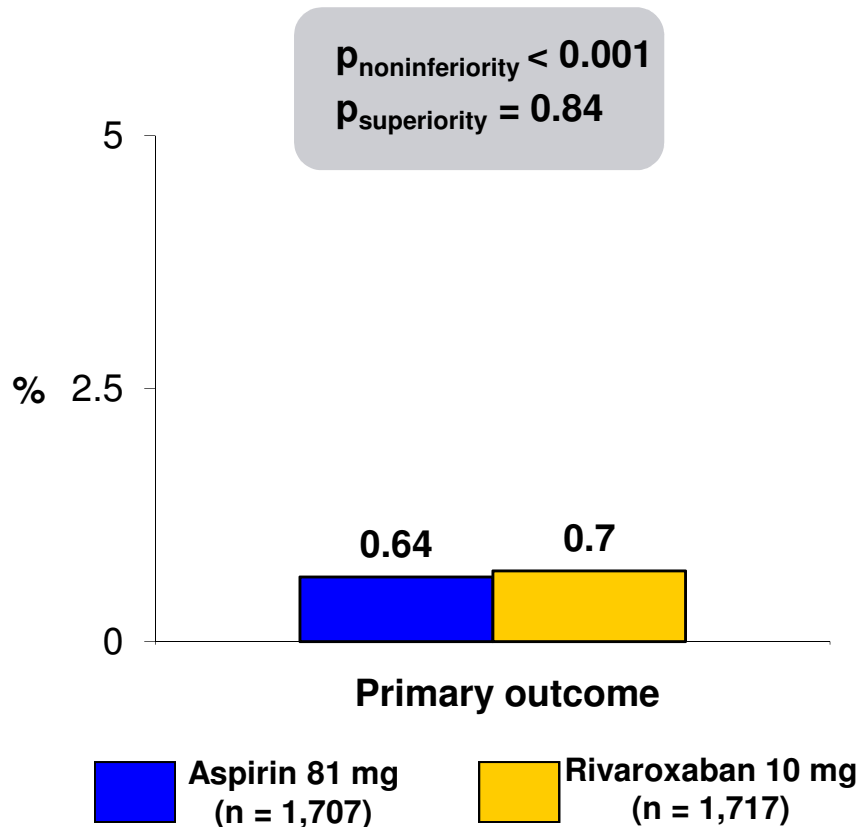


EPCAT II

Trial design: Patients undergoing total hip or knee arthroplasty were randomized in a 1:1 fashion to either extended-duration rivaroxaban 10 mg daily or aspirin 81 mg daily for thromboprophylaxis. Patients were followed for 90 days.



Results

- Primary outcome, symptomatic proximal DVT/PE: aspirin vs. rivaroxaban: 0.64% vs. 0.7%, p for noninferiority < 0.001 , p for superiority = 0.84
- Major bleeding: 0.47% vs. 0.29%, p = 0.42; any bleeding: 1.29% vs. 0.99%, p = 0.43

Conclusions

- Extended-duration treatment with low-dose aspirin is noninferior to low-dose rivaroxaban for thromboprophylaxis among patients undergoing total hip or knee arthroplasty; all patients received rivaroxaban 10 mg for 5 days postoperatively
- Important trial; likely to influence clinical practice and guidelines