



AMERICAN
COLLEGE of
CARDIOLOGY®

FREEDOM COVID

Anticoagulation Strategies in Non-Critically Ill
Patients Hospitalized With COVID-19

**Multicenter, International, Three-Arm, Open-Label,
Active-Controlled, Randomized Trial**

OBJECTIVE: To determine the safety and effectiveness of therapeutic vs. prophylactic anticoagulation in non-critically ill patients hospitalized with COVID-19.

3,398
PATIENTS

INCLUSION CRITERIA:

- ≤ 48 hours since admission with symptomatic COVID-19
- Not requiring ICU-level care
- No therapeutic anticoagulation or ≤ 2 doses of pharmacologic prophylaxis within prior 7 days



**PROPHYLACTIC ENOXAPARIN
(N=1,141)**

VS.



**THERAPEUTIC ANTICOAGULATION
(ENOXAPARIN [N=1,136] OR
APIXABAN [N=1,121])**

PRIMARY ENDPOINT

**PRIMARY EFFECTIVENESS ENDPOINT: COMPOSITE OF
ALL-CAUSE MORTALITY, NEED FOR ICU-LEVEL CARE,
SYSTEMIC THROMBOEMBOLISM, OR ISCHEMIC STROKE
AT 30 DAYS: 13.2% vs. 11.3% (P=0.11)**

CONCLUSION

In non-critically ill patients hospitalized with COVID-19, 30-day outcomes were similar with therapeutic anticoagulation with enoxaparin or apixaban vs. prophylactic enoxaparin alone.

Stone GW, Farkouh ME, Lala A, et al., on behalf of the FREEDOM COVID Investigators. Anticoagulation Strategies in Non-Critically Ill Patients Hospitalized with COVID-19: A Randomized Clinical Trial. *J Am Coll Cardiol* 2023;Mar 6:[Epub ahead of print].

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