

Case Studies for NOACs

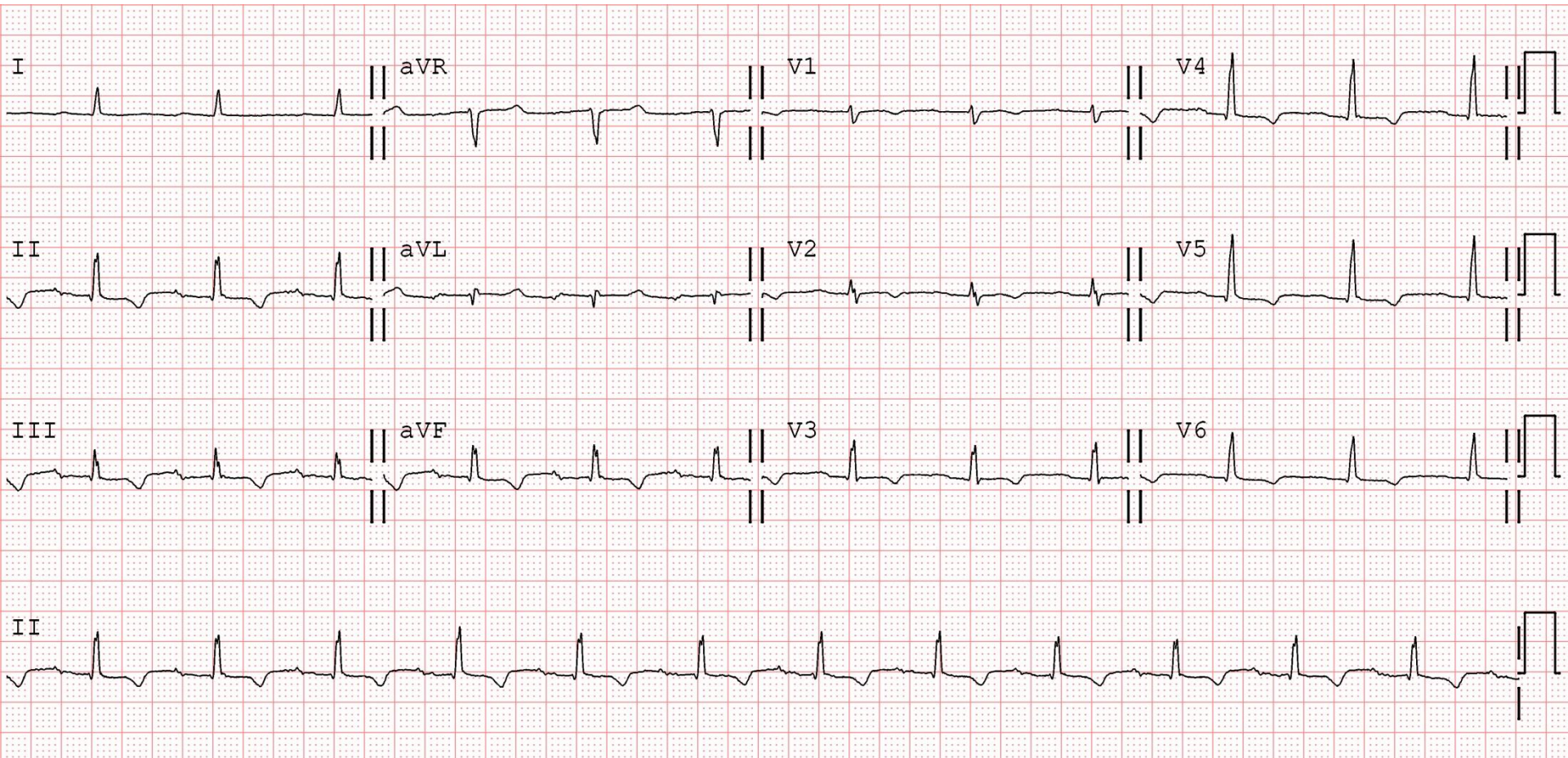
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Novel Oral Anticoagulants

- Used for the treatment of non-valvular AF and venous thromboembolic diseases
- High efficacy
- Rapid onset and offset
- Predictable pharmacologic effect

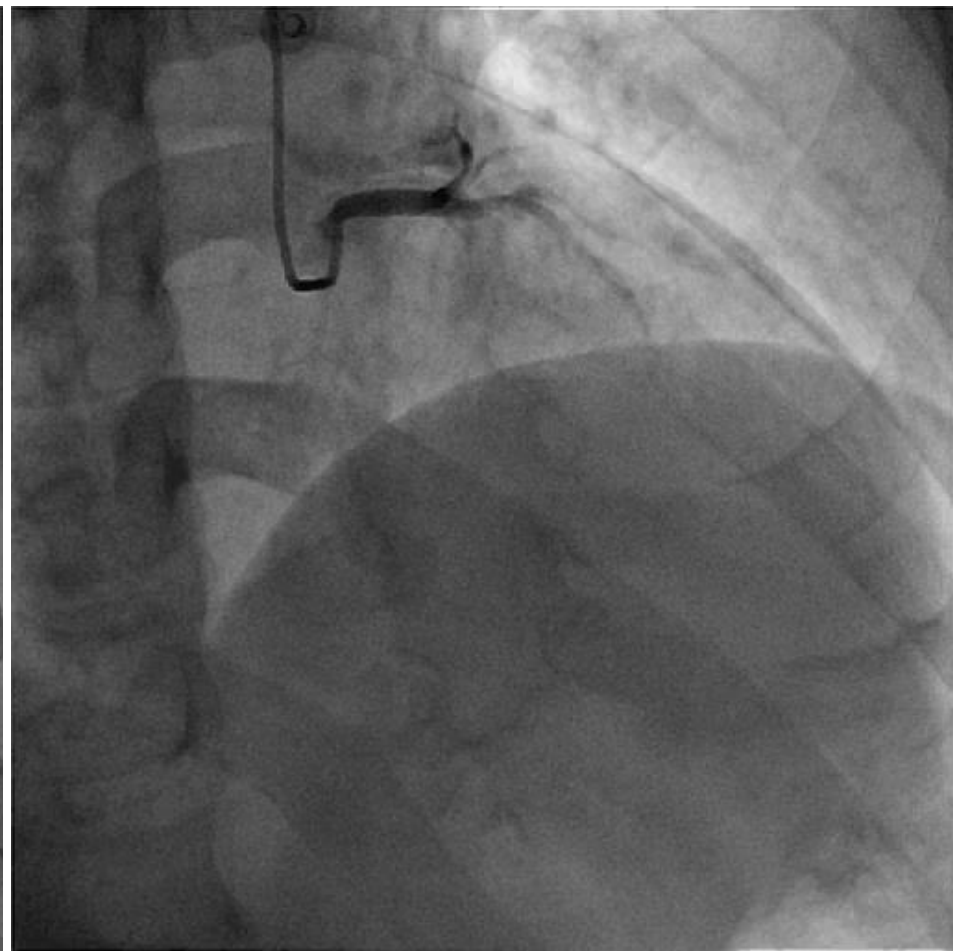
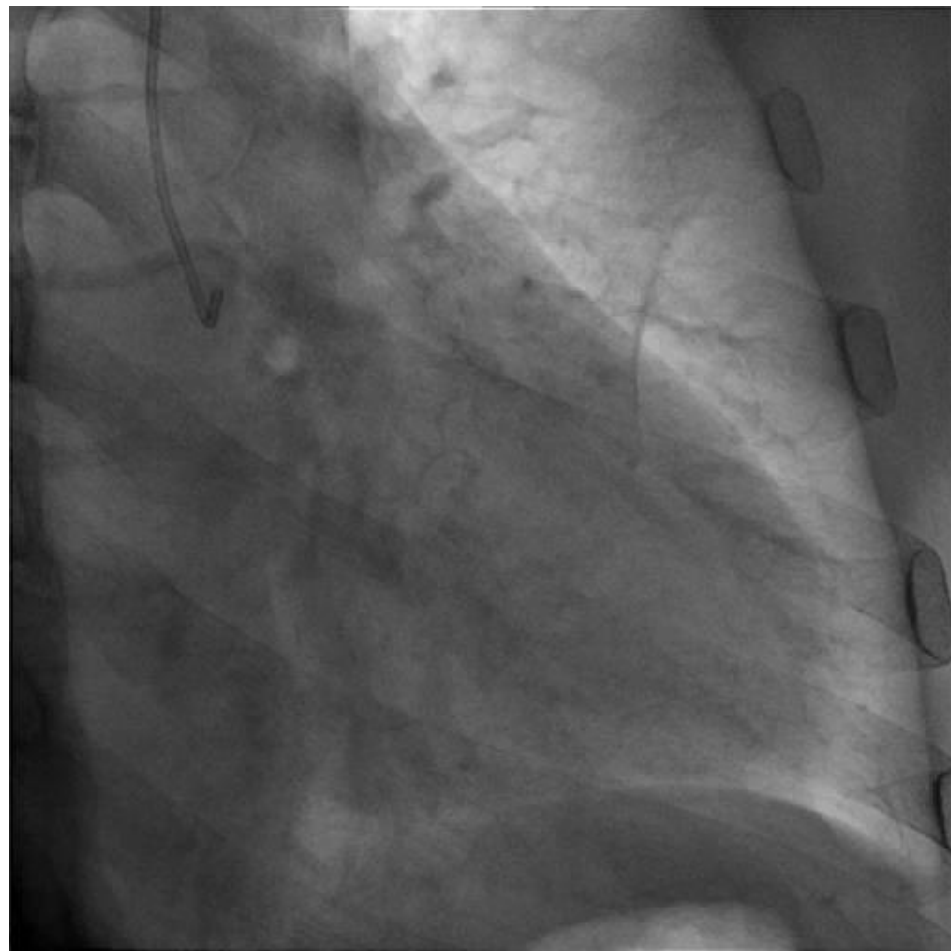
Case 1. M/50, Chest tightness



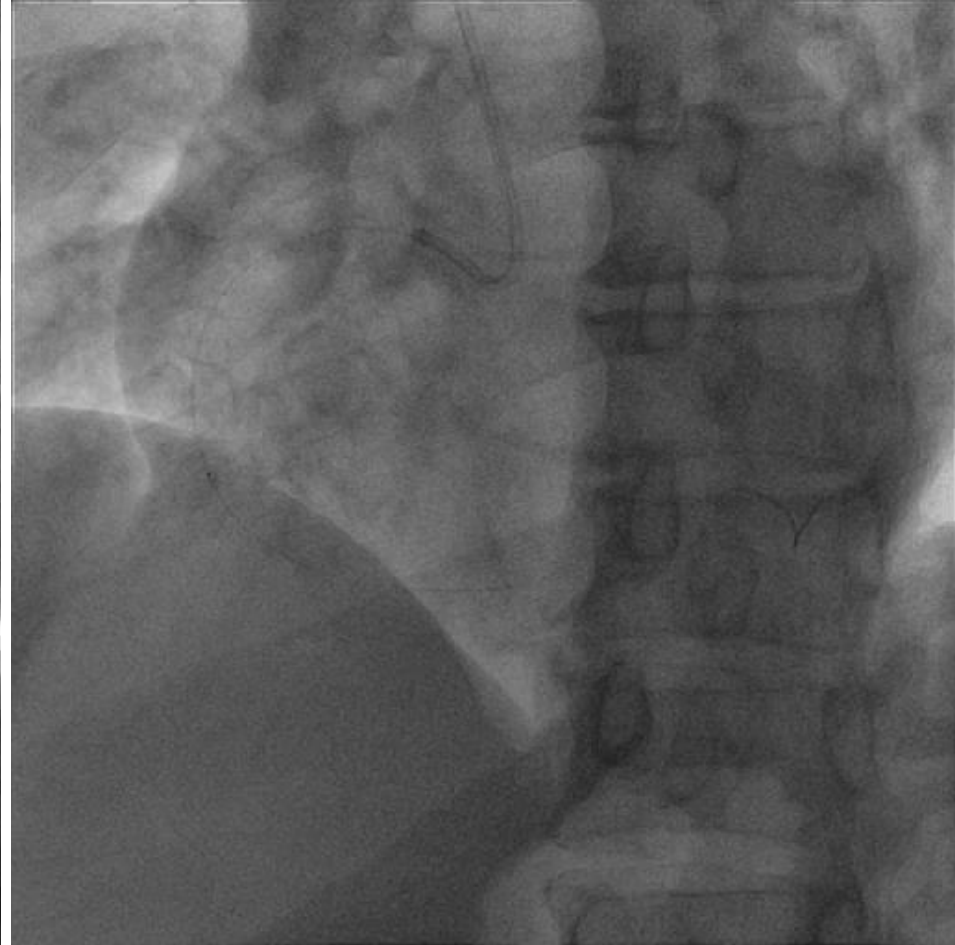
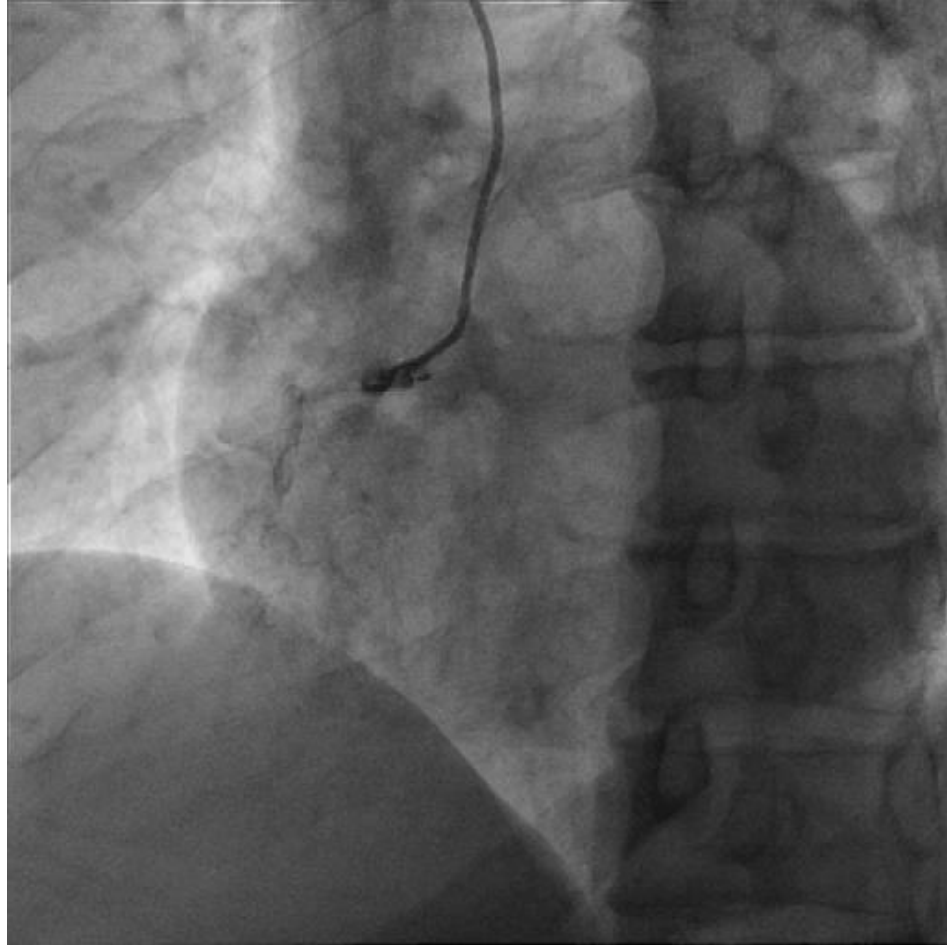
Brief medical history

- Chest tightness on exertion on 3-4
- DM(+), HTN(+), smoking(+)
- P/Ex: unremarkable
- Echo: EF 60~64%
- Cardiac troponin-I: 0.315 ng/mL

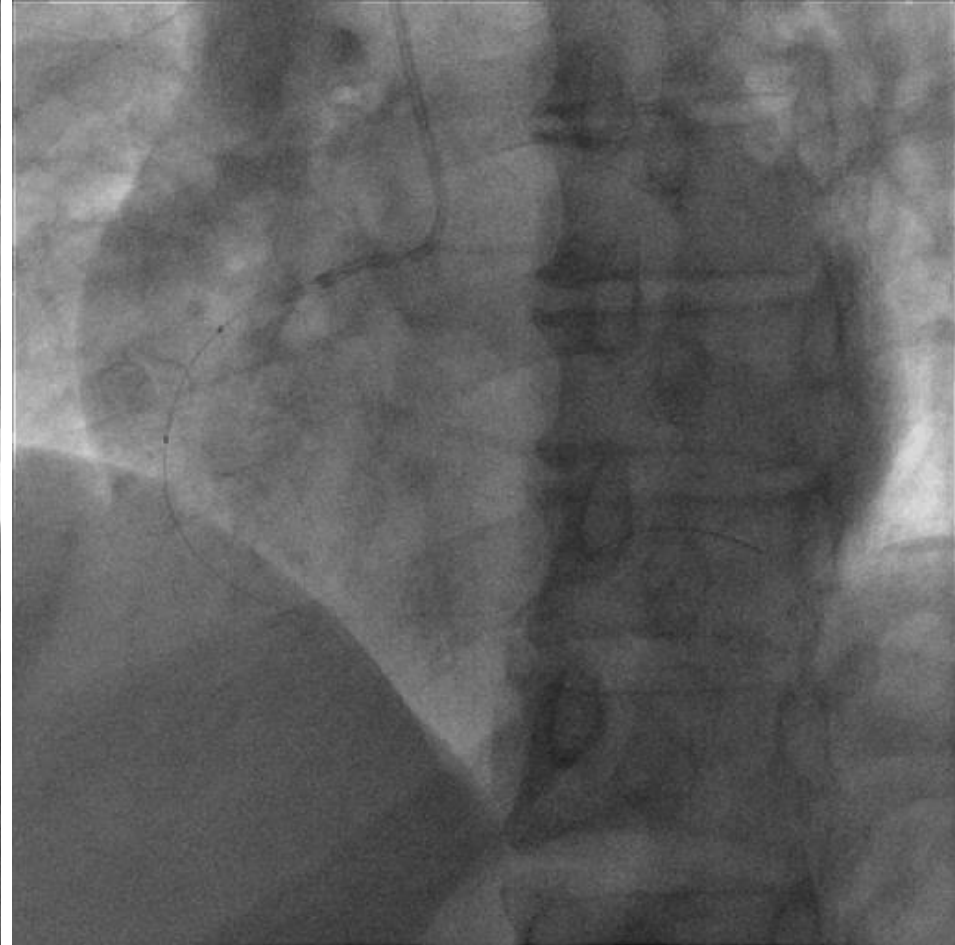
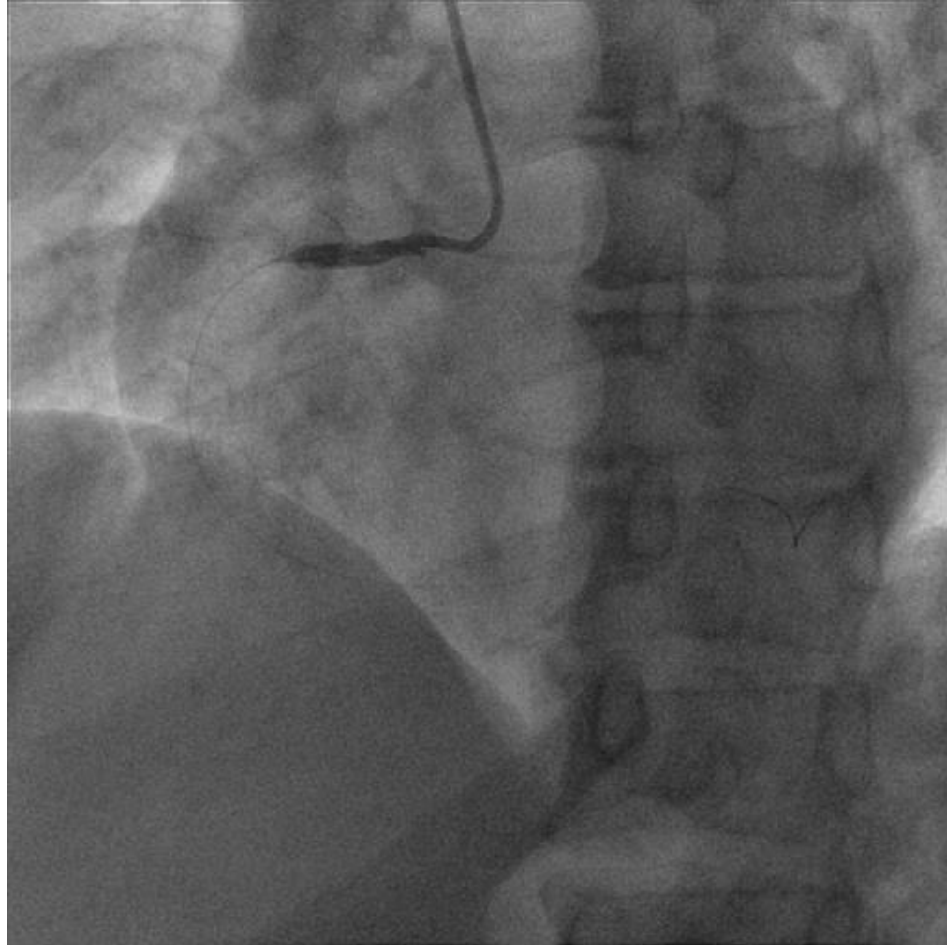
Coronary angiography



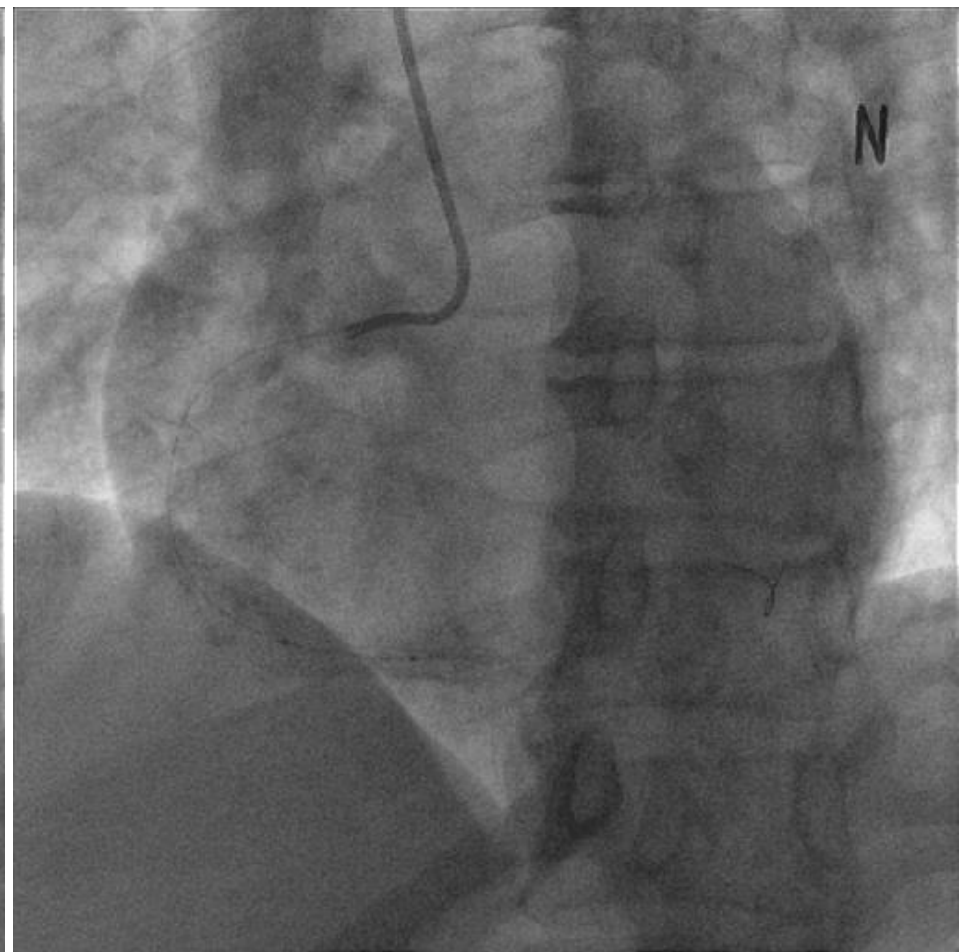
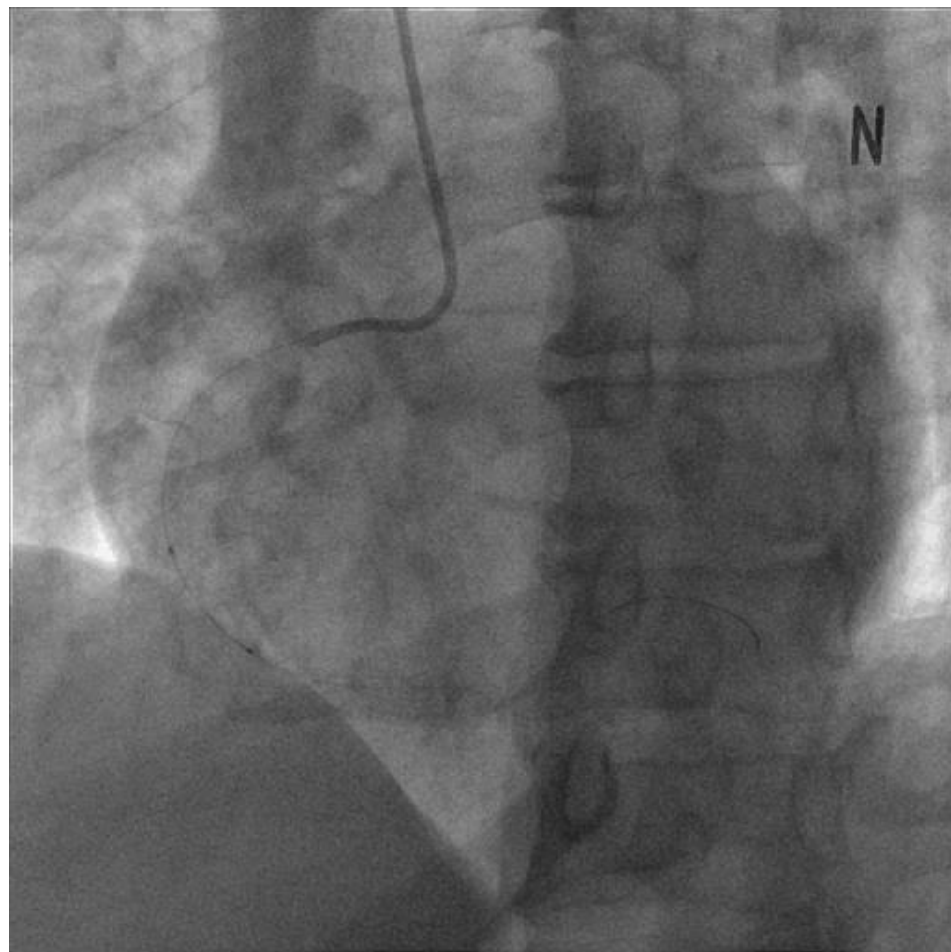
Coronary angiography



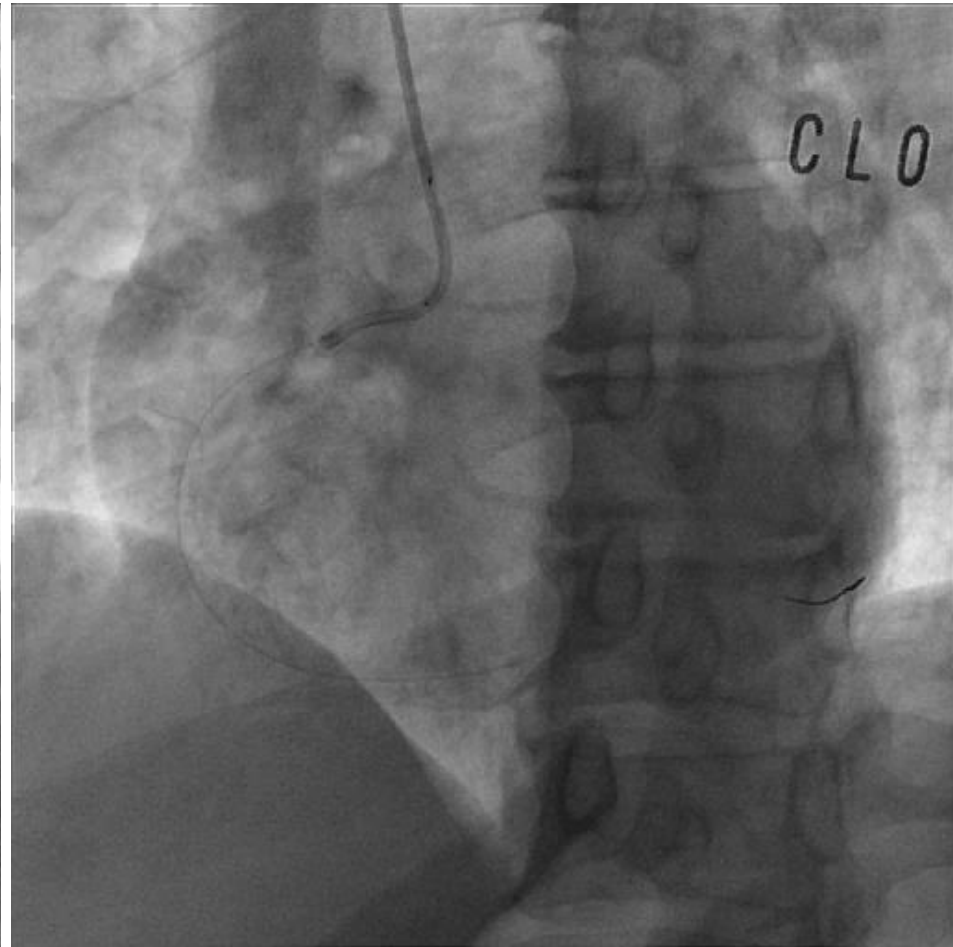
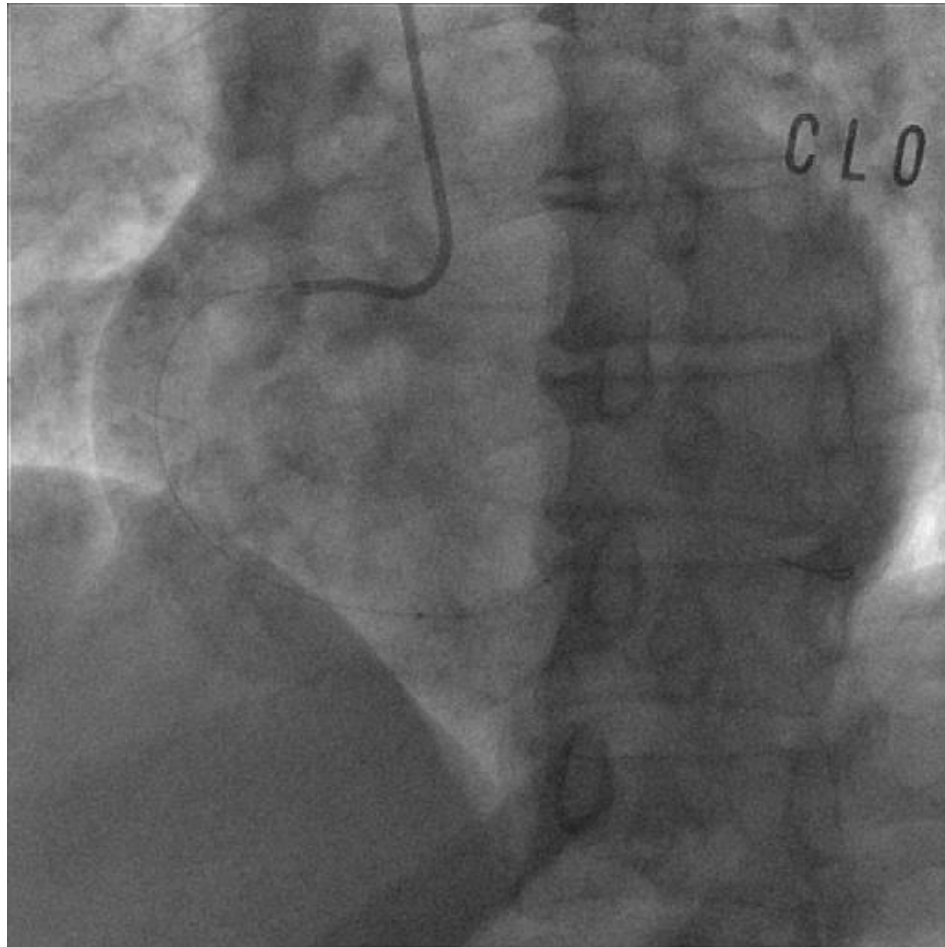
Coronary artery intervention



Coronary artery intervention

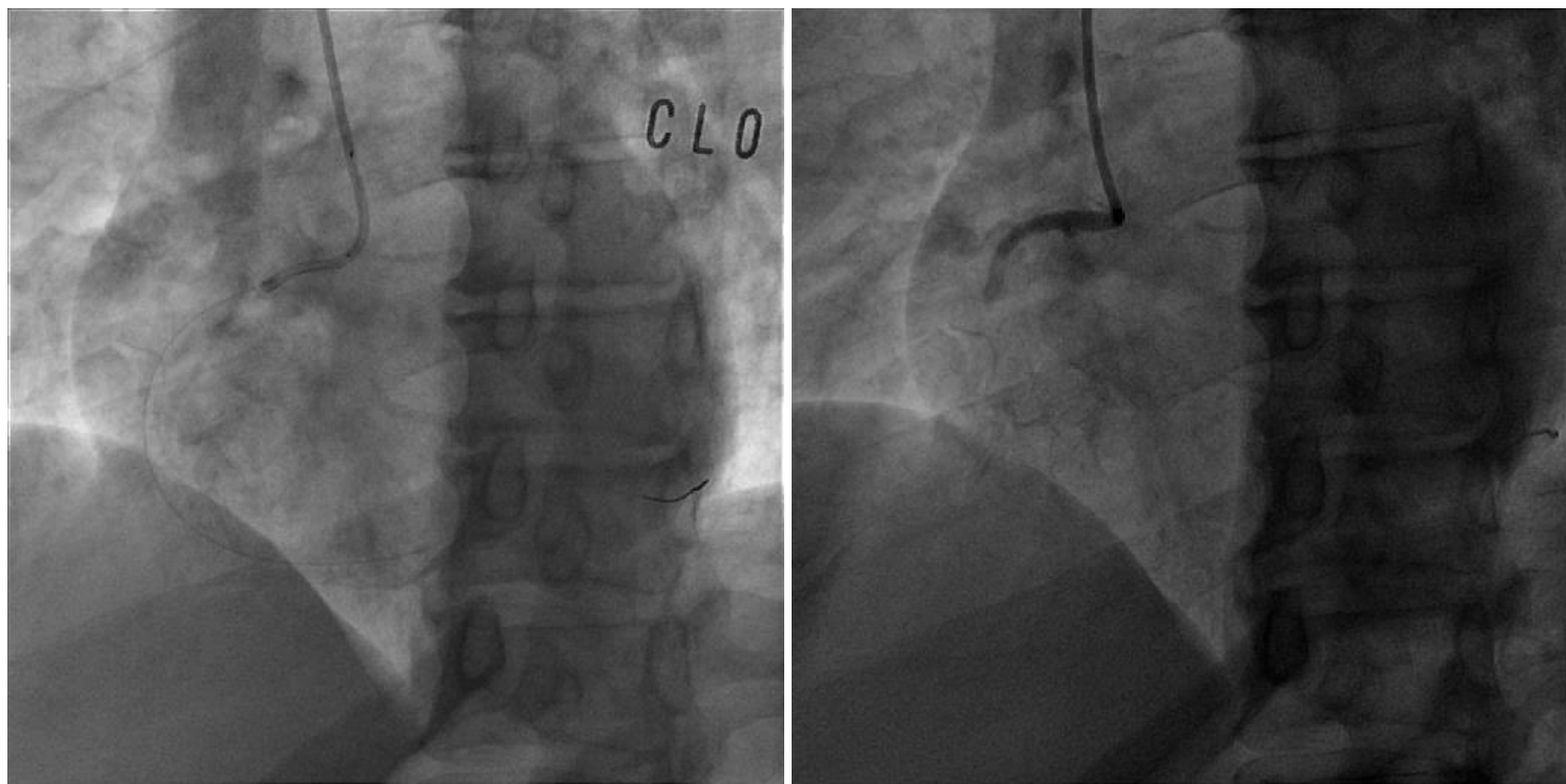


Coronary artery intervention



Enoxaparin 2 mg/Kg + ASA 100 mg + clopidogrel 75 mg /day

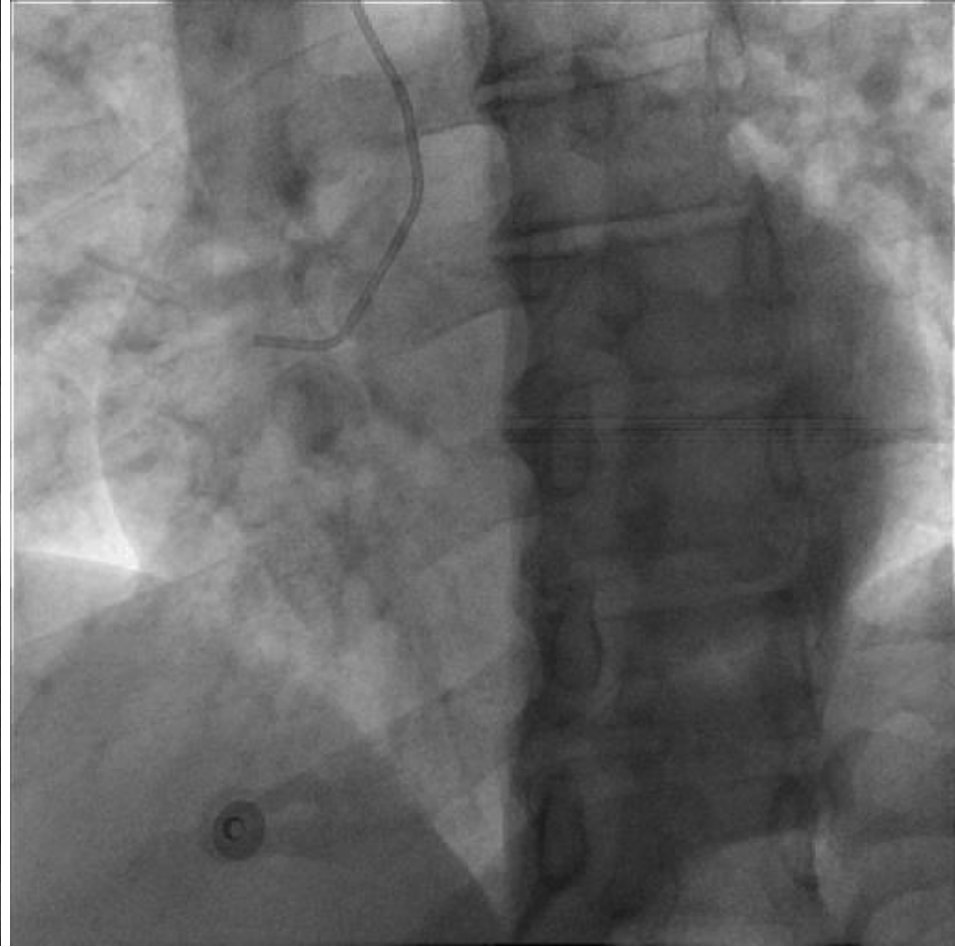
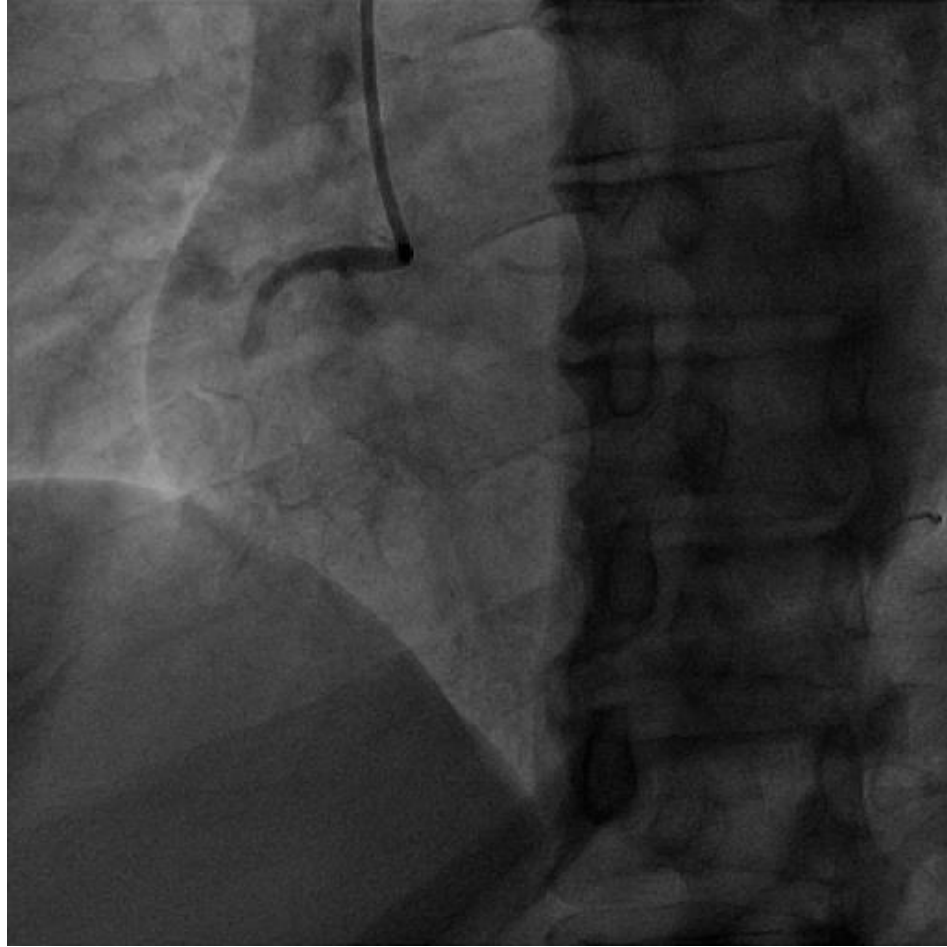
F/U Angiography after 1 week



The patient was a business man living in rural area

Dabigatran 150 mg bid for 2 weeks for refractory RCA thrombosis

F/U Angiography after 2 weeks

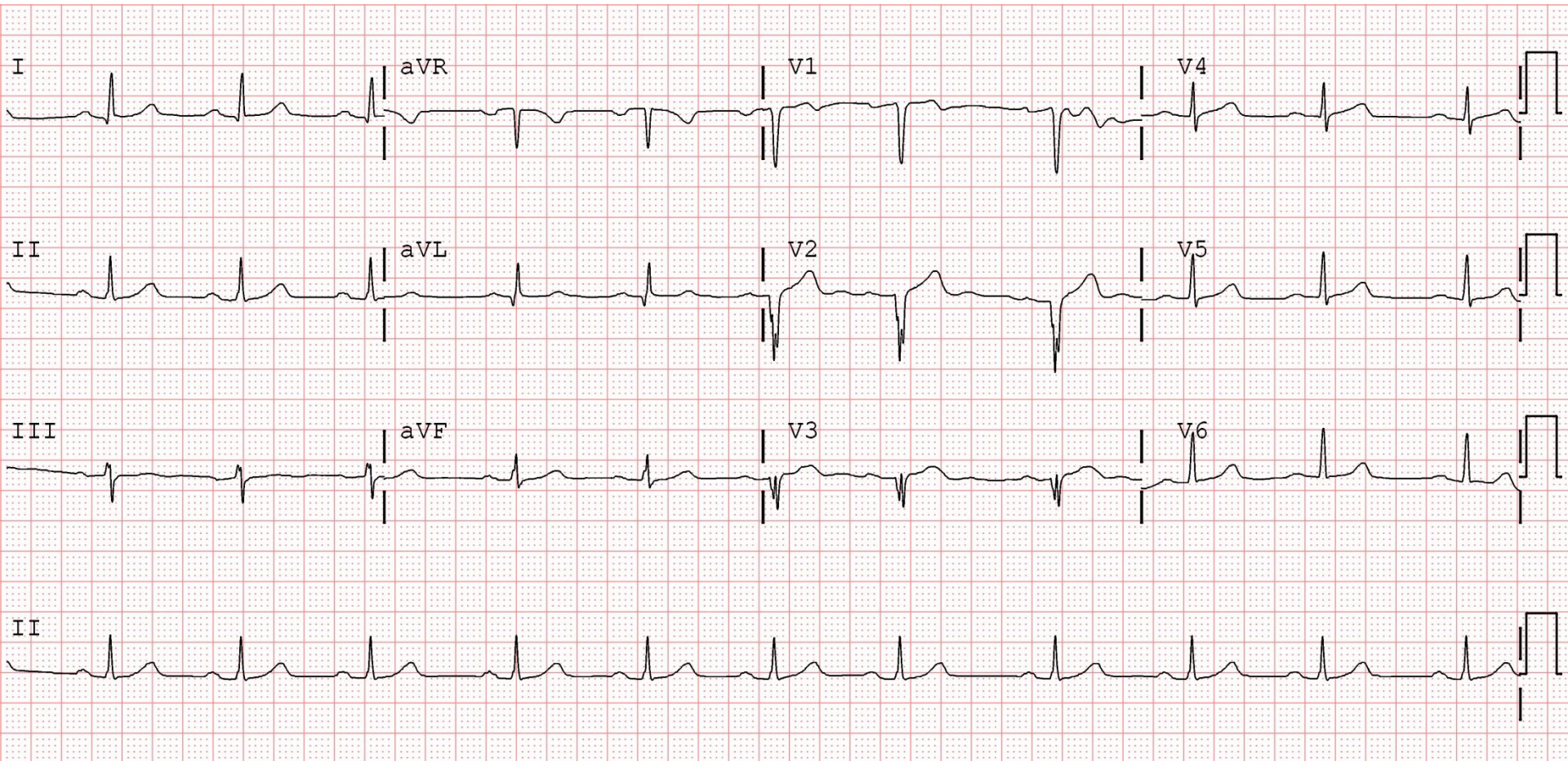


Dabigatran → ASA + clopidogrel

Case 1. Summary

- **Off-label use of dabigatran for RCA thrombosis refractory to low molecular heparin and dual antiplatelet combination therapy**
- **Dabigatran was lesser protective for coronary artery event than warfarin in RELY trial.**
- **NOACs may be an alternative to the standard dual antiplatelet in selected cases with organized coronary thrombosis.**

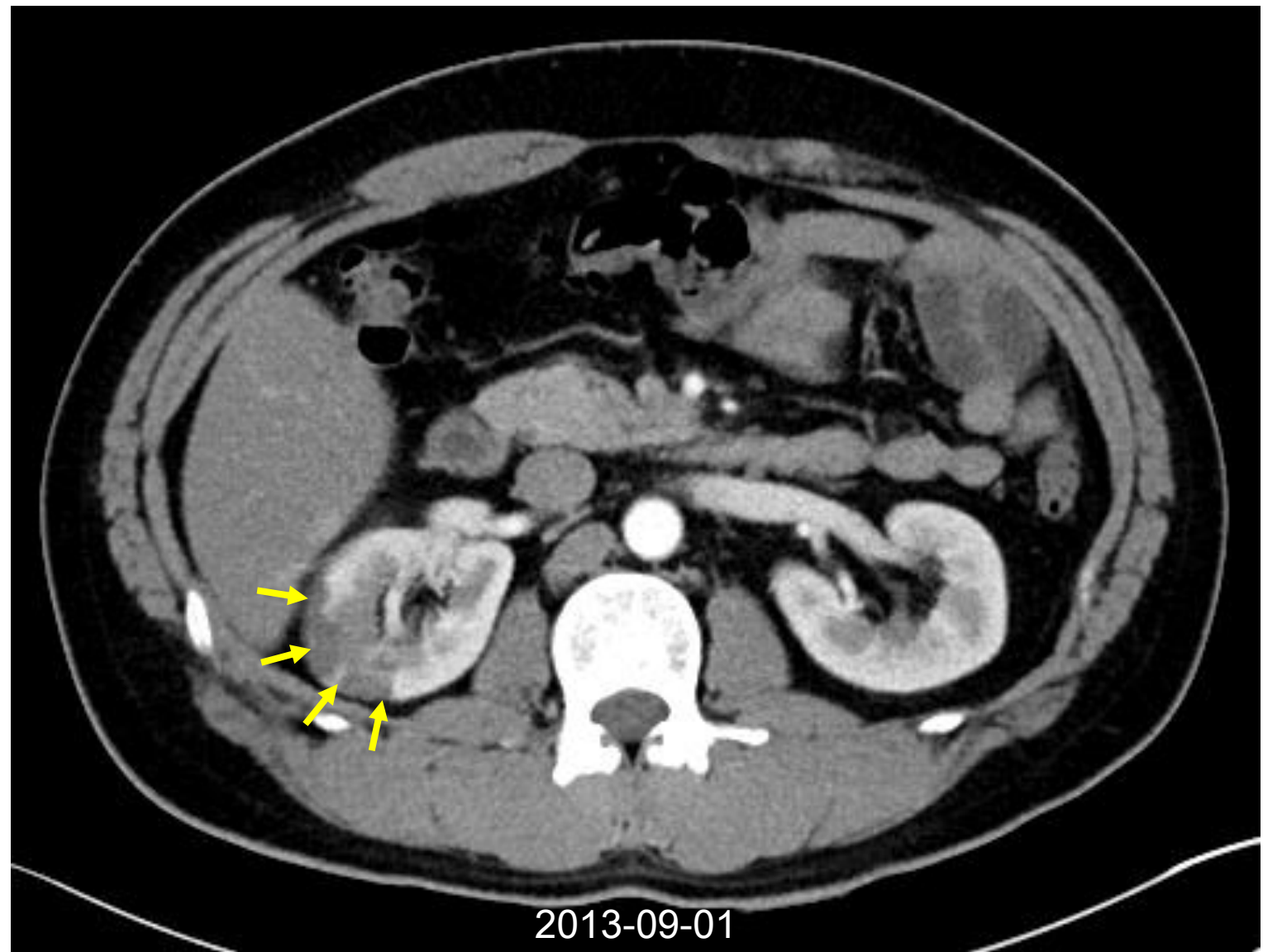
Case 2. M/33, Rt. Flank pain



Brief medical history

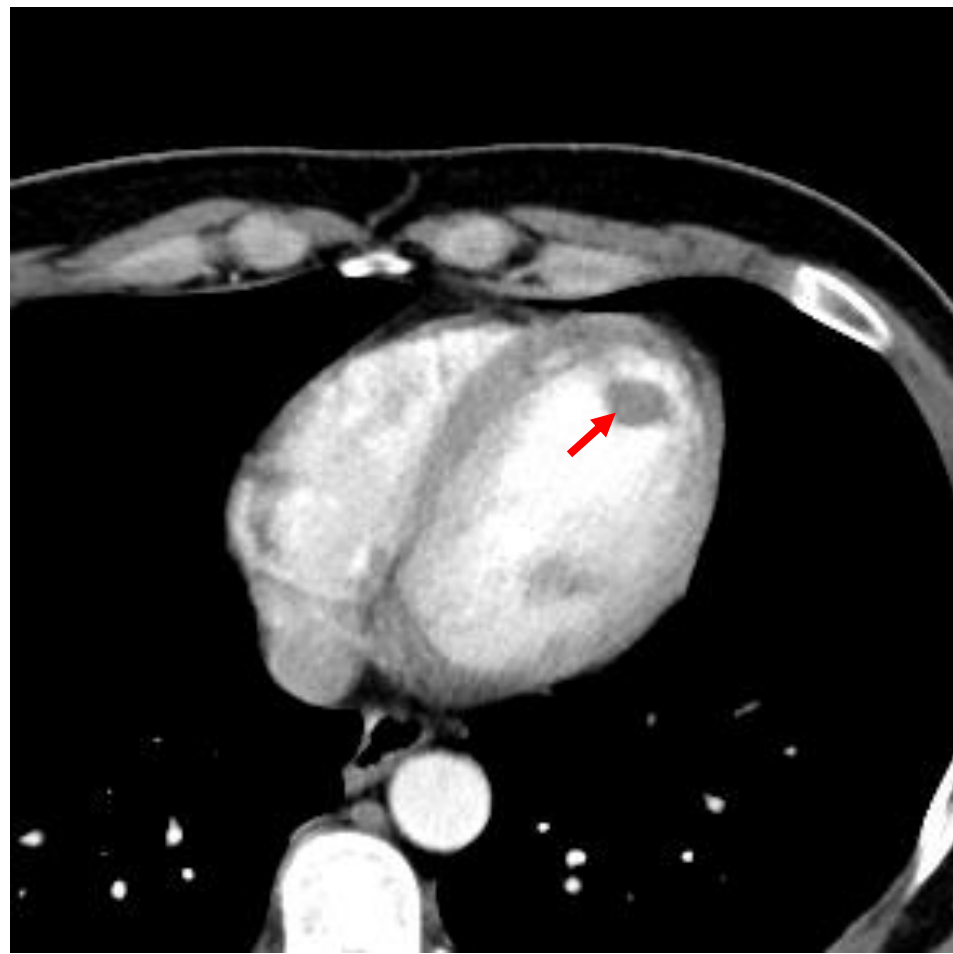
- Rt. Flank pain for 2 days
- DM(-), HTN(-), Smoking(+)
- History of recent (6 month ago) STEMI
 - S/P stent implantation in proximal LAD
- ASA 100 mg/day maintenance therapy

Rt. Renal infarction

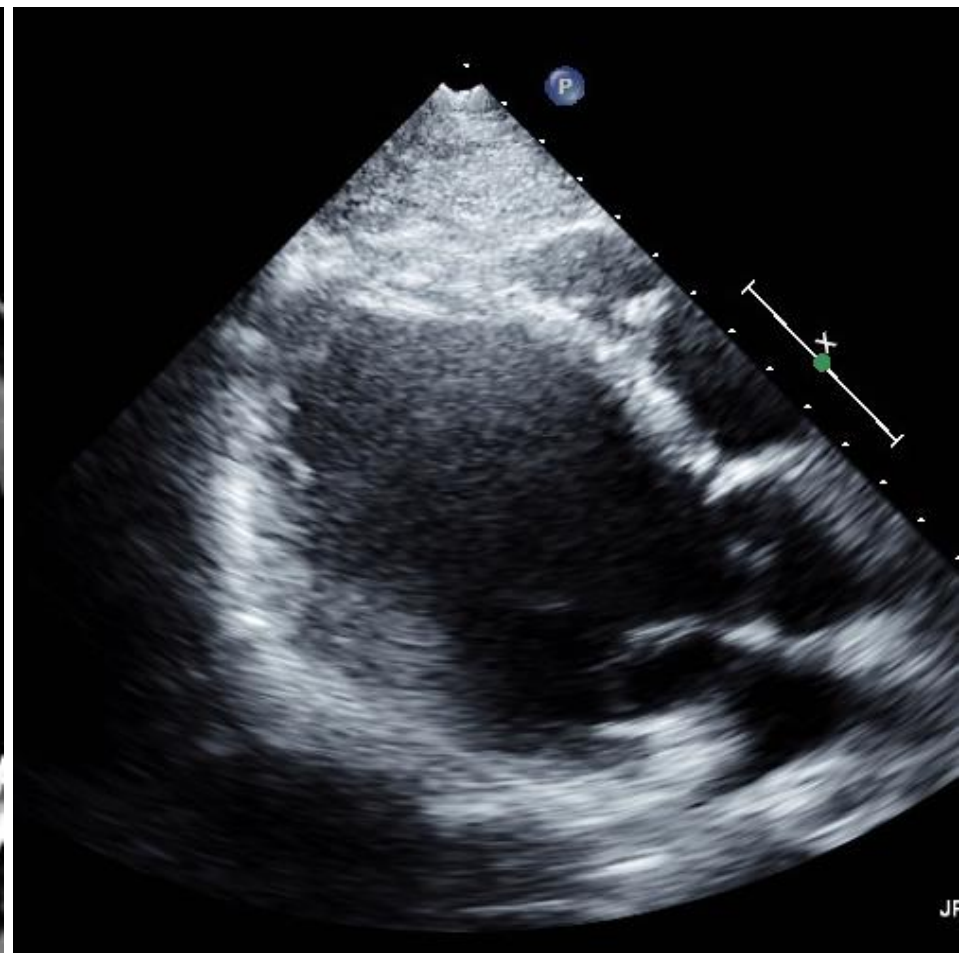


2013-09-01

LV thrombus



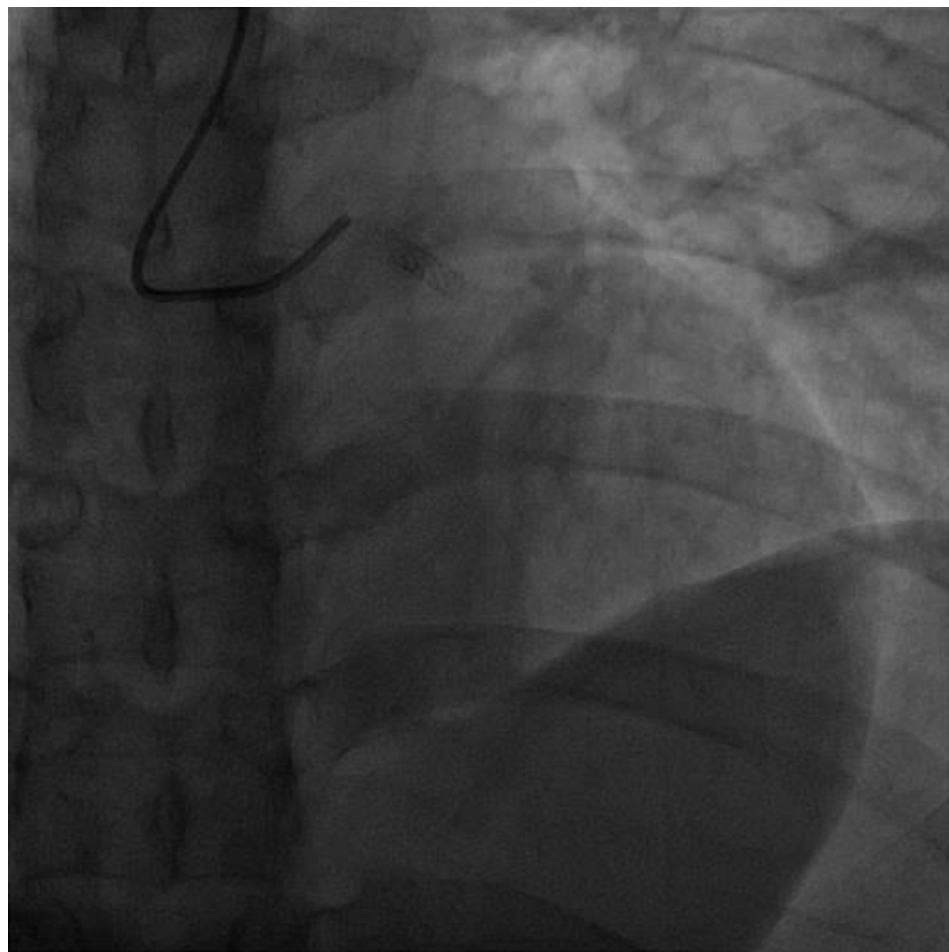
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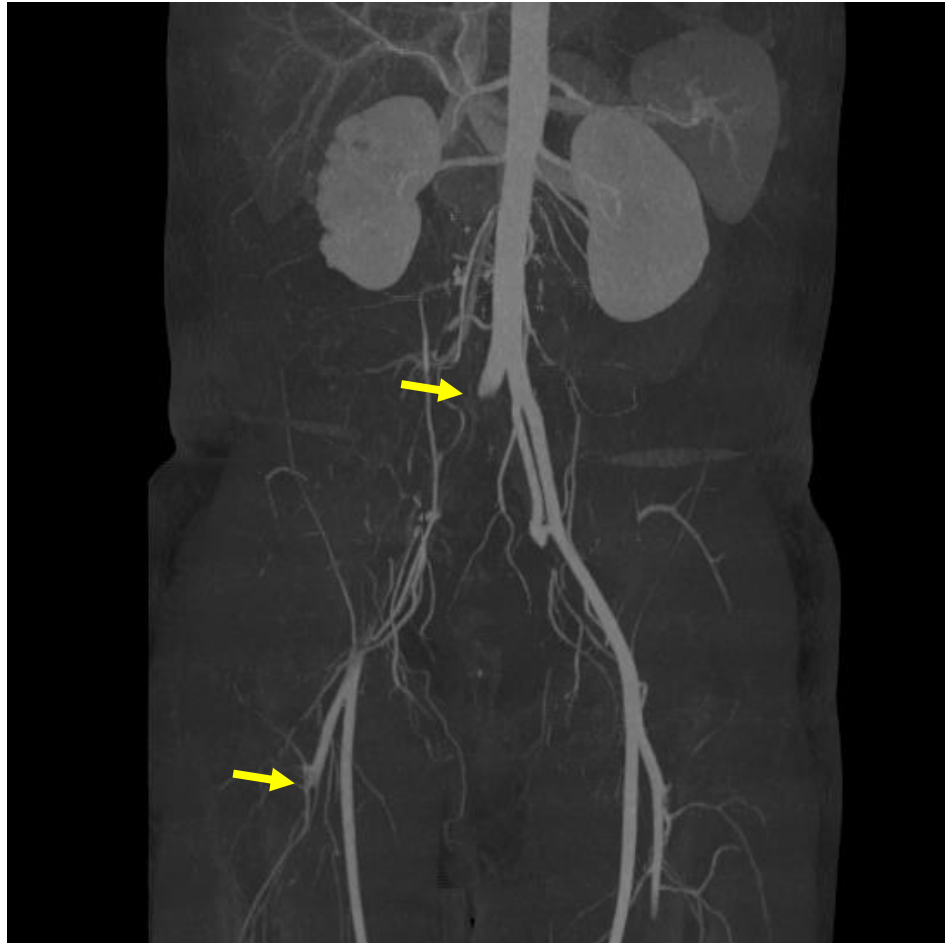
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UFH + warfarin + ASA

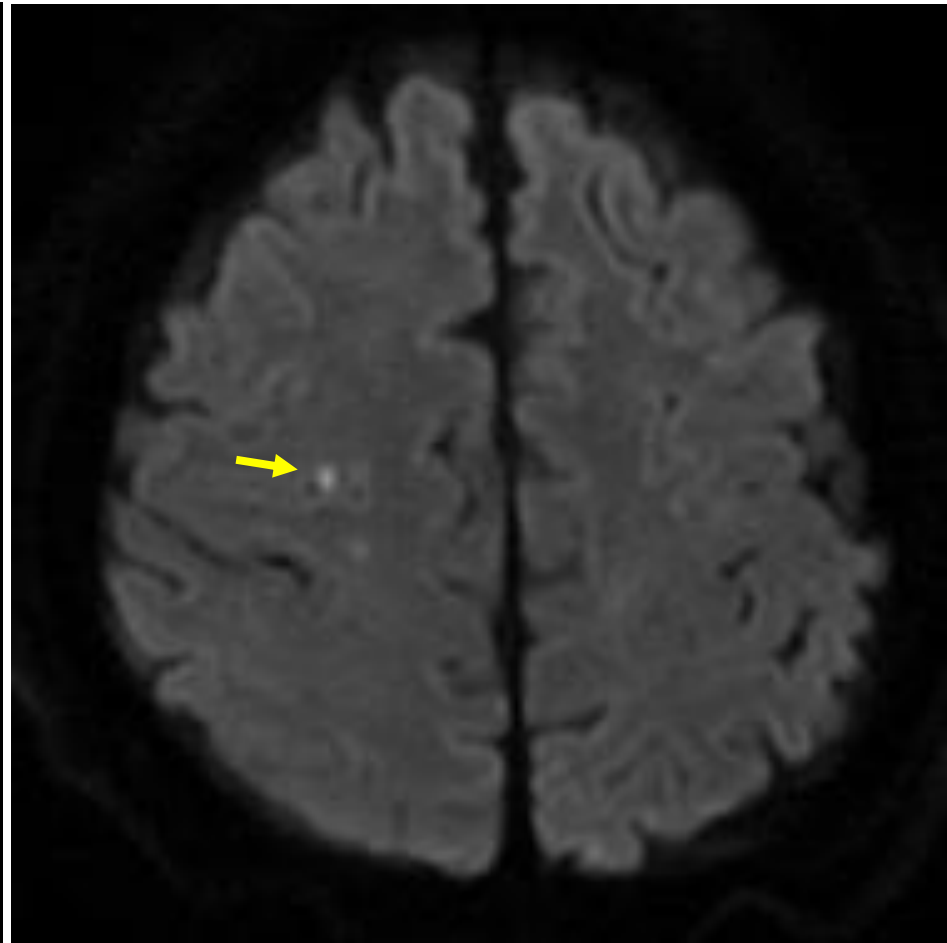
Coronary angiography



Recurrent thromboembolic events



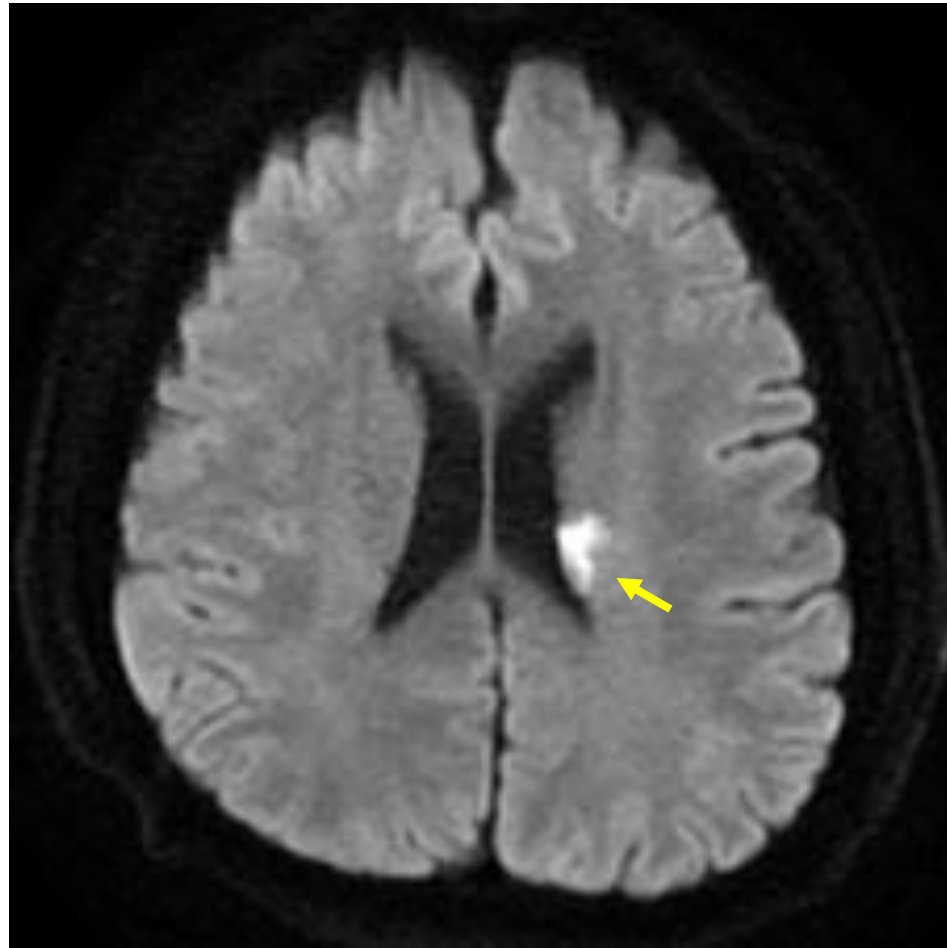
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UFH + warfarin + ASA, PT(INR): 1.5 ~ 2.0

Recurrent thromboembolic events



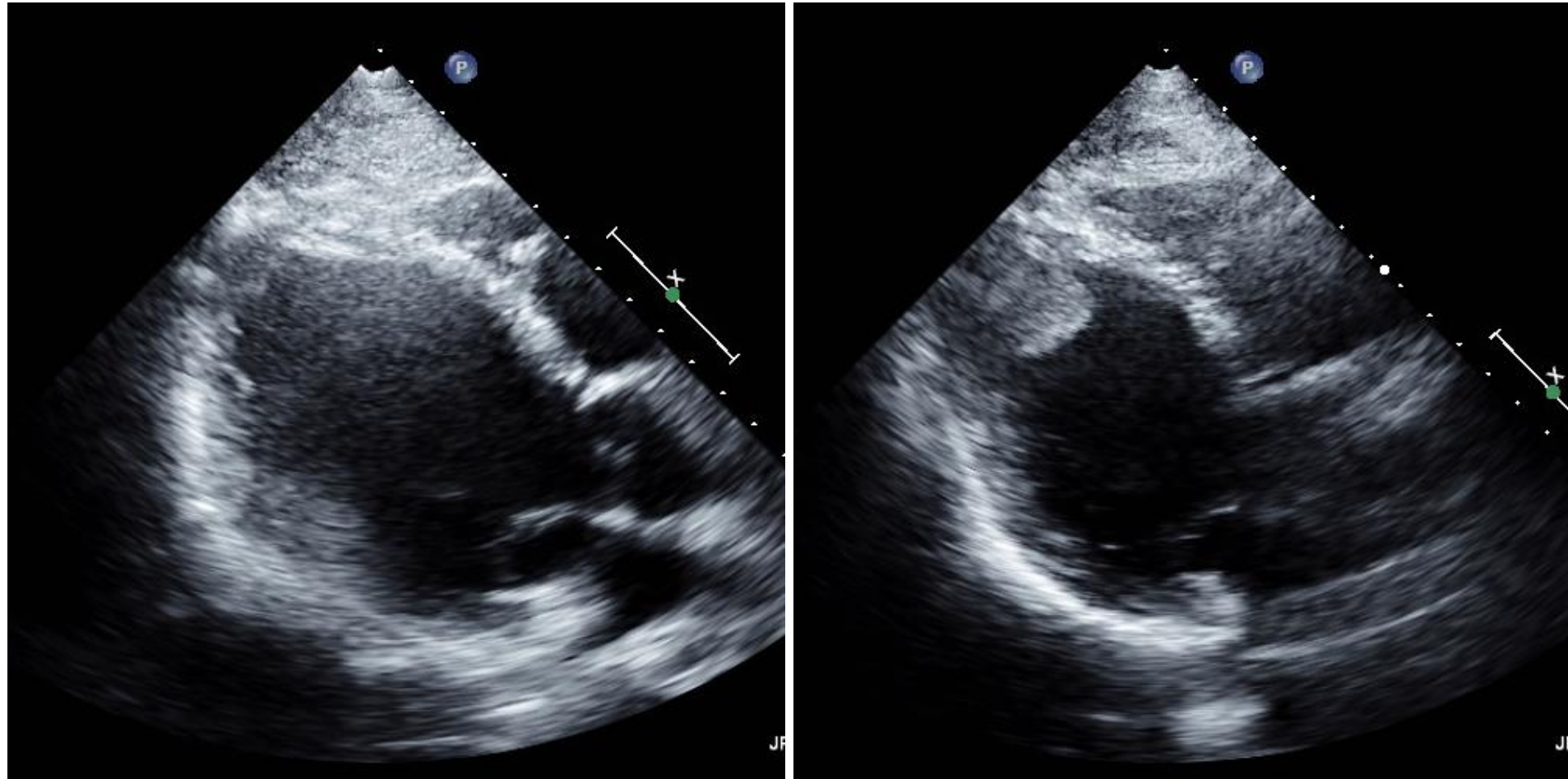
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2013-09-23

UFH + warfarin + ASA, PT(INR): 1.5 ~ 2.0

Increased LV thrombus size



UFH + warfarin + ASA → Rivaroxaban 20 mg/day + ASA

Only single thromboembolic event after rivaroxaban therapy

Case 2. Summary

- **Use of rivaroxaban for recurrent thromboembolic events refractory to UFH and warfarin combination therapy in a patient with anti-phospholipid antibody syndrome**
- **NOACs may be an alternative to the recurrent thromboembolic disease refractory to the conventional heparin and warfarin therapy.**

Thank you

