Anti coagulant - antithrombotic therapy - JY. Le Heuzy

- One sixth of all strokes is attributable to atrial fibrillation. Another possible cause of cerebral ischemia is present in near 25 % of cases of stroke in patients with atrial fibrillation: carotid stenosis, aortic atheroma, hypertension, lacunar infarction. In other patients stroke is not embolic and not directly related to atrial fibrillation but occurs in patients with the same profile in terms of thromboembolic risk factors.
- Antithrombotic drugs have demonstrated an efficacy for decreasing the number of strokes in atrial fibrillation patients. This efficacy is high for Warfarin and direct oral anticoagulants, modest for antiplatelet drugs.
- Direct oral anticoagulants are at least non inferior to vitamin K antagonists, there were superior in some trials and they dramatically decreased the number of intracranial hemorrhages in all. Concerning mortality, despite modest decreases observed with direct oral anticoagulants, as compared to Warfarin, the proportion of deaths due to stroke in these patients remains low, as compared to sudden cardiac deaths and deaths due to heart failure.
- When atrial fibrillation is directly the factor of cardio embolic stroke the interest of antithrombotic drugs (anticoagulants, not antiplatelets) is really very high. In cases in which atrial fibrillation is only the marker of the stroke risk the interest of anticoagulants is possible but more researches and evidence bases demonstrations are necessary to definitively confirm this possibility.

