Anticoagulant selection tool for patients with Atrial Fibrillation in the Prescribing Clinical Network (PCN) collaborative

To be used in conjunction with NICE Clinical Knowledge Summaries (CKS) - Anticoagulation – oral

- **Shared Decision made with patient to start anticoagulation**
  - Assess and discuss balance of risks, particularly bleeding, and benefits with the patient
  - Discuss treatment options between warfarin and DOACs, taking into account clinical features and patient preferences.

- **Edoxaban 60mg daily**
  - Recommended DOAC unless:
    - 30mg dose appropriate OR
    - High risk of GI bleeding*

- **Edoxaban 30mg daily**
  - Recommended DOAC if:
    - C/CL 15-50ml/min
    - Body Weight < 60kg

- **Dabigatran 110mg or Warfarin**
  - Recommended anticoagulants for patients with high risk factors for GI bleed*

- **Warfarin**
  - Warfarin essential for:
    - Metallic heart valve, Moderate or severe mitral stenosis, Severe renal dysfunction GFR<15ml/min
  - Warfarin remains an option for all other patients

*High risk factors for GI Bleeds:
  - NSAID use without PPI, Previous GI bleed requiring endoscopic intervention, Varices / portal hypertensive gastropathy, Angiodysplasia (aortic stenosis, renal disease, HHT), Previous gastric surgery, Bleeding diathesis, Dual antiplatelet therapy