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Response to the letter concerning the article "Rivaroxaban in secondary cardiogenic stroke prevention: two-year single-centre experience based on follow-up of 209 patients"

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The paper publish by our team presents one of the first follow-up series in Poland treated by means of new oral anticoagulant drugs (rivaroxaban). The follow-up was two years and none of the patients was lost from follow-up. So the results reflect our clinical results related to the use of rivaroxaban in patients with atrial fibrillation. The population treated in daily practice usually differs from the cohorts chosen for clinical studies (e.g. phase II and phase III randomised controlled trials). Despite these differences the results achieved in our group are very satisfactory and confirm the high clinical efficiency and safety of the proposed embolic stroke prophylaxis.

The rate of bleeding episodes in the two years follow-up was 11.96%, two of which were classified as major bleedings (0.95%). Among the non-major bleeding episodes 13 epistaxis episodes were reported. In all of them the discontinuation of rivaroxaban treatment was sufficient to stop the bleeding. Concerning the follow-up of this group, nine of the patients were treated with rivaroxaban again; 12 of the patients were switched to warfarin or acenocoumarol; and four stopped anticoagulant treatment. Similar events (epistaxis) occurred also in other studies, including ROCKET AF, and in our opinion it is not a rivaroxaban treatment-specific complication

As the patients were closely followed-up, in the patients with renal function worsening the therapy was discontinued; proper renal function monitoring is the main condition required to maintain the proper treatment safety, and this was introduced in our treatment and follow-up protocol. Concerning two cases of major bleeding, there was no need for any surgical intervention. Both patients did not require prothrombin complex concentrate (PCC) or activated PCC treatments, but one of them required two units of packed red blood cells.

To summarise, the results of our cohort follow-up of routinely treated patients confirm the previous encouraging data from the randomised controlled trials concerning this promising and efficacious therapy.

Conflict of interest: *none declared*

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