

NOAC concise guide

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Drug	Indication & formulary traffic light status	NICE	Other details
Rivaroxaban	Stroke prevention in AF	TA256	Patients with non-valvular AF and one or more of the following risk factors: <ul style="list-style-type: none"> congestive heart failure hypertension aged 75 years or older diabetes mellitus prior stroke or TIA SEE LOCAL GUIDANCE on anticoagulation in AF
	VTE treatment	TA287 & 261	Shared care guideline
	Post hip or knee replacement	TA170	LMWH first line choice at RBCH and DCH
	Post ACS	TA335	Initiation by consultant cardiologist only, N.B. see Shared care guidance
Dabigatran	Stroke prevention in AF	TA249	Patients with non-valvular AF and one or more of the following risk factors: <ul style="list-style-type: none"> Previous stroke, TIA or systemic embolism LVEF <40% / NYHA class 2 or above symptomatic heart failure aged 75 years or older aged 65 years or older with either diabetes mellitus, coronary artery disease or hypertension <p>Dose adjustment recommended with certain risk factors (link)</p> SEE LOCAL GUIDANCE on anticoagulation in AF
	VTE treatment	TA327	One of possible first line treatment options in patients who do not have cancer. NOTE: <ul style="list-style-type: none"> Initiate after at least 5 days treatment with a parenteral anticoagulant LMWH recommended first choice option in patients with active cancer. Shared care guidance <p>Dose adjustment recommended with certain risk factors (link)</p>

	Post hip or knee replacement	TA157	LMWH first line choice at RBCH and DCH
Apixaban	Stroke prevention in AF	TA275	<p>Patients with non-valvular AF with 1 or more of the following risk factors:</p> <ul style="list-style-type: none"> • Prior stroke or TIA • Age 75 years or older • Hypertension • Diabetes mellitus • Symptomatic heart failure <p>N.B. Dose reduction in patients with two of following :</p> <ul style="list-style-type: none"> • age ≥80years • Body weight ≤ 60kg • Serum creatinine 1.5mg/dL (133micromole/L) <p>SEE LOCAL GUIDANCE on anticoagulation in AF</p> <p>N.B. Consult SPC for full prescribing details (link)</p>
	VTE treatment	TA341	See commissioning statement (link)
	Post hip or knee replacement	TA245	LMWH first line choice at RBCH and DCH
Edoxaban	Stroke prevention in AF	TA355	<p>Patients with non-valvular atrial fibrillation with one or more risk factors including:</p> <ul style="list-style-type: none"> • congestive heart failure • hypertension • diabetes • prior stroke or transient ischaemic attack • aged 75 years or older <p>NOTE: Dose reduction required in patients with one or more of following clinical factors: moderate or severe renal impairment (CrCl 15-50ml/min), low body weight (≤60kg) or concomitant use of potent P-glycoprotein inhibitors ciclosporin, dronedarone, erythromycin or ketoconazole.</p> <p>SEE LOCAL GUIDANCE on anticoagulation in AF</p> <p>N.B. Consult SPC for full prescribing details (link)</p>

	VTE treatment	TA354	<p>One of possible first line treatment options in patients who do not have cancer.</p> <p>NOTE:</p> <ul style="list-style-type: none">• LMWH recommended first choice option in patients with active cancer• Initiate after at least 5 days treatment with a parenteral anticoagulant• Dose reduction required in patients with renal impairment, low body weight ($\leq 60\text{kg}$) or concomitant use of potent P-glycoprotein inhibitors ciclosporin, dronedarone, erythromycin or ketoconazole. <p>N.B. Consult SPC for full prescribing details (link)</p>
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