Apixaban to reduce the risk of venous thromboembolism after hip or knee replacement surgery

This leaflet is about when apixaban should be used to reduce the risk of thromboembolism in adults who have had surgery to replace their hip or knee joints in the NHS in England and Wales. It explains guidance (advice) from NICE (the National Institute for Health and Clinical Excellence). It does not cover using apixaban to reduce the risk of venous thromboembolism in adults who have had other types of surgery. It is written for people who are having or have had an operation to replace their hip or knee joints but it may also be useful for their families or carers or for anyone with an interest in the topic.

It does not describe venous thromboembolism or the treatments in detail – a member of your healthcare team should discuss these with you. You can get more information from the organisations listed on page 4.
What has NICE said?
NICE recommends apixaban as a possible treatment to reduce the risk of venous thromboembolism in adults.

Who can have apixaban?
You should be able to have apixaban if you have had surgery to replace your hip or knee.

Why has NICE said this?
NICE looks at how well treatments work, and also at how well they work in relation to how much they cost the NHS. NICE recommended apixaban because it works better and costs less than one of the most commonly used drugs available on the NHS that is used to reduce the risk of thromboembolism.

Venous thromboembolism
When a blood clot forms in one of the deep veins in the leg, thigh, pelvis or arm it is known as deep vein thrombosis. The clot itself is not life threatening, but if it comes loose it can be carried in the blood to another part of the body where it can cause problems – this is called venous thromboembolism.

If the clot travels to the lungs it is called a pulmonary embolism and it can be fatal. Even if a blood clot does not come loose, it can still cause long-term damage to the veins leading to pain and swelling.

People having surgery to replace their hip or knee joint are at risk of venous thromboembolism because they are inactive during and after
their operation and because of damage that can be caused during surgery.

**Apixaban**

Apixaban (also known as Eliquis) is a drug that helps to prevent blood from clotting. It does this by stopping a substance called factor Xa from working. Factor Xa is necessary in the formation of blood clots.

Apixaban should be taken 12–24 hours after surgery. It should usually be continued for 10–14 days if you have had surgery to replace your knee, and for 32–38 days if you have had surgery to replace your hip, to help prevent venous thromboembolism.

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**What does this mean for me?**

When NICE recommends a treatment, the NHS must make sure it is available to those people it could help, normally within 3 months of the guidance being issued.

So, if you are having surgery to replace your hip or knee joint, and you and your doctor think that apixaban is the right treatment for you (see ‘What has NICE said?’ on page 2), you should be able to have the treatment on the NHS. Please see www.nice.org.uk/aboutguidance if you think you are eligible for the treatment but it is not available.
More information

The organisations below can provide more information and support for people having hip or knee replacement surgery. NICE is not responsible for the quality or accuracy of any information or advice provided by these organisations.

- AntiCoagulation Europe, 020 8289 6875
  [www.anticoagulationeurope.org](http://www.anticoagulationeurope.org)

- Lifeblood: The Thrombosis Charity, 01558 650222
  [www.thrombosis-charity.org.uk](http://www.thrombosis-charity.org.uk)

NHS Choices ([www.nhs.uk](http://www.nhs.uk)) may be a good place to find out more. Your local patient advice and liaison service (usually known as ‘PALS’) may be able to give you more information and support. If you live in Wales you should speak to NHS Direct Wales for information on who to contact.
About NICE

NICE produces guidance (advice) for the NHS about preventing, diagnosing and treating medical conditions. The guidance is written by independent experts, including healthcare professionals and people representing patients and carers. They consider the evidence on the condition and treatments, the views of patients and carers and the experiences of doctors, nurses and other healthcare professionals, and consider the costs involved. Staff working in the NHS are expected to follow this guidance.

To find out more about NICE, its work and how it reaches decisions, see www.nice.org.uk/aboutguidance

This document and other versions of the guidance aimed at healthcare professionals are available at http://guidance.org.uk/TA245

The NICE website has a screen reader service called Browsealoud, which allows you to listen to our guidance. Click on the Browsealoud logo on the NICE website to use this service.

We encourage NHS and voluntary organisations to use text from this document in their own information about reducing the risk of venous thromboembolism after hip or knee replacement surgery in adults.

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