NHS
Cambridgeshire and Peterborough
Clinical Commissioning Group

Dosing of Oral Anticoagulants for Non-Valvular Atrial Fibrillation (Adult > 18 years)

Please consult the Summary of Product Characteristics for each individual anticoagulant for further information

Creatinine clearance (ml/min)	Warfarin	Edoxaban (Lixiana)	Dabigatran (Pradaxa)	Rivaroxaban (Xarelto)	Apixaban (Eliquis)
> 50ml/min	For patients who require rapid anticoagulation the usual adult induction dose of warfarin is 5–10 mg on the first day (elderly patients should receive a lower induction dose). For patients who do not require rapid anticoagulation, a lower loading dose can be used over 3–4 weeks. In both cases subsequent doses depend upon the prothrombin time, reported as INR (international normalised ratio).	60 mg ONCE daily **Body weight ≤60 kg:** Reduce to 30 mg ONCE daily **Concomitant P-gp inhibitors (ciclosporin, dronedarone, erythromycin, ketoconazole):** Reduce to 30 mg ONCE daily	**Patients under 80 years:** 150 mg TWICE daily **Patients >80 years OR concomitant verapamil:** 110 mg TWICE daily **When thromboembolic risk is low and the bleeding risk is high (e.g. CrCL 30-50 mL/min) or patients weigh <50kg or in patients with gastritis, esophagitis, or gastroesophageal reflux:** Consider 110 mg TWICE daily	20 mg ONCE daily with food N.B. No dose adjustment based on weight is currently recommended.	5 mg TWICE daily **Reduce to 2.5 mg twice daily** in patients with two or more of the following characteristics: o Age ≥80 years o Body weight ≤60kg o Serum creatinine 1.5 mg/dL (133 micromol/L) or more
30-49ml/min	Renal insufficiency is a risk factor for bleeding. INR should be monitored more frequently, or alternatively, a suitable DOAC could be considered.	30 mg ONCE daily	As above	15mg ONCE daily	As above
15-29ml/min		30 mg ONCE daily	DO NOT USE	15mg ONCE daily (Use with caution)	2.5mg TWICE daily
< 15 ml/min		**DO NOT USE**			

Originally written March 2015; Reviewed August 2017 Version 2.0
For further information and references, please contact the Medicines Optimisation Team Tel: 01480 387126 Email: CAPCCG.prescribingpartnership@nhs.net