Letter by Feng et al Regarding Article, “Ischemic Stroke and Intracranial Hemorrhage With Aspirin, Dabigatran, and Warfarin: Impact of Quality of Anticoagulation Control”

To the Editor:

We read with interest the excellent work by Ho et al\(^1\) investigating the real-world anticoagulation experience of Chinese population with atrial fibrillation (AF). We agreed with the authors that, in Chinese patients with atrial fibrillation, the benefits of warfarin therapy for stroke prevention and ICH risk are closely dependent on the quality of anticoagulation.

The data in the article showed that 16.3% patients of non-valvular AF received guideline-recommended warfarin treatment for stroke prevention. The ChinaQUEST study\(^2\) reported only 1 in 5 stroke patients with AF were treated with warfarin in Mainland China. Also unpublished data from our department showed that only \(\approx 14\%\) AF patients with stroke discharged with warfarin treatment. Based on CHA2DS2-VASc score, patients with AF and stroke history at the same time are at increased risk of further ischemic events (CHA2DS2-VASc \(\geq 2\) points). In our clinical practice, the often-raised question that stopped patients from accepting warfarin treatment included fear of intracranial hemorrhage, needing frequent monitoring of international normalized ratio, and possible drug interactions with dietary (as Chinese medicine is widely used in China). However, these problems may be largely solved with introduction of new oral anticoagulants (dabigatran, rivaroxaban, and apixaban). Although wide availability of these new drugs are limited and the prices are still high, physicians and patients could take efforts and the most effective way to reduce the heavy burden of recurrent stroke in China.

Disclosures

None.

Xiaoya Feng, MD
Ying Huan, MD, PhD
Yongtao Lv, MD, PhD
Department of Neurology
Shandong Traffic Hospital
Jinan, China

References

Letter by Feng et al Regarding Article, "Ischemic Stroke and Intracranial Hemorrhage With Aspirin, Dabigatran, and Warfarin: Impact of Quality of Anticoagulation Control"
Xiaoya Feng, Ying Huan and Yongtao Lv

Stroke. 2015;46:e71; originally published online February 3, 2015;
doi: 10.1161/STROKEAHA.114.008578
Stroke is published by the American Heart Association, 7272 Greenville Avenue, Dallas, TX 75231
Copyright © 2015 American Heart Association, Inc. All rights reserved.
Print ISSN: 0039-2499. Online ISSN: 1524-4628

The online version of this article, along with updated information and services, is located on the
World Wide Web at:
http://stroke.ahajournals.org/content/46/3/e71

Permissions: Requests for permissions to reproduce figures, tables, or portions of articles originally published
in Stroke can be obtained via RightsLink, a service of the Copyright Clearance Center, not the Editorial Office.
Once the online version of the published article for which permission is being requested is located, click
Request Permissions in the middle column of the Web page under Services. Further information about this
process is available in the Permissions and Rights Question and Answer document.

Reprints: Information about reprints can be found online at:
http://www.lww.com/reprints

Subscriptions: Information about subscribing to Stroke is online at:
http://stroke.ahajournals.org//subscriptions/