Outcomes in Patients Implanted With a Watchman Device in Relation to Choice of Anticoagulation and Indication for Implant

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October 19, 2020

Abstract

Background Patients with atrial fibrillation are increasingly prescribed a direct oral anticoagulant (DOAC) over warfarin and seek to avoid anticoagulation even without a history of major bleeding. This study explores the outcomes of patients implanted with a Watchman device in relation to anticoagulation choice (warfarin versus DOAC) in the post-procedure period and a history of bleeding. Methods Patients implanted with a Watchman device at a single center were retrospectively analyzed. Characteristics including anticoagulation in the first 45 days and history of major bleed were assessed and efficacy (thromboembolism) and safety (bleeding) outcomes compared by Kaplan-Meier analysis. Results 209 patients were implanted (57% male, age 74.6 ? 7.8 years) and followed for 23.5 ± 7.1 months. In the first half of patients, 98% were prescribed warfarin, which dropped to 51% in the second half ($p<0.0001$). A history of major bleed was present in 80.8% of the first half of patients and decreased to 60% in the second half ($p=0.001$). There were 16 safety and 4 efficacy events. There was no difference in safety outcomes according to history of major bleeding or anticoagulant choice in the first 45 days. There was no difference in efficacy outcomes over the duration of follow up according to anticoagulation choice in the first 45 days. Conclusions Patients implanted with a Watchman device were increasingly over time prescribed a DOAC and implanted without a history of major bleeding. Bleeding and thromboembolic events were infrequent and related neither to choice of anticoagulant nor to prior major bleeding.

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