Lower risk of gastrointestinal bleeding for apixaban

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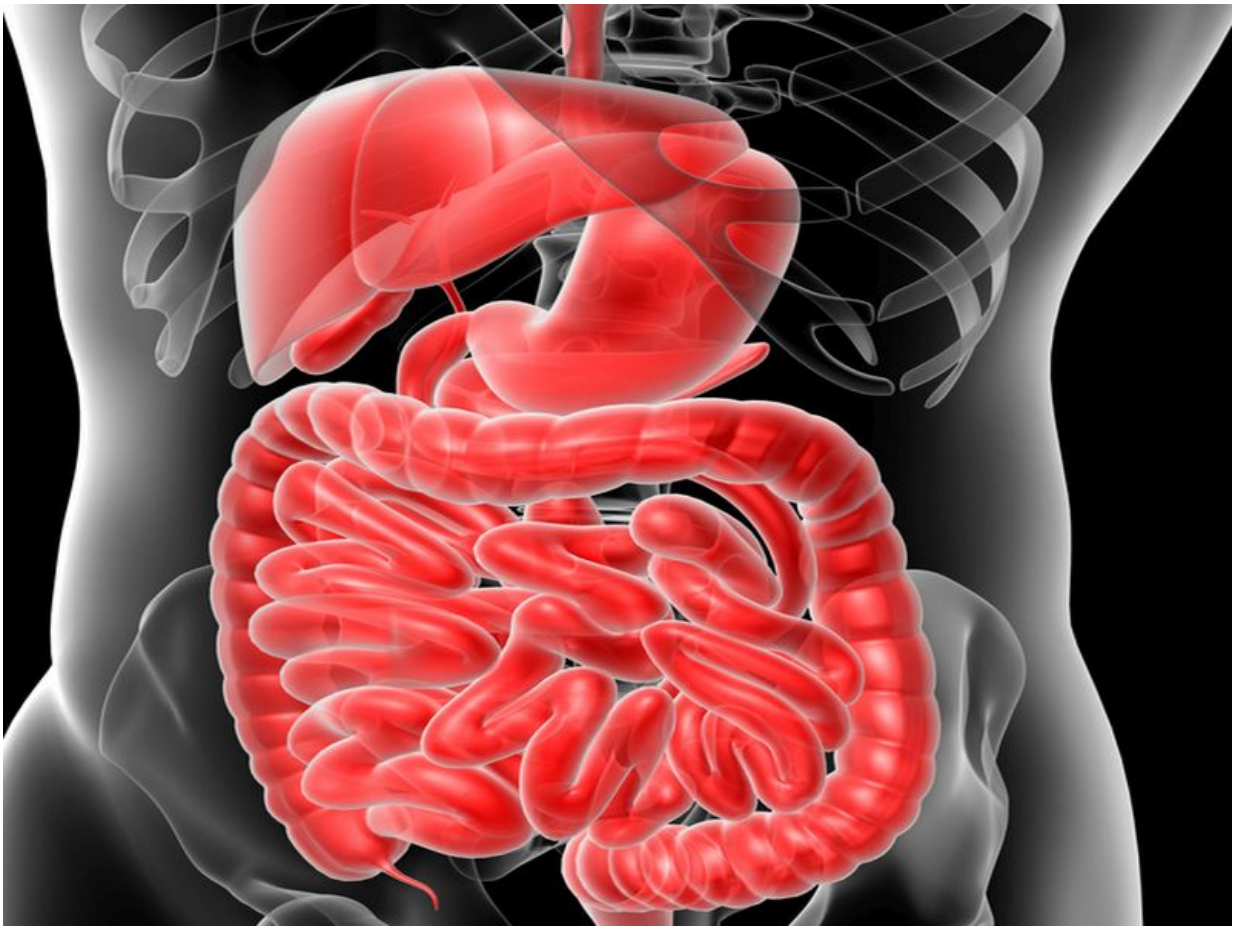

(HealthDay)—For patients receiving direct oral anticoagulant (DOAC)

agents for non-valvular atrial fibrillation, apixaban is associated with a lower risk of gastrointestinal (GI) bleeding than rivaroxaban or dabigatran, according to a study published in the April issue of *Gastroenterology*.

Neena S. Abraham, M.D., from the Mayo Clinic in Scottsdale, Ariz., and colleagues conducted a retrospective study using administrative claims data of privately insured individuals and Medicare Advantage enrollees. Three propensity-matched cohorts of patients with non-valvular atrial fibrillation with incident exposure to dabigatran, rivaroxaban, or apixaban were created. Data were compared on rivaroxaban versus dabigatran for 31,574 patients; for apixaban versus dabigatran for 13,084 patients; and for apixaban versus rivaroxaban for 13,130 patients.

The researchers found that GI bleeding occurred more often in patients given rivaroxaban versus dabigatran (hazard ratio, 1.2). The risk of GI bleeding was lower for apixaban versus dabigatran or rivaroxaban (hazard ratios, 0.39 and 0.33, respectively). For apixaban and rivaroxaban, the median times to gastrointestinal bleeding were

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