

Publication

Insights into direct oral anticoagulant therapy implementation of stroke survivors with atrial fibrillation in an ambulatory setting

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Mesh terms Aged; Aged, 80 and over; Ambulatory Care; Atrial Fibrillation, complications, diagnosis, drug therapy; Drug Administration Schedule; Factor Xa Inhibitors, administration & dosage, adverse effects; Female; Health Knowledge, Attitudes, Practice; Humans; Ischemic Stroke, diagnosis, etiology; Male; Medication Adherence; Patient Education as Topic; Time Factors; Treatment Outcome

To describe how stroke survivors with atrial fibrillation implement direct oral anticoagulant treatment and propose appropriate metrics to describe adherence.; Stroke patients with atrial fibrillation electronically recorded their self-administered direct oral anticoagulants (apixaban, dabigatran, edoxaban, rivaroxaban) during a 6-month observation phase after hospitalisation for ischemic stroke. Taking and timing adherence, correct dosing days, drug holidays, time of the day and day of the week subsets, dose-todose intervals and longest intervals between two consecutive doses were calculated from electronic monitoring data to describe and discuss the implementation phase of adherence.; Data from 41 patients were analysed. Median age was 77 (IQR/=/69-84), 63.4% were male and the majority suffered a mild stroke (median NIHSS: 1). Mean taking and timing adherence exceeded 90%. Correct dosing occurred in 86.6% of the days. Seven patients (17.1%) had intake pauses of three or more consecutive days. Patients with twice-daily regimen (70.7%) had higher taking adherence in the morning than in the evening (94.4% versus 89.9%; p/=/0.001). No therapy- or anamneses-related characteristic was associated with taking adherence.; Although adherence to direct oral anticoagulants of stroke patients with atrial fibrillation exceeded 90%, deviant intake patterns such as drug holidays and missed evening doses were common and raise concerns. Appropriate adherence metrics calculated from electronic monitoring data may guide healthcare professionals elucidating patient-tailored adherence-enhancing interventions. ClinicalTrials.gov registration number: NCT03344146.

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