

HOW DO THE DOACs COMPARE WITH WARFARIN?

Outcome of interest	Dabigatran 110mg RE-LY ³⁷ NNT/NNH for 1 yr	Dabigatran 150mg RE-LY ³⁷ NNT/NNH for 1 yr	Rivaroxaban ROCKET AF ³⁸ NNT/NNH for 1 yr	Apixaban ARISTOTLE ³⁹ NNT for 1 yr
Stroke or systemic embolism	Same	Same in 166 of 167 treated	Same	Same in 302 of 303 treated
Ischemic stroke	Same	Same in 344 of 345 treated	Same	Same
All cause mortality	Same	Same	Same	Same in 237 of 238 treated
Major bleed Hgb ↓ ≥20g/L, transfused ≥2units, fatal bleeding or symptomatic bleeding at critical site	Same in 142 of 143 treated	Same	Same	Same in 103 of 104 treated
Intracranial bleed	Same in 188 of 189 treated	Same in 226 of 227 treated	Same in 499 of 500 treated	Same in 212 of 213 treated
GI bleed	Same	Same in 203 of 204 treated	Same in 159 of 160 treated	Same
Discontinuations	Same in 22 of 23 treated	Same in 18 of 19 treated	Same	Same in 44 of 45 treated (NNT/1.8 yrs)

Same = no statistically significant difference between DOAC and warfarin

DOAC superior to warfarin (**NNT** - e.g. For every 213 patients treated with apixaban instead of warfarin for 1 year, there would be one **less** intracranial hemorrhage)

Warfarin superior to DOAC (**NNH** - e.g. For every 204 patients treated with dabigatran 150mg instead of warfarin for 1 year, there would be one **more** GI bleed)