UC San Diego Health

DOAC	Indication	Dose	Renal dose adjustments	Switching to warfarin	Switching from warfarin	Reversal agent	Drug interactions	Other/Misc
Apixaban (Eliquis)	A fib	5 mg BID	2 or more of the following: SCr ≥ 1.5 mg/dL, Age ≥ 80, or Wt ≤ 60 kg: 2.5 mg BID	D/C apixaban and begin both a parenteral anticoagulant and warfarin at the time the next dose of apixaban would have been taken, D/C parenteral agent when INR at goal *Canadian labeling (consider off-label use in U.S.):* Continue apixaban with warfarin until INR ≥ 2.0. For first two days of conversion period, can give warfarin at usual starting doses without INR testing. Thereafter, check INR just prior to next dose of apixaban and D/C once INR > 2.0	D/C warfarin and start apixaban when INR < 2.0	Coagulation factor Xa [recombinant], inactivated-zhzo) (Andexxa)	Combined P-gp and strong CYP3A4 inhibitors: reduce dose by 50%. Avoid if already indicated for 2.5 mg BID dose. (examples: ketoconazole, itraconazole, ritonavir; an exception is clarithromycin, no adjustment needed) Combined P-gp and strong CYP3A4 inducers: avoid use (examples: rifampin, carbamazepine, phenytoin, St. John's wort)	Apixaban can increase the INR Clinical efficacy and safety studies with ELIQUIS did not enroll patients with ESRD on dialysis or patients with a CrCl < 15 mL/min; therefore, dosing recommendations for this population are based on PK/PD data Tablet may be crushed Can be administered via G-tube
	DVT/PE treatment	10 mg BID x 7 days, then 5 mg BID for ≥ 6 months	None					
	DVT/PE prevention	s/p VTE treatment: 2.5 mg BID s/p hip or knee replacement: 2.5 mg BID with initial dose taken 12-24h after surgery x 35 days (hip) or x 12 days (knee)	None					

References:
Eliquis (apixaban) [package insert]. Princeton, NJ: Bristol-Myers Squibb Company; 2018 February.
Eliquis (apixaban) [product monograph]. Montreal, Canada: Bristol-Myers Squibb Canada Company; 2018 April.