Optimal Management of Anticoagulation Therapy

What it covers

- Optimal care management of anticoagulation therapy in patients who have previously experienced a clot

Why it matters

- Anticoagulant drugs must be used with skill in order to reduce risks of bleeding and developing another clot.
- Health care providers often have to make the difficult decision to continue or stop anticoagulation therapy following a major bleeding event.

Who it affects

- Patients who have already had a blood clot and need to take anticoagulant drugs
- Pharmacists, clinicians, nurses, and health care policy makers

What are the highlights

- Managing anticoagulation therapy is complex. Patients should receive care from specialized anticoagulation management service centers versus primary care physicians whenever possible.
- Most patients needing to interrupt warfarin for invasive procedures do not require a short-acting injectable anticoagulant administered during the peri-operative period, so-called bridge therapy.
- Management of life-threatening bleeding during anticoagulant therapy requires thoughtful use of anticoagulant reversal therapies.
- Many patients who survive major bleeding during anticoagulant therapy should resume taking anticoagulants.

Total number of panel recommendations: 25