

GI bleeding up for new users of rivaroxaban

October 12 2021



Rivaroxaban is associated with increased rates of gastrointestinal bleeding (GIB) compared with other direct oral anticoagulants, according to a study published online Oct. 12 in the *Annals of Internal*



Medicine.

Arnar B. Ingason, M.D., from the University of Iceland in Reykjavík, and colleagues compared rates of GIB among new users of apixaban, <u>dabigatran</u>, and rivaroxaban from 2014 to 2019. Data were included for 2,157 patients receiving apixaban, 494 receiving dabigatran, and 3,217 receiving rivaroxaban.

The researchers found that compared with apixaban, rivaroxaban had higher overall rates of GIB for all patients (3.2 versus 2.5 events per 100 person-years; hazard ratio, 1.42; 95 percent confidence interval, 1.04 to 1.93) and higher rates of major GIB (1.9 versus 1.4 events per 100 person-years; hazard ratio, 1.50; 95 percent confidence interval, 1.00 to 2.24). Higher GIB rates were also seen for rivaroxaban versus dabigatran, with similar point estimates, although the <u>confidence</u> <u>intervals</u> were wider, including the possibility of a null event. Compared with apixaban or dabigatran, rivaroxaban had higher rates of overall GIB when only patients with <u>atrial fibrillation</u> were included (hazard ratios [95 percent confidence intervals], 1.40 [1.01 to 1.94] and 2.04 [1.17 to 3.55], respectively). In both analyses, dabigatran was associated with lower rates of upper GIB compared with <u>rivaroxaban</u>.

"Rivaroxaban was associated with higher rates of GIB than <u>apixaban</u> and dabigatran," the authors write. "This may help guide oral anticoagulant selection, especially for patients at high risk for GIB."

More information: <u>Abstract/Full Text (subscription or payment may</u> <u>be required)</u>

Copyright © 2021 HealthDay. All rights reserved.

Citation: GI bleeding up for new users of rivaroxaban (2021, October 12) retrieved 22 November



2023 from https://medicalxpress.com/news/2021-10-gi-users-rivaroxaban.html

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.