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Major gastrointestinal bleeding and antithrombotics: characteristic



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Oct 27, 2016 · A recent meta-analysis of studies in patients on long-term VKA demonstrated that resumption of warfarin following interruption due to **GI bleeding** was associated with a reduction in thromboembolic events and mortality without any significant increase in **recurrent GI bleeding**. 59 In a retrospective study of patients with non-valvular AF, restarting **warfarin** after **major GI bleeding** ...

Cited by: 68 **Author:** Sigrun Halvorsen, Robert F Storey, Bian...
Publish Year: 2016

Acute Lower Gastrointestinal Bleeding: Characteristics and ...

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5755637>

Background. In recent years **major** advances have been made in the **management** of patients with acute lower **gastrointestinal bleeding**. The aim of this study was to investigate the **characteristics** and clinical outcome of patients with acute lower **gastrointestinal bleeding** (ALGIB) treated with an intensive protocol.

Cited by: 2 **Author:** Georgia Diamantopoulou, Christos Kons...
Publish Year: 2017

Examining the Risks of Major Bleeding Events in Older ...

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6538582>

Background. Real-world evidence for the safety of using **antithrombotics** in older people with multimorbidity is limited. We investigated the risks of **gastrointestinal bleeding** (**GI-bleeding**) and intracranial (**IC-bleeding**) associated with **antithrombotics** either as monotherapy, dual antiplatelet therapy (DAPT) or as triple therapy (TT) [DAPT plus anticoagulant] in older individuals aged 65 ...

Author: Prasad S. Nishtala, Prasad S. Nishtal... **Publish Year:** 2019

Restarting Antithrombotics After Gastrointestinal Bleeding ...

<https://www.acepnow.com/restarting-antithrombotics-after-gastrointestinal->



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<https://academic.oup.com/eurheartj/article/38/19/1455/2418189>

Oct 27, 2016 · Several mechanisms have been put forward to explain the relationship between major bleeding and increased mortality (Figure 1).The overlap in risk factors for bleeding and ischaemic events means that patients who are more likely to suffer from bleeding complications of antithrombotic therapy also tend to be at higher risk of thrombotic events. 16 Discontinuation of antithrombotic drugs may ...

Cited by: 72 Author: Sigrun Halvorsen, Robert F Storey, Bianca R...
Publish Year: 2016

Management of acute upper gastrointestinal bleeding | The BMJ

<https://www.bmj.com/content/364/bmj.i536>

Mar 25, 2019 · Upper gastrointestinal bleeding (UGIB) is a common medical emergency, with a reported mortality of 2-10%. Patients identified as being at very low risk of either needing an intervention or death can be managed as outpatients. For all other patients, intravenous fluids as needed for resuscitation and red cell transfusion at a hemoglobin threshold of 70-80 g/L are recommended.

Cited by: 10 Author: Adrian J Stanley, Loren Laine
Publish Year: 2019

Gastrointestinal bleeding - Symptoms and causes - Mayo Clinic

[https://www.mayoclinic.org/diseases-conditions/...](https://www.mayoclinic.org/diseases-conditions/)

Overview Symptoms Causes Prevention

Gastrointestinal (GI) bleeding is a symptom of a disorder in your digestive tract. The blood often appears in stool or vomit but isn't always visible, though it may cause the stool to look black or tarry. The level of

Gastrointestinal Bleeding

Medical condition

Gastrointestinal (GI) bleeding is a symptom of a disorder in your digestive tract. The blood often appears in stool or vomit but isn't always visible, though it may cause the stool to look black or tarry.

MayoClinic

Symptoms

Symptoms like changes in bowel habits, stool color (to black or red) and consistency and the presence of pain or tenderness may tell the doctor which area of the GI tract is affected. Because the intake of iron, bismuth or foods like beets can...

Read more on Hopkinsmedicine

Causes

GI bleeding may be due to conditions that are not serious, including:

- Anal fissure
- Hemorrhoids

GI bleeding may also be a sign of more serious diseases and conditions. These may include cancers of the GI tract such as:

- Cancer of the colon
- Cancer of the...

Major gastrointestinal bleeding and antithrombotics: characteristics, and management

Gastrointestinal bleeding and antithrombotics

Abstract

BACKGROUND

There are few reports on major gastrointestinal (GI) bleeding among patients receiving an antithrombotic.

AIM

To describe clinical characteristics, bleeding locations, management and in-hospital mortality related to these events.

METHODS

Over a three-year period, we prospectively identified 1080 consecutive adult patients admitted in two tertiary care hospitals between January 1, 2013 and December 31, 2015 for major gastrointestinal (GI) bleeding while receiving an antithrombotic. The bleeding events were medically validated. Clinical characteristics, causative lesions, management and fatalities were described. The distribution of antithrombotics prescribed was compared across the bleeding lesions identified.

RESULTS

576 patients had symptoms of upper GI bleeding and 504 symptoms of lower GI

Match Overview

1 **Crossref** 33 words
Jacques Bouget, Frédéric Balusson, Maxime Maignan, Laure Pavageau et al. "Major bleeding risk associated with oral anti

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Publish Year: 2016

Restarting Antithrombotics After Gastrointestinal Bleeding ...

<https://www.acepnow.com/restarting-antithrombotics-after-gastrointestinal-bleeding...> ▾

The team used data from Danish nationwide registries to examine the risk of all-cause mortality and admission to hospital or deaths due to thromboembolism, **major bleeding**, or recurrent **GI bleeding** associated with restarting antithrombotic treatment after a **GI bleed** in more than 3,400 patients (mean age, 77.9 years) with AF.

Management of acute upper gastrointestinal bleeding | The BMJ

<https://www.bmj.com/content/364/bmj.l536> ▾

Mar 25, 2019 · Upper **gastrointestinal bleeding** (UGIB) is a common medical emergency, with a reported mortality of 2-10%. Patients identified as being at very low risk of either needing an intervention or death can be managed as outpatients. For all other patients, intravenous fluids as needed for resuscitation and red cell transfusion at a hemoglobin threshold of 70-80 g/L are ...

Cited by: 12 **Author:** Adrian J Stanley, Loren Laine
Publish Year: 2019

Upper Gastrointestinal Bleeding in Adults: Evaluation and ...

<https://www.aafp.org/afp/2020/0301/p294.html> ▾