

Anticoagulants not tied to higher risk for GI bleed in COVID-19

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patients who developed a GI bleed during hospitalization (odds ratio, 1.58).

"This study is reassuring given <u>anticoagulation</u> is being prescribed to critically ill hospitalized COVID-19 patients," the authors write.

One author disclosed financial ties to Olympus America, Pentax Medical, and Ninepoint Medical.

More information: <u>Abstract/Full Text</u> (subscription or payment may be required)

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(HealthDay)—Use of anticoagulation or antiplatelet agents is not a risk factor for gastrointestinal (GI) bleeding among hospitalized COVID-19 patients, according to a study published online Dec. 20 in the *Journal of Internal Medicine*.

Arvind J. Trindade, M.D., from the Feinstein Institutes for Medical Research at Northwell Health in Manhasset, New York, and colleagues examined risk factors associated with GI bleeding in hospitalized COVID-19 patients. The analysis included COVID-19 patients with GI bleeding who were matched (1:1) to COVID-19 patients without bleeding based on a propensity score accounting for comorbidities, demographics, GI bleeding risk factors, and length of stay.

The researchers identified 314 hospitalized COVID-19 patients with GI bleeding (3 percent). There were no identifiable risk factors associated with GI bleeding, not even the use of anticoagulation medication or antiplatelet agents. There was an increased mortality risk observed for



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