

Title of Position Statement	Preferred Direct Oral Anticoagulant (DOAC) for prevention of stroke and systemic embolism in adults with non-valvular AF (NVAF)
Position statement reference number	NEL/MO/DOC/2024-003
Version:	1.0
Agreed By:	NHS North East London Pharmacy and Medicine Optimisation Team North East London Cardiovascular Network
Approved By	North East London Formulary and Pathways Group (FPG)
Date Approved	09/04/2024
Ratified by	North East London System Prescribing and Medicines Optimisation (SyPMO) Board
Date Ratified:	23/04/2024
Date of Last review:	N/A
Review date:	23/04/2026
Key words:	Apixaban, Dabigatran, Edoxaban, Rivaroxaban, Anticoagulation
Location (of publication) Available on:	https://primarycare.northeastlondon.icb.nhs.uk/home/meds/medicines-position-statements-nel/?preview_id=4470
Date added to Intranet:	03/05/2024

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NHS NORTH EAST LONDON POSITION STATEMENT

Preferred Direct Oral Anticoagulant (DOAC) for prevention of stroke and systemic embolism in adults with Non-Valvular AF (NVAF)

Generic apixaban is the preferred DOAC in patients with NVAF in NHS North East London, unless it is contraindicated, not tolerated or clinically inappropriate.

BACKGROUND

- NHS England has recommended clinicians should use the best value DOAC that is clinically appropriate for the patient – [see here for more information](#)
- DOAC medication are currently one of the highest spend medicine categories in primary care.
- NICE guidelines recommend that DOACs are the preferred anticoagulant for patients with NVAF. In circumstances where DOACs are contraindicated, not tolerated or clinically inappropriate for patients, a Vitamin K antagonist should be offered.
- All four DOACs (edoxaban, apixaban, rivaroxaban and dabigatran) are licensed to treat NVAF and as prophylactic treatment for stroke in NVAF patients and are approved on our formulary for use in NHS North East London.
- It is not appropriate to be definitive on which DOAC is the most clinically effective given the heterogeneity of different trials.
- As of November 2023, generic apixaban is the best value DOAC for patients with NVAF.

ACTIONS FOR HEALTHCARE PROFESSIONAL

- Generic apixaban should be used as the preferred DOAC for patients with NVAF, unless apixaban is contraindicated, not tolerated or clinically inappropriate for patients.
- If apixaban is contraindicated, not tolerated or clinically inappropriate, this should be detailed in the patient's medical record.
- Patients who are currently stabilised on other DOACs should continue with their current treatment, these patients should not be switched.
- DOAC treatment should be reviewed regularly, in patients whose current DOAC is newly contraindicated, no longer tolerated or clinically inappropriate, generic apixaban should be considered.
- In patients whom apixaban is contraindicated, not tolerated or clinically inappropriate, an alternative DOAC should be considered.
- Generic apixaban should be considered as the preferred DOAC in NVAF patients in NHS North East London unless otherwise communicated by the NHS North East London Pharmacy & Medicines Optimisation team.

ROLES AND RESPONSIBILITIES

- NHS North East London Pharmacy and Medicines Optimisation Team is responsible for reviewing this document and ensure information within the position statement is accurate and up to date. The position statement should be adhered to when reviewing any proposed DOAC related documents and making any prescribing recommendation.
- Prescribers should follow the actions listed in this position statement, to ensure best practice for safe and effective prescribing and to support best patient care.

INTERNAL AND EXTERNAL REFERENCES

- NICE TA275: [Overview | Apixaban for preventing stroke and systemic embolism in people with non-valvular atrial fibrillation | Guidance | NICE](#) (updated 02 July 2021)
- NICE guideline NG196: [Overview | Atrial fibrillation: diagnosis and management | Guidance | NICE](#) (updated 30 June 2021)

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