

CASE EXAMPLE

83 year old woman slips in bathroom causing tibia (lower leg) fracture requiring urgent surgery

GENDER

Female

AGE

83 years

MEDICAL HISTORY

Atrial fibrillation (AF),
high blood pressure,
previous stroke

MEDICATION

Pradaxa® (dabigatran
etexilate) 110mg
twice daily – an
anticoagulant to
protect against AF
related-stroke.
Last taken 2 hours
before admission
to hospital

INITIAL SITUATION AND DIAGNOSIS

The patient slipped in the bathroom at home. Her daughter found her a couple of hours later and called an ambulance, which took the patient to the hospital emergency centre. An X-ray revealed that the patient had an open fracture of the tibia with multiple loose bone fragments. The patient also had bad skin perforation (tearing). It was decided that urgent surgery was required to manage this complex injury, with the shortest possible delay.

THERAPY AND OUTCOME

Laboratory measurements confirmed that the patient had recently taken Praxada®. Due to a risk that surgery could cause bleeding with potentially serious consequences, the patient was administered two consecutive intravenous infusions of 2.5g Praxbind® (idarucizumab) over a period of 5-10 minutes. Tests showed normal coagulation after four hours, indicating it was safe for the surgeon to proceed with the operation. This was successful and once the patient was clinically stable after two days, treatment with Pradaxa® was restarted.

EVALUATION

“Idarucizumab provides complete and sustained reversal of the anti-coagulant effects of dabigatran etexilate. Because the reversal agent was available, the patient, family members and the primary care physician were reassured that it was safe to continue with dabigatran etexilate after this accident and urgent surgical intervention. Overall idarucizumab can ensure confidence in the use of dabigatran etexilate.”



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