NOACs have been widely adopted into practice

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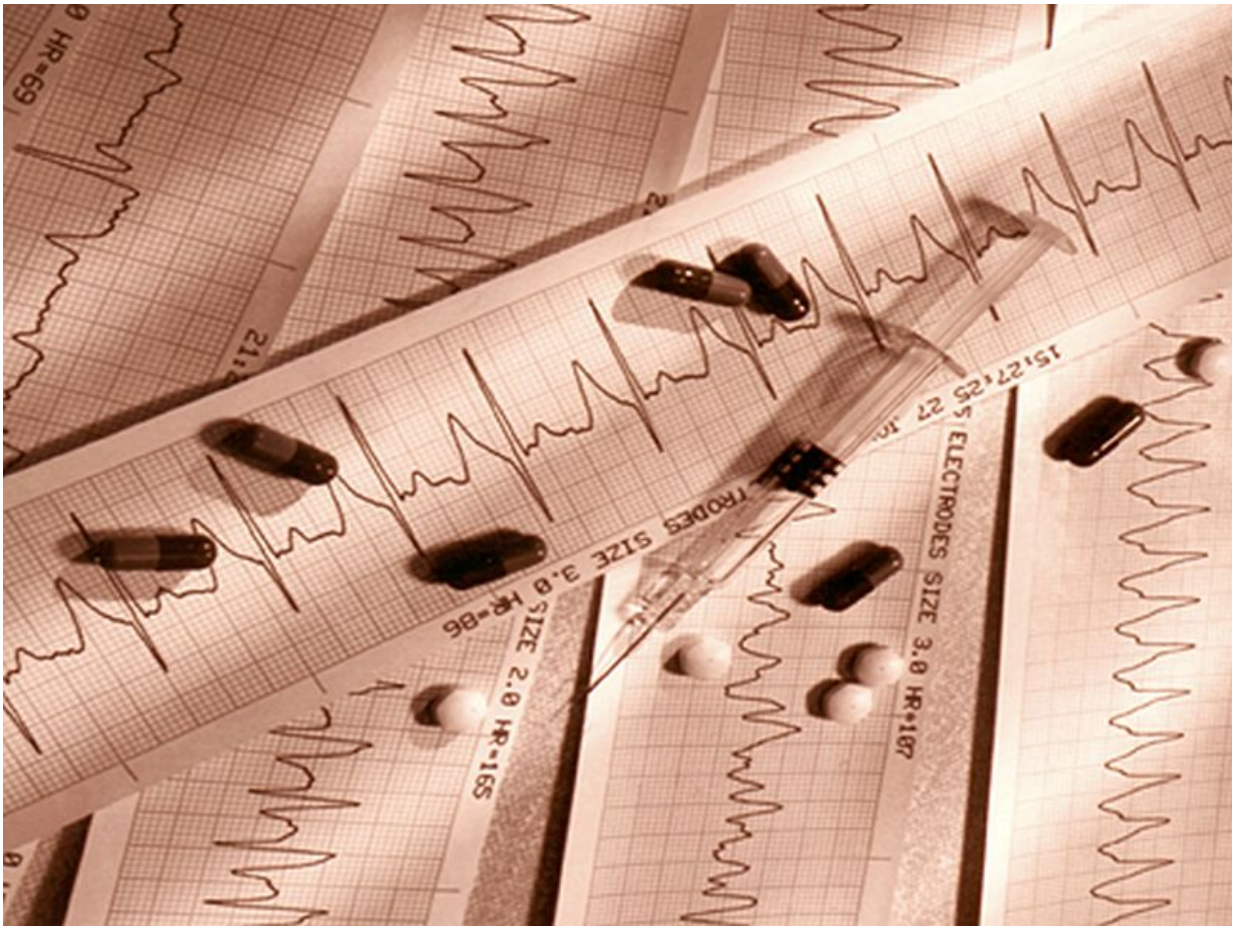

(HealthDay)—Non-vitamin K antagonist oral anticoagulants (NOACs)

have been adopted into practice and are more frequently prescribed than vitamin K antagonists (VKAs) in the Global Registry on Long-Term Oral Antithrombotic Treatment in Patients With Atrial Fibrillation trial, according to research published in the Feb. 21 issue of the *Journal of the American College of Cardiology*.

Menno V. Huisman, M.D., Ph.D., from the Leiden University Medical Center in the Netherlands, and colleagues compared phase 2 baseline data with the pre-NOAC era data collected during phase 1. A total of 15,092 eligible patients were enrolled during phase 2.

The researchers found that 86.1 percent of the patients had high stroke risk and 13.9 percent had moderate risk. Overall, 79.9 percent received oral anticoagulants (47.6 and 32.3 percent, respectively, received NOAC and VKA), and 12.1 and 7.8 percent received antiplatelet agents and no antithrombotic treatment, respectively. Among phase 1 patients, 32.8, 41.7, and 20.2 percent, respectively, were prescribed VKA, acetylsalicylic acid, and no therapy. NOAC treatment was more common in Europe in phase 2 than VKA (52.3 versus 37.8 percent, respectively); 6.0 and 3.8 percent of patients received antiplatelet treatment and no antithrombotic treatment, respectively. In North America, 52.1 and 26.2 percent received NOAC and VKA, respectively, while 14.0 and 7.5 percent, received antiplatelet drugs and no antithrombotic treatment, respectively.

"Worldwide, however, a large proportion of patients remain undertreated, particularly in Asia and North America," the authors write.

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Editorial