

Erratum: International Reports of Unexpected Low Plasma Concentrations of Dabigatran Suggest That More Frequent Measurements Will Add Value

Ruth L. Savage, MBBS, MSc (Clin Pharmacol)^{1,2,3} Marilina Castellano, MPharm¹
Michael V. Tatley, MBChB, FFCH(SA), FAFPHM, FNZCPHM, BBusSci (Hon)²

¹ WHO Collaborating Centre for International Drug Monitoring, Uppsala Monitoring Centre, Uppsala, Sweden

² Department of Preventive and Social Medicine, New Zealand Pharmacovigilance Centre, University of Otago, Dunedin, New Zealand

³ Department of General Practice, University of Otago, Christchurch, New Zealand

Address for correspondence Ruth L. Savage, MBBS, MSc (Clin Pharmacol), Centre for Adverse Reactions Monitoring (CARM), New Zealand Pharmacovigilance Centre, Department Preventive and Social Medicine, University of Otago, PO Box 913, Dunedin, New Zealand (e-mail: ruth.savage@otago.ac.nz).

Semin Thromb Hemost 2017;43:806–808.

ERRATUM

It has been brought to the publisher's attention that the reference citations in ► **Table 1** were incorrect in the above article in *Seminars in Thrombosis and Hemostasis*, Volume 43, Number 6, 2017 (DOI: 10.1055/s-0037-1603361).

The references cited in the table are provided below. The correct table appears on the next page.

- 5 Breuer L, Ringwald J, Schwab S, Köhrmann M. Ischemic stroke in an obese patient receiving dabigatran [letter]. *N Engl J Med* 2013;368(25):2440–2442
- 6 Douros A, Schlemm L, Bolbrinker J, Ebinger M, Kreutz R. Insufficient anticoagulation with dabigatran in a patient with short bowel syndrome [letter]. *Thromb Haemost* 2014;112(02):419–420
- 7 Sargento-Freitas J, Silva F, Pego J, Duque C, Cordeiro G, Cunha L. Cardioembolic stroke in a patient taking dabigatran etexilate: the first case report of clinical and pharmacologic resistance [letter]. *J Neurol Sci* 2014;346(1–2):348–349
- 8 Lee D, DeFilipp Z, Judson K, Kennedy M. Subtherapeutic anticoagulation with dabigatran following Roux-en-Y bypass surgery [letter]. *J Cardiol Cases* 2013;8:e49–e50

Table 1 Published reports for dabigatran and below expected within therapy (or unexpectedly low) plasma concentrations

Patient number	Sex/ Age	Dose (mg)	Duration of dabigatran use	Time to concentration measurement	Indication	Concomitant drugs	Thrombotic, ischemic or embolic events	Dabigatran concentration method	Dabigatran concentration	aPTT	Comments and other potential contributors
1. Breuer et al, 2013 ⁵	M/48	150 mg bd	~31 d	28 and 31 d	AF paroxysmal	Omeprazole	Cerebral infarction, embolic	Hemoclot	Trough not de- tectable day of stroke, 10 h post dose After witnessed intake for 3 d, peak 50 ng/mL at 4 h	Not reported	Weight 153 kg, BMI 44.7, creatinine clearance 163 mL/min.
2. Douros et al, 2014 ⁶	F/81	110 mg bd	Not stated	3 mo	AF	Pantoprazole Lercanidipine Clonidine Metoprolol Triamterene Hydrochlorothiazide Furosemide Isosorbide mononitrate	Dysarthria, facial palsy with AF, pre- sumed diagnosis of cardioembolic stroke of cerebral artery	Hemoclot	Peak and trough concentrations, 2 and 12 h after witnessed ad- ministration, 31 and 21 ng/mL	Normal at dabigatran trough	Short-gut syndrome following surgery for embolic mesenteric ischemia SNPs affecting liver carboxyles- terase and P-glycoprotein GFR (37–43 mL/min).
3. Sargento-Freitas et al, 2014 ⁷	F/70	110 mg bd	31 d	31 d	AF, acute ischemic stroke, occlusion term- inal segment right internal carotid artery	Lorazepam Mirtazapine Furosemide Fluoxetine Simvastatin Bisoprolol Ramipril Digoxin Omeprazole	None	Hemoclot	Peak concentra- tions after con- firmed intake (ng/mL): 1) 40.6 at 31 d, 110 mg bd 2) 41.9 at 5 d, 150 mg bd 3) 45.0 at 7 d, 150 mg bd, interacting medicines stopped.	Normal 7 h after dose in hospital, and at each point when dabigatran concentrations measured.	Creatinine clear- ance 65 mL/min
4. Lee et al, 2013 ⁸	F/67	Dose not stated	9 mo	9 mo	AF	Pantoprazole	None	Not stated	Trough concentration 21 ng/mL	Not measured	Roux-en-Y gastric bypass.

Abbreviations: aPTT, activated partial thromboplastin time; AF, atrial fibrillation; bd, twice a day; BMI, body mass index; GFR, glomerular filtration rate; SNP, single nucleotide polymorphism.