One-year Major Bleeding, Stroke and Mortality in 2,345 Atrial Fibrillation Patients From Asia (Korea and Taiwan) Treated with Edoxaban in Routine Clinical Practice: Snapshot from the Non-Interventional ETNA-AF Program

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**Introduction**: Edoxaban is approved for stroke prevention in patients with atrial fibrillation (AF) based on the phase III ENGAGE AF-TIMI 48 trial. ETNA-AF provides information on the effectiveness and safety of edoxaban in unselected patients with AF in routine clinical practice from countries in Asia and Europe.

**Methods**: From Asian countries (Korea, Taiwan), 3,008 patients were enrolled at 47 hospitals and medical practices from 2017 to 2019. We have performed analysis in 2,345 patients who have 1-year follow-up data available, with the focus on safety and efficacy events.

**Result**: Mean age was 71.6 ± 9.4 years and mean BMI 25.0 ± 3.6 kg/m2. The most frequent stroke risk factors and comorbidities were hypertension (71.6%), diabetes mellitus (28.9%), history of ischemic stroke (15.1%), valvular heart disease (9.4%), congestive heart failure (7.1%), and myocardial infarction (1.3%). Edoxaban 60 mg was used in 49.0% and 30 mg in 51.0% of patients. According to approved local labels, 71.5% of patients received the recommended edoxaban dose. ISTH major bleeding occurred in 0.8% of patients and ischemic stroke in 0.7% of patients during the first year.

**Conclusion**: In the Asian countries of Korea and Taiwan of the global ETNA program, the rates of major bleeding, stroke and systemic embolic events were low. Compared with patients from Korea, those from Taiwan appeared to exhibit a somewhat higher risk profile for major events, along with a trend towards higher rates of bleeding, stroke and all-cause/cardiovascular death.