COMPARING EFFICACY AND SAFETY OF DIRECT-ACTING ORAL ANTICOAGULANTS USED FOR PREVENTION OF VTE OR STROKE IN PATEINTS WITH MORBID OBESITY VERSUS PATIENTS WITHIN STUDIED WEIGHT LIMITS: A SINGLE-CENTER, RETROSPECTIVE COHORT STUDY

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There are currently four direct-acting oral anticoagulants approved by the FDA for prevention of recurrent VTE and prevention of stroke in patients with non-valvular atrial fibrillation. There are minimal data to support use of direct-acting oral anticoagulants in patients that weigh 120 kg or more. The primary objective of this study is to evaluate the efficacy and safety of direct-acting oral anticoagulants in morbidly obese (≥120 kg) patients compared to patients within the studied weight limits (<120 kg).

A single-center, retrospective cohort study involving data analysis and chart review. All patients aged at least 18 years at Kansas City's Veteran's Affairs Medical Center (VAMC) who were prescribed apixaban, dabigatran, edoxaban, or rivaroxaban for either venous thromboembolism or atrial fibrillation between June 1, 2014 and June 30, 2019 will be included. The efficacy outcomes analyzed will be the rate of recurrent venous thromboembolism or stroke and the safety outcomes analyzed will be the rate of minor or major bleeding events, as defined by ISTH, in morbidly obese patients compared to patients within studied weight limits will be analyzed.

The results from this study will add to the available literature on the efficacy and safety of DOACs in obese patients.

LEARNING OBJECTIVE:

- Discuss the efficacy and safety of DOAC use in obese patients