

Edoxaban for treatment and/or prevention of recurrence of DVT/PE (excluding prevention of VTE after hip or knee replacement) – Initiation Checklist (primary care only)

For cautions, contra-indications and interactions, refer to SPCs – [edoxaban 60mg](#) and [edoxaban 30mg](#)
[NICE TA 354](#) - Edoxaban for treating and for preventing deep vein thrombosis and pulmonary embolism
Refer to: [Wirral Oral Anticoagulant Guidelines](#)

Patient details:

Name: _____ DOB: _____
Weight: _____ SrCr: _____

Creatinine Clearance Calculation (CrCL): Calculation of CrCl using Cockcroft and Gault equation** or a reputable online CrCl calculator.

$(140 - \text{Age} \dots\dots) \times \text{Weight}^* \dots\dots \times \text{CONSTANT} \dots\dots = \dots\dots \text{ ml/min}$
Serum creatinine (micromol/L).....

CONSTANT Male = 1.23 Female = 1.04

* Female use actual body weight if ≤ 60kg, if > 60kg use 60kg. Male use actual body weight if ≤ 70kg, if > 70kg use 70kg.

**Cockcroft and Gault does not apply to all patients. Exclusion criteria include: unstable serum creatinine, pregnancy, malnutrition, amputation and dialysis

***NB: if body weight ≤ 60kg then use reduced dose 30mg

Renal Function:

Patient's CrCl is greater than 50mls/min (prescribe standard dose of 60mg once daily)
Patient's CrCl is between 15-50mls/min (reduced dose 30mg once daily)
Patient's CrCl is less than 15mls/min (edoxaban contra-indicated)

Indication for edoxaban as per marketing authorisation (treatment of deep vein thrombosis (DVT) and pulmonary embolism (PE), and prevention of recurrent DVT and PE in adults) and as per [NICE TA354](#)

Baseline checks to be undertaken – aPTT, INR, Hb, U&Es and LFTs
Consider contraindications, cautions and interacting drugs using references at the top of the page

Initiation dose of edoxaban is 60 mg once daily following initial use of parenteral anticoagulant for at least 5 days. Edoxaban and initial parenteral anticoagulant should not be administered simultaneously.

Reduced dose 30mg once daily

Reason for reduced dose:

1. CrCl 15-50mls/min
2. Weight ≤ 60kg
3. Concomitant treatment with interacting drugs (see SPC above for full details.) P-glycoprotein (P-gp) inhibitors: ciclosporin, dronedarone, erythromycin, or ketoconazole

Duration of therapy should be individualised after careful assessment of the treatment benefit against the risk for bleeding. Short duration of therapy (at least 3 months) should be based on transient risk factors (e.g. recent surgery, trauma, immobilisation) and longer durations should be based on permanent risk factors or idiopathic DVT or PE.

Patient has been counselled, given an edoxaban alert card and [patient information leaflet](#)

Patient understands the risk/benefits of edoxaban, that therapy is long term and is aware that there is currently no antidote for these effects

Prescriber's Signature: _____ Date: _____