



## Interface Prescribing & New Therapies Subgroup



August 2013

### Rivaroxaban for use in Acute Coronary Syndrome in combination with aspirin with or without clopidogrel.

The Interface Prescribing and New Therapies Subgroup discussed the above at its meeting on the 27<sup>th</sup> August 2013. The recommendation of this subgroup is as follows:\*

The Interface Prescribing & New Therapies Subgroup of the GMMMG considered the use of rivaroxaban for the prevention of atherothrombotic events in adult patients after an acute coronary syndrome (ACS) with elevated cardiac biomarkers, in combination with aspirin and with or without clopidogrel.

**The group does not recommend the use of rivaroxaban over other more established therapies for the above indication.**

The pivotal trial did show a significant reduction in the composite of cardiovascular death, MI and Stroke of any cause (NNT= 63) however the risk of major bleeding was significantly more common with rivaroxaban than placebo (NNH = 84).

There is currently no data available on combining rivaroxaban with newer drugs which are now more commonly used in current practice such as ticagrelor.

According to set criteria rivaroxaban for ACS is a low priority for funding.

Review date: August 2015

\* Unless superseded by NICE guidance or substantial and significant new evidence becomes available.

▼ Newly marketed drugs and vaccines are intensively monitored for a minimum of two years, in order to confirm their risk / benefit profile of the product. Healthcare professionals are encouraged to report all suspected adverse drug reactions regardless of the severity of the reaction.