USE OF CONTRAINDED ANTITHROMBOTIC MEDICATIONS IN THE CARDIAC CATHETERIZATION LABORATORY: INSIGHTS FROM THE VETERANS AFFAIRS CLINICAL ASSESSMENT, REPORTING, AND TRACKING PROGRAM

Oral Contributions
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Background: Several antithrombotic medications used during percutaneous coronary intervention (PCI) are contraindicated for specific patient groups. Little is known about the use and clinical implications of contraindicated medication use in PCI.

Methods: Using national VA CART Program data for all PCI from 2007-2013, we evaluated patient subgroups with contraindications to commonly used antithrombotics (Table). After identifying antithrombotics most frequently used in contraindicated settings, we determined the risk-adjusted association between contraindicated use of these medications and outcomes of bleeding and mortality from Cox proportional hazards models among cohorts with similar contraindications.

Results: Among 12,090 patients with a contraindication to common antithrombotic medications, 845 (7%) received a contraindicated medication. Abciximab and eptifibatide were most frequently used in contraindicated settings (Table). In unadjusted and risk-adjusted analyses, contraindicated abciximab use was associated with increased bleeding in patients with thrombocytopenia or prior stroke and increased mortality in patients with thrombocytopenia (Table).

Conclusion: In patients with contraindications to common antithrombotic medications used during PCI, nearly 1 in 10 received a contraindicated medication with attendant bleeding and mortality risk. Strategies to avoid use of contraindicated medications are needed to minimize these avoidable PCI complications.