ODA: 22).
☆ 34 patients (77.3 %) received an appropriate prescription.
☆ Inadequate dosing: 5 patients (88.6 %).
☆ Potential drug-drug interaction: in 4 patients receiving a VKA, in 1 patient receiving an ODA.
☆ Major contraindication: none found (but discussion of a relative contraindication in 3 cases).
☆ The majority of patients receiving an ODA for an AF had a minor bleeding risk (15/18).

CONCLUSIONS
☆ No significant difference ascertained between the 2 groups regarding the appropriateness of prescription.
☆ Our results suggest that ODAs were cautiously used in our setting.