CASE EXAMPLE

67 year old man requiring urgent removal of gallbladder

INITIAL SITUATION AND DIAGNOSIS
The patient presented at the hospital emergency centre with a fever, abdominal pain and nausea. An abdominal ultrasound revealed gallstones and inflammation of the gallbladder. It was decided the best course of action for the patient was immediate surgery to remove the gallbladder.

THERAPY AND OUTCOME
Five hours after being admitted to hospital, the patient was administered an intravenous 5g dose of Praxbind® (idarucizumab) to remove the anticoagulant effects of dabigatran. Subsequent tests showed normal coagulation (haemostasis) after just 2 hours and 10 minutes. This allowed the physicians in the emergency centre to proceed with the gallbladder removal as quickly as possible, which was completed without complications. Once clinically stable after three days, the patient was given antithrombotic therapy (low-molecular-weight heparin) to protect against the thrombotic risk of his underlying AF. Treatment with Pradaxa® was restarted after five days when the patient was discharged from hospital.

EVALUATION
“The easy administration of idarucizumab and its immediate, complete and sustained reversal of dabigatran etexilate helped to put the anaesthetist’s and surgeon’s minds at rest about potential bleeding complications due to the presence of an anticoagulant. The availability of this highly effective reversal agent allowed them to focus on removing the gallbladder efficiently, ultimately providing the patient with the best possible care in a critical and urgent situation.”

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