

PIONEER AF-PCI

The PIONEER AF-PCI evaluated 2,124 patients who had atrial fibrillation and needed percutaneous coronary intervention with stenting.

- Patients were randomized to low-dose rivaroxaban (15 mg once daily) plus a clopidogrel, ticagrelor, or prasugrel inhibitor for 12 months, very low-dose rivaroxaban (2.5 mg twice daily) plus dual antiplatelet therapy for 1, 6, or 12 months, or standard therapy with a dose-adjusted vitamin K antagonist (once daily) plus dual antiplatelet therapy for 1, 6, or 12 months. The primary safety outcome was clinically significant bleeding. Note the trial was powered based on bleeding outcomes, not thrombotic outcomes.
- Lower rates of clinically significant bleeding were found in the two groups receiving rivaroxaban than in the standard warfarin triple therapy group. No clear differences were seen in efficacy outcomes, however broad confidence intervals warrant caution in interpreting the findings.

Reference

1. Gibson CM, Mehran R, Bode C, et. al. Prevention of bleeding in patients with atrial fibrillation undergoing PCI. *N Engl J Med.* 2016;375:2423-2434.