SSC Project: Predictors of Perioperative Cardiovascular and Bleeding Outcomes in Patients who are Receiving Conventional and Novel Anticoagulants and Antiplatelet Drugs
Predictive Variables in Cardiovascular Disease

• Person responsible: There are 3 Co-chairs of this proposal, with equally shared responsibility, and members of ISTH, who will provide the leadership and guidance for this project.
  o Dr. James Douketis (McMaster University, Canada; Current Chair, Subcommittee on Predictive Variables in Cardiovascular Disease)
  o Dr. Jerrold Levy (Emory University, Atlanta, USA)
  o Dr. Marc Samama (Paris Descartes University, Paris, Fr)

• Aim / Mandate of the project:
  o To identify and quantify clinical and laboratory-based predictors of perioperative cardiovascular events (stroke, myocardial ischemia, venous thromboembolism) and bleeding (major, minor).
  o To increase knowledge on the safety and efficacy of perioperative use of new anticoagulants (dabigatran, rivaroxaban, apixaban, and upcoming other agents) and new antiplatelet drugs (prasugrel, ticagrelor) in reference to the first objective.
  o To produce clinical guidance documents, targeted to peer-reviewed journals, for the perioperative management of new anticoagulant and antiplatelet drugs and to improve knowledge translation of such material.
  o To provide a vehicle for collaborative, multidisciplinary research in this field bringing together internists, surgeons and anesthesiologists with an interest in antithrombotic therapy use in the perioperative period and its management.

• Methodology (in very brief, not more than 1 paragraph): This working party will address the above-mentioned objectives in the following ways:
  o Review databases of large prospective trials assessing new anticoagulants and new antiplatelet drugs, focusing on patients who required surgery/procedures.
  o Develop prospective observational studies to assess the safety and efficacy of standardized protocols of new anticoagulants/antiplatelet drugs for perioperative management in patients who require elective surgery/procedure.
  o Use acquired observational data to design randomized trials of different management strategies, where feasible.
  o Evaluate ongoing strategies for emergency reversal of new anticoagulants/antiplatelet drugs with life-threatening hemorrhage.

• Inclusion / recruitment criteria (if applicable): not applicable
• Year of starting: 2012
• Annual report of project: mid-2012 (after SSC Meeting in Liverpool)
• Year of completion (expected): ongoing