

CLINICAL PRACTICE GUIDELINE

Regional anaesthesia in patients on antithrombotic drugs – a joint ESAIC/ESRA guideline: Endorsement by the Scandinavian Society of Anaesthesiology and Intensive Care Medicine

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Abstract

The Clinical Practice Committee of the Scandinavian Society of Anaesthesiology and Intensive Care Medicine endorses the clinical practice guideline *Regional anaesthesia in patients on antithrombotic drugs – a joint ESAIC/ESRA guideline*. This clinical practice guideline serves as a useful decision aid for Nordic anaesthesiologists providing regional anaesthesia to adult patients on antithrombotic drugs.

KEYWORDS

AGREE II, antithrombotic drugs, bleeding, clinical practice guideline, regional anaesthesia

1 | BACKGROUND

A rare but feared complication to regional anaesthesia is bleeding.¹ The risk of bleeding is increased in patients on antithrombotic agents, and many patients undergoing regional anaesthesia today are elderly with co-existing diseases and on antithrombotic drugs.²

The clinical practice guideline *Regional anaesthesia in patients on antithrombotic drugs – a joint ESAIC/ESRA guideline* provides

evidence-based recommendations for providing regional anaesthesia in adult patients on antithrombotic drugs.³

2 | METHODS

The Clinical practice committee (CPC) of the Scandinavian Society of Anaesthesiology and Intensive Care Medicine (SSAI) decided to assess

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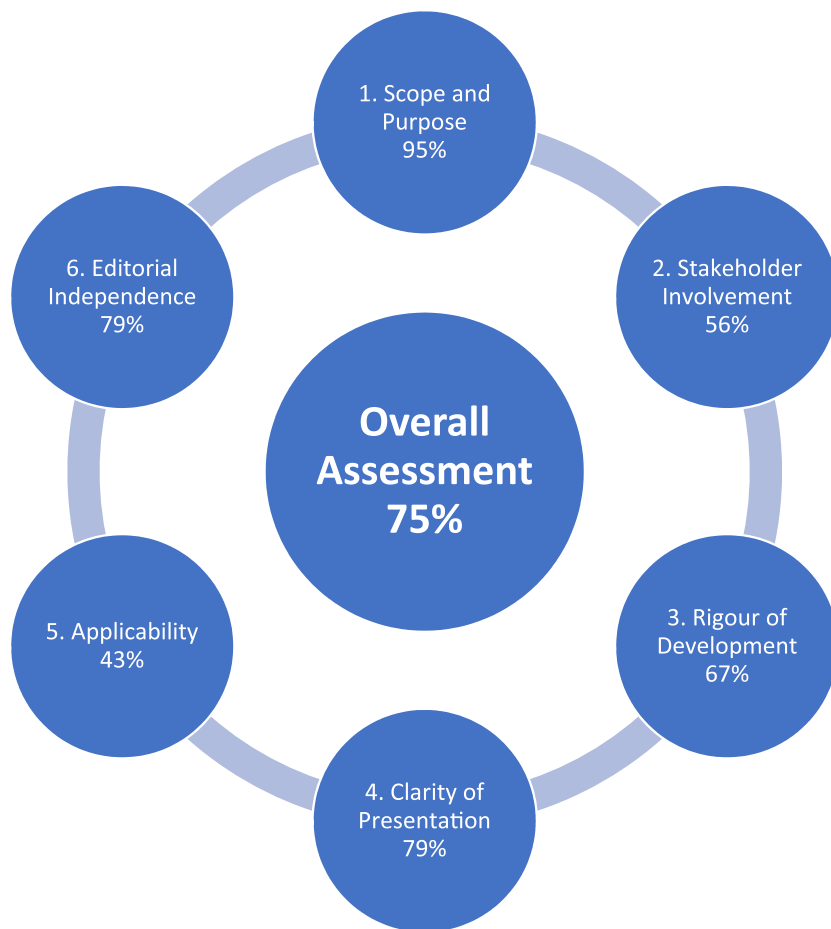


FIGURE 1 Summary of the Appraisal of Guidelines for REsearch and Evaluation (AGREE) II assessment⁴

the clinical practice guideline *Regional anaesthesia in patients on anti-thrombotic drugs – a joint ESAIC/ESRA guideline*³ for possible endorsement. The Appraisal of Guidelines for REsearch and Evaluation (AGREE) II tool⁴ was used. Details on the endorsement process are available elsewhere.⁵

3 | RESULTS

All six SSAI CPC members completed the appraisal. The individual domain totals were: Scope and Purpose 95%; Stakeholder Involvement 56%; Rigour of Development 67%; Clarity of Presentation 79%; Applicability 43%; Editorial Independence 79%; Overall Assessment 75% (Figure 1).

The breakdown of the individual appraisers (de-identified) is available in Supporting Information Material S1.

4 | DISCUSSION

Agreement between the SSAI CPC appraisers was acceptable and the overall assessment of the guideline was good. There were issues related to stakeholder involvement and applicability, which were only covered briefly. Furthermore, the timing of post-procedural dosing of antithrombotic agents was not covered in detail, and readers need to

refer elsewhere for guidance on this.^{6,7} This likely has to do with the fact that timing of post-procedural dosing of antithrombotic agents depends on the specific type and dose of drug used, renal function and whether it is administered in combination with antiplatelet agents or not.

The guideline can be used in daily clinical practice in the Nordic countries without major adaptation or modification, noting the limitations in applicability above.

The clinical practice guideline *Regional anaesthesia in patients on antithrombotic drugs – a joint ESAIC/ESRA guideline*³ serves as a useful decision aid for Nordic anaesthesiologists providing regional anaesthesia to adult patients on antithrombotic drugs.

5 | CONCLUSION

The SSAI CPC endorses the clinical practice guideline *Regional anaesthesia in patients on antithrombotic drugs – a joint ESAIC/ESRA guideline*.³

AUTHOR CONTRIBUTION

All authors drafted, revised and approved the manuscript.

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SUPPORTING INFORMATION

Additional supporting information may be found in the online version of the article at the publisher's website.

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