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Addendum to BSG/ESGE Endoscopy in patients on antiplatelet or anticoagulant therapy guideline 2021

We thank the Senior Coroner for Worcestershire for bringing to our attention the death of a patient due to a myocardial infarction who had previous coronary stents, but had atrial fibrillation in addition, and at the time of colonoscopy was on sole therapy with rivaroxaban. The rivaroxaban was stopped at least 48 hours prior to the procedure. This particular scenario is not covered by the BSG/ESGE guidelines, and I am grateful to the cardiology author on the guidelines, Dr James Wilkinson, for providing interim guidance. We are aware of at least one other similar case with catastrophic consequences.

Many clinicians increasingly stop all antiplatelets in patients with prior coronary stents when there is a need for long-term anticoagulation for other reasons (e.g. AF), as per the current European Society of Cardiology guidelines. These patients will be at an increased risk of stent thrombosis when anticoagulants are stopped and they are on no antithrombotic medication at all. We recommend that all patients on anticoagulants alone with a history of prior coronary stents must either be switched to aspirin (provided there are no contraindications) or discussed with an interventional cardiology consultant first. When switching to aspirin patients should be loaded with 300mg the day prior to anticoagulant cessation and prescribed 75mg daily thereafter. Patients should remain on aspirin until they are re-established on anticoagulants and within therapeutic range, after which the aspirin can be stopped.

It is important to remember that particular care must be taken in any patients with a prior history of having coronary stents. We would encourage discussion with a consultant interventional cardiologist in patients in whom interruption of either antiplatelets or anticoagulants is being considered.

We also plan to publish this guidance as a journal letter prior to a formal update of the BSG/ESGE guideline.

Prof Andy Veitch

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President, British Society of Gastroenterology