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Evaluation of the PADIS score stratifying risk for venous thromboembolism recurrence after a first unprovoked pulmonary embolism: results from the REVERSE study

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This study does not support that the PADIS-PE score can safely identify patients who could stop anticoagulation after a first unprovoked PE https://bit.ly/3GOzeEl

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To the Editor:

Current guidelines suggest that most patients presenting with a first episode of an unprovoked venous thromboembolism (VTE) event be considered for indefinite anticoagulation, as long as their bleeding risk remains acceptably low [1, 2]. However, this exposes a considerable number of patients to long term anticoagulation as 70% of patients with a first unprovoked VTE will have no recurrence [3]. In 2010, a guidance from the International Society on Thrombosis and Haemostasis (ISTH) suggested that a 1-year cumulative rate of recurrent VTE after stopping anticoagulation of less than 5%, with a 95% confidence interval (CI) upper limit lower than 8%, is low enough to consider that long-term anticoagulant therapy would not be beneficial [4]. As such, efforts are ongoing to identify risk factors and scoring tools to help discriminate between subsets of patients whose risk/benefit ratio most- or least-strongly favours continued therapy.