

# Use of a Decision Support Software (Guidance MS) to guide prescribing of new oral anticoagulants (NOAC)

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**Background:** NOACs such as Apixaban, Dabigatran and Rivaroxaban are under the PBS for the prevention of embolic complications of non-valvular AF and the treatment of venous thromboembolism. These drugs have shown to be non-inferior to warfarin and provide patient convenience, as routine laboratory testing is not required. However inappropriate prescribing has led to significant bleeding complications and delayed surgeries. Hence, it is important to carefully select the patient population, which these drugs are suitable for.

**Method:** All three medications were listed on the Guidance MS. All prescribers were required to get approval via Guidance or discussion with Clinical Haematology. Prescribers were required to enter the patient's demographic details, renal function and identify relative contraindications.

**Results:** This process has been in place since October 2013 with a total of 480 patients to date. Since the introduction of the Guidance system, only one patient has developed a major bleeding complication – intracranial (basal ganglia) bleed. This represents a bleeding rate of 0.3%, which is lower than that is reported in clinical trials.

**Conclusions:** As far as we are aware, this computer assisted decision support system for NOAC is the first of its kind in Victoria. This system empowers clinicians to make a guided decision regarding NOAC use, given recent concerns about bleeding risk and the lack of antidotes. Preliminary data has shown no unwanted complications. However, further recruitment and analysis is required.