

Oral anticoagulant complications

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The most feared [complication](#) of [oral anticoagulants](#) is [bleeding](#), which in some cases may be fatal or may affect critical organs. Case-fatality rates of bleeding have been reported to be ~3 times higher than case-fatality rates of recurrent VTE. Even when nonserious, bleeding may require medical intervention and/or may impact on patient quality of life or working activity. Factors associated with bleeding during anticoagulant treatment include, among others, advanced age, cancer, renal or liver insufficiency, or concomitant antithrombotic drugs, but no bleeding risk score is sufficiently accurate for use in clinical practice. Not uncommonly, bleeding occurs as a complication of trauma or medically invasive procedures. Nonbleeding complications associated with oral anticoagulants are unusual, and their relevance is extremely uncertain, and include vascular calcification, anticoagulation-related nephropathy, and osteoporosis. Finally, because VTE not uncommonly affects young individuals and the mean age of the population is ~60 years, the costs associated with extended anticoagulation should not be forgotten. The costs of the drugs need to be balanced against health outcome costs associated with both recurrent VTE and bleeding ¹⁾

[Acid-suppressive drugs](#) were significantly associated with [all-cause mortality](#) in patients with [nonvalvular atrial fibrillation](#) (NVAf) taking [oral anticoagulants](#) (OACs) ²⁾.

Anticoagulant Related Intracerebral Hemorrhage

[Anticoagulant Related Intracerebral Hemorrhage](#)

¹⁾

Agno W, Donadini M. Breadth of complications of long-term oral anticoagulant care. Hematology Am Soc Hematol Educ Program. 2018 Nov 30;2018(1):432-438. doi: 10.1182/asheducation-2018.1.432. PMID: 30504343; PMCID: PMC6245998.

²⁾

Arai H, Ueda S, Uchida K, Sakakibara F, Kinjo N, Nezu M, Morimoto T. Association between Acid-Suppressive [Drugs](#) and [Clinical Outcomes](#) in Patients with [Nonvalvular Atrial Fibrillation](#). Drugs R D.

2022 Jul 19. doi: 10.1007/s40268-022-00392-5. Epub ahead of print. PMID: 35854203.

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