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► **To cite this version:**

Johanne Silvain. Assessment of the Anticoagulation Activity of Apixaban – Reply –. *Circulation Journal*, 2015, 79 (7), pp.1642-1642. 10.1253/circj.CJ-15-0487 . hal-01259448

HAL Id: hal-01259448

<https://hal.sorbonne-universite.fr/hal-01259448>

Submitted on 20 Jan 2016

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We thank Dr Gonçalves and Dr Araújo for their comments. We agree on several points that emphasize the messages that are delivered in our editorial.¹ First, that the stability of non-vitamin K antagonist oral anticoagulants is real medical progress, because it leads to safer and more efficient use of anticoagulant therapy, with the potential to save many lives as compared to vitamin K antagonists and without the need for routine coagulation monitoring. Second, that tests and antidotes are still needed in cases of emergency surgery or bleeding in order to provide anesthesiologists and surgeons the right tools to make the right decision in these critical situations. Third, that according to facilities, teams should gather and discuss protocols in accordance with the available tests and

their fast deliverability to the emergency team. As for apixaban, measurement of drug concentration might indeed be difficult to perform; however, each laboratory should work on process in order to provide the specific anti-Xa test until an easier choice of routine coagulation tests proves to be more accurate and useful.

Reference

1. Silvain J, Hauguel M, Kerneis M, Collet JP, Montalescot G; for the ACTION Study Group. Measuring and reversing the effect of non-vitamin K antagonist oral anticoagulants (NOACs) [Editorial]. *Circ J* 2015; **79**: 289–291.

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(Released online May 29, 2015)