Proposal for TCT abstracts – Deadline May 29, 2018

**Temporal trends in the use of oral anticoagulant among patients with atrial fibrillation undergoing PCI:**

**Background**: Oral anticoagulation (OAC) is under prescribed in patients with atrial fibrillation (AF). Following PCI, AF patients require antithrombotic therapy for prevention of both stent thrombosis which is a rare event as well as stroke which is more common.

**Objective**: We sought to determine the usage of OAC in AF PCI patients from the Australian GCOR national registry over a 5 yr study period from 2013 – 2017.

**Methods**: The GCOR registry includes consecutive patients undergoing PCI from 13 Australian PCI centers. Prospectively collected data are entered in the database by dedicated research staff. Follow up is conducted by telephone or in person at 30 days, 1, 2 3, and 5 years and 5% of patients at 10 years. We assessed patient and procedural characteristics of treated patients, the frequency of OAC and non-vitamin K antagonists prescribed and 1-year clinical outcomes over time.

**Statistical analysis**:

1. N of AF PCI patients – what % of the overall registry do they comprise (5-7%?)
2. Summary statistics for the overall AF-PCI cohort:

-Age, sex, medical history (DM, HTN, prior MI, prior PCI, prior CABG, PAD), procedural history (N of lesions treated, N of stents, % DES type, procedural access, procedural anticoagulation), discharge medications (ASA, P2Y12 inhibitor, oral anticoagulation – warfarin or non-vitamin K antagonists, statins, beta blockers, ACEI/ARB)

-Derived variables – CHADS2, CHA2DS2VASC:

-Over time – Discharge OAC (warfarin or NVKA), NVKA (dabigatran, rivaroxaban, apixaban, edoxaban) use in each year of the study period

1. Outcomes – KM estimates of 1-year Death, stroke, MI overall (entire study period) and in each year of the study period (if rate of OAC used changed, was there an effect on hard endpoints). Also KM Estimates of stent thrombosis and TLR/TVR if available.

**Appendix**:



Table 1. Results

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **AF-PCI Cohort (Mar 2013 to Mar 2018)** |  |  |  |  |  |
| **Parameter (field)** | **Aggregate value** |  |  |  |  |
| **mean+SD or n (%)** |  |  |  |  |
| AF patients who have had a PCI, n (%) |  |  |  |  |  |
| What % of the overall registry do they comprise? |  |  |  |  |  |
| Age, mean years +(SD) |  |  |  |  |  |
| Sex (male), n (%) |  |  |  |  |  |
| **Medical history** |  |  |  |  |  |
| Hypertension (HTN) n(%) |  |  |  |  |  |
| Previous MI, n(%) |  |  |  |  |  |
| Diabetes, n(%) |  |  |  |  |  |
| Previous bypass surgery (CABG), n(%) |  |  |  |  |  |
| Peripheral vascular disease (PVD), n(%) |  |  |  |  |  |
| Cerebrovascular disease, n(%) |  |  |  |  |  |
| **Procedural history** |  |  |  |  |  |
| No. of lesions treated +(SD) |  |  |  |  |  |
| No. of stents +(SD) |  |  |  |  |  |
| DES, n(%) |  |  |  |  |  |
| Percutaneous entry location (brachial, radial, femoral), n(%) |  |  |  |  |  |
| Procedural anticoagulation (IIb/IIIa, bivalirudin, clopidogrel, prasugrel, cangrelor, ticagrelor), n(%) |  |  |  |  |  |
| **Discharge medications** |  |  |  |  |  |
| Aspirin, n(%) |  |  |  |  |  |
| P2Y12 inhibitor (IIb/IIIa, clopidogrel, prasugrel, cangrelor, ticagrelor, n(%) |  |  |  |  |  |
| Warfarin, n(%) |  |  |  |  |  |
| NVKA (dabigatran, rivaroxaban, apixaban, edoxaban), n(%) |  |  |  |  |  |
| Statins, n(%) |  |  |  |  |  |
| Beta-Blockers, n(%) |  |  |  |  |  |
| ACEI/ARB, n(%) |  |  |  |  |  |
| **Each year** | 2013 | 2014 | 2015 | 2016 | 2017 |
| Warfarin, n(%) |  |  |  |  |  |
| NVKA (dabigatran, rivaroxaban, apixaban, edoxaban), n(%) |  |  |  |  |  |
| **Outcomes** | 2013 | 2014 | 2015 | 2016 | 2017 |
| Deaths, n(%) |  |  |  |  |  |
| CVA/stroke, n(%) |  |  |  |  |  |
| MI in each year of study period, n(%) |  |  |  |  |  |
| Stent thrombosis, n(%) |  |  |  |  |  |
| If readmitted, Target lesion/vascular revascularisation, n(%) |  |  |  |  |  |
| MI overall (entire study period), n(%) |  |  |  |  |  |
| If readmitted, has OAC changed since discharged? ie. answered No: patient is not currently taking or has not taken this medication within the last seven days |  |  |  |  |  |
|  |  |  |  |  |  |
| CHADS2, n(%) | Jaya to complete |  |  |  |  |
| CHAD2DS2VASC, n(%) | Jaya to complete |  |  |  |  |

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