



*Better health through
laboratory medicine.*

PEARLS OF LABORATORY MEDICINE

II. Direct Oral Anticoagulants (DOACs): Laboratory Methods for Assessing Dabigatran

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DOI: 10.15428/CCTC.2020.323790



This session is a combined effort between the American Association for Clinical Chemistry (AACC) and the North American Specialized Coagulation Laboratory Association (NASCOLA)



Simplified Definition of Terms

Venous thromboembolism (VTE): clots within the deep venous system, also known as deep vein thrombosis (DVT) or pulmonary embolism (PE)

Pharmacokinetics (PK): drug concentration after administration

Pharmacodynamics (PD): the drug effect after administration

Peak levels: the maximum drug concentration after drug administration

Trough levels: the drug level just before the next drug dose

On-therapy range – reflecting the range of expected drug levels from lowest trough to highest peak for a given dose and indication



Dabigatran (Pradaxa)¹

Dabigatran etexilate: Pradaxa (Boehringer Ingelheim) is prodrug that converts to active dabigatran which is an oral direct thrombin inhibitor, immediate acting

Binds free and bound thrombin (factor IIa)

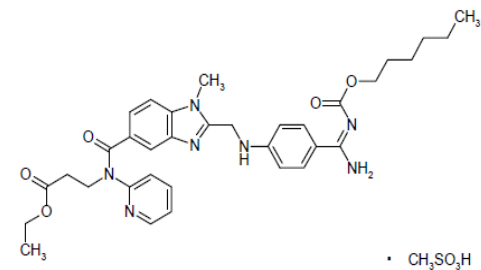
Bioavailability: ~ 3 – 7%

80% renally excreted

Peak concentration: 1.5 – 3.0 hrs after ingestion

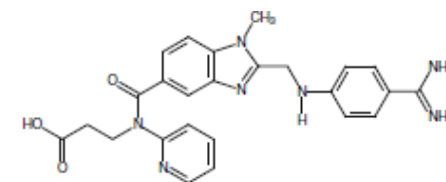
Half-life: ~13 hours

Dabigatran etexilate (BIBR 1048)



Hydrolysis

Dabigatran (BIBR 953)

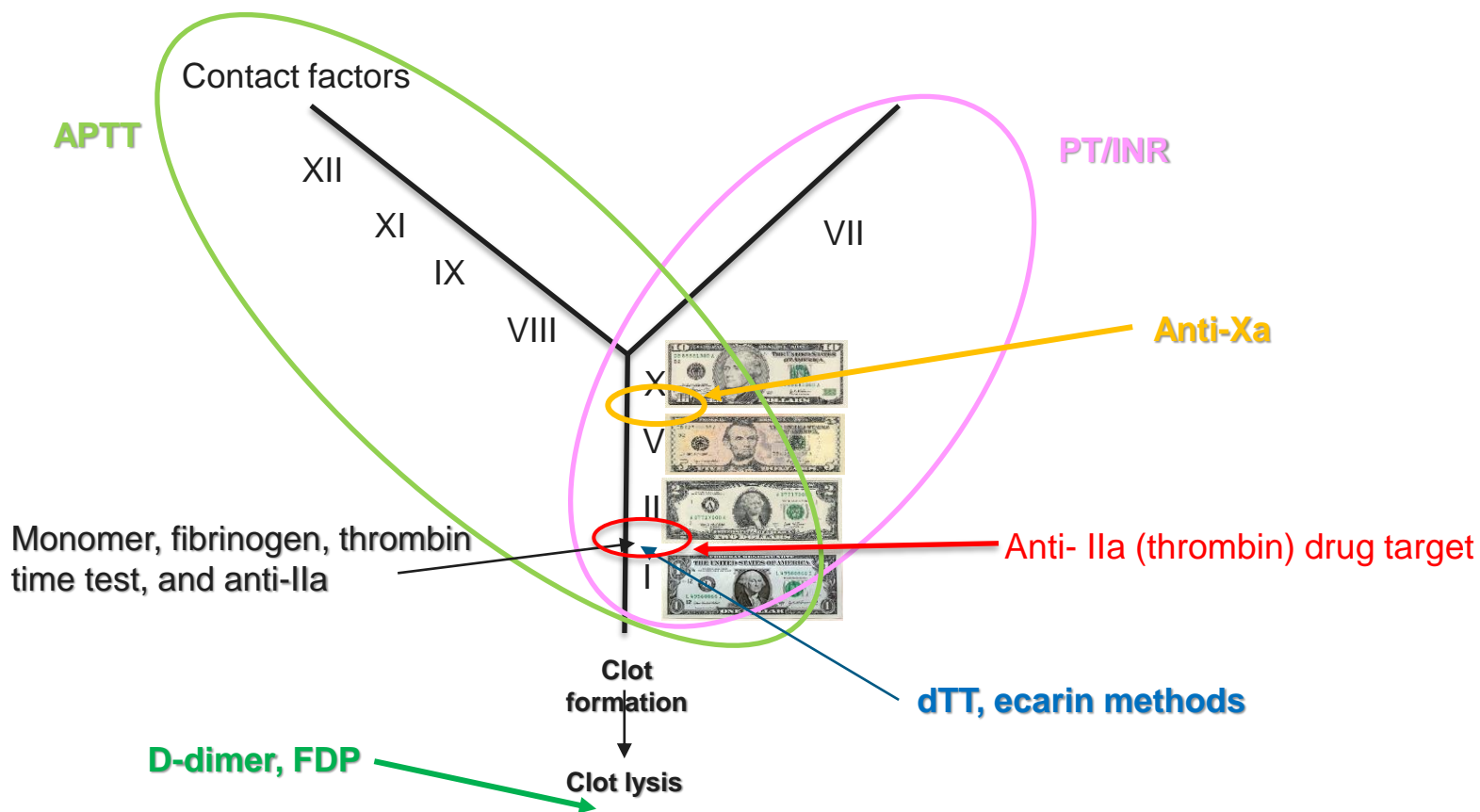


Expected Dabigatran levels (PK)^{2,3}

	Stroke prevention in NVAf	Treatment of DVT/PE	VTE Prophylaxis after knee/hip surgery
Dose	150mg bid	150mg bid	110mg 1 st day, then 220mg qd
Mean Peak, ng/mL (25 th – 75 th percentile)	175 (117 – 275)	175 (117 – 275)	71 (35 – 162)
Mean Trough, ng/mL (25 th – 75 th percentile)	91 (61 – 143)	60 (39 – 95)	22 (13 – 35)



Targets for anticoagulation and laboratory testing



Dabigatran PD effect on PT and APTT⁴

Unreliable to quantify, monitor, or exclude drug presence

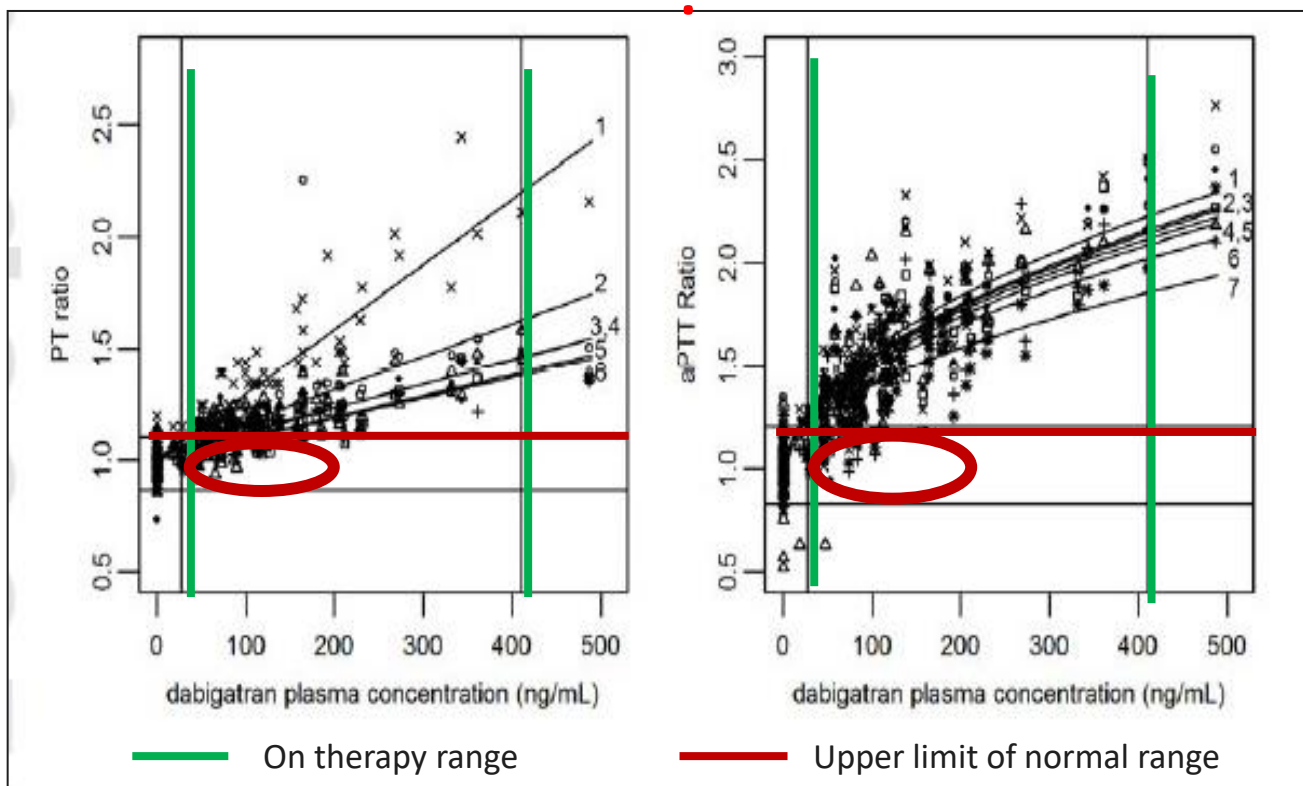


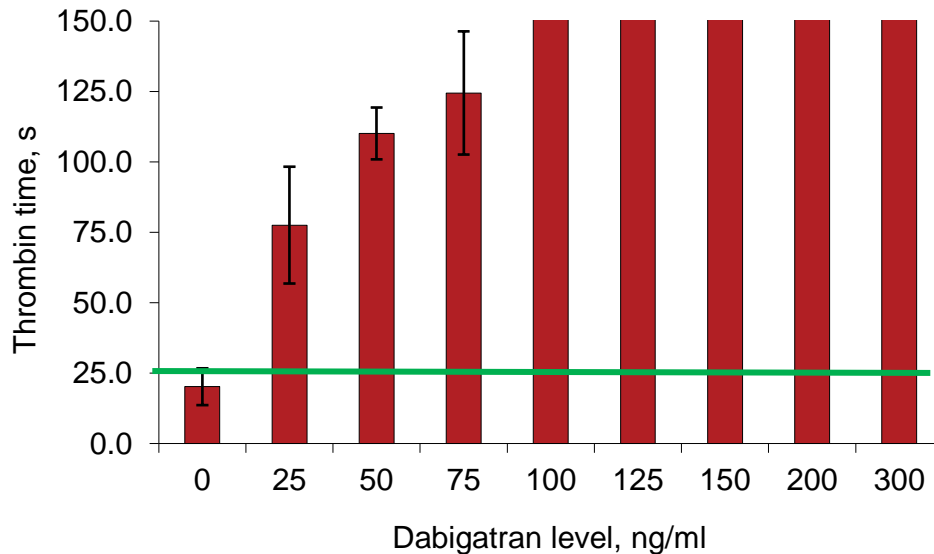
Figure modified from reference 4



Dabigatran – Thrombin Time (TT) Response^{4,5}

Neat or slightly diluted plasma + Thrombin (~2NIH U/mL) \longrightarrow TT (s)

Modified from reference #5



Exquisitely sensitive to dabigatran presence:

- Not suitable for quantifying
- Normal TT essentially excludes dabigatran



Methods for Quantifying Dabigatran



PK: Mass spectrometry^{3,6,7}

Gold standard method²

LLOQ between 1-3ng/mL

Reportable range: 5 – 500ng/mL

Within assay precision: <6%

Between assay precision: <10%

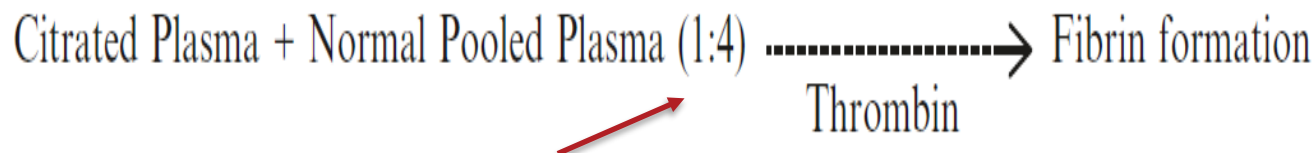
Requires internal standard

Report functional metabolites



PK: Dilute Thrombin Time^{3,6,7}

Citrated Plasma + Normal Pooled Plasma (1:4) $\xrightarrow{\text{Thrombin}}$ Fibrin formation



1:2 for lower dabigatran levels
1:8 for higher dabigatran levels

LLOQ: <40ng/mL; with lower dilution <10ng/mL

Within run precision:<10%

Between run precision reported as high as 30%



Ecarin methods^{3,6,7}

Ecarin, a metalloprotease from the venom of *Echis carinatus* (saw-scaled viper) converts prothrombin to meizothrombin

Meizothrombin is a potent thrombin intermediate that can be inhibited by dabigatran or other direct thrombin inhibitors (e.g. bivalirudin), but not by heparin

Classic ecarin method is clot based (ECT) and influenced (prolonged clotting time) by low factor II and fibrinogen levels
Chromogenic ecarin assay available (ECA)

Within run precision <5%; between run precision: 6 - 16%^{3,6}
LLOQ: reported between 14 – 46ng/mL^{3,6}



PK: Ecarin Clotting Time (ECT)^{3,6,7}

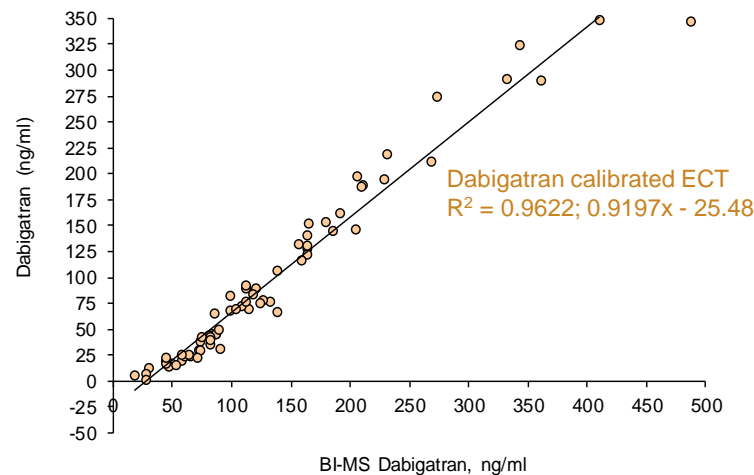
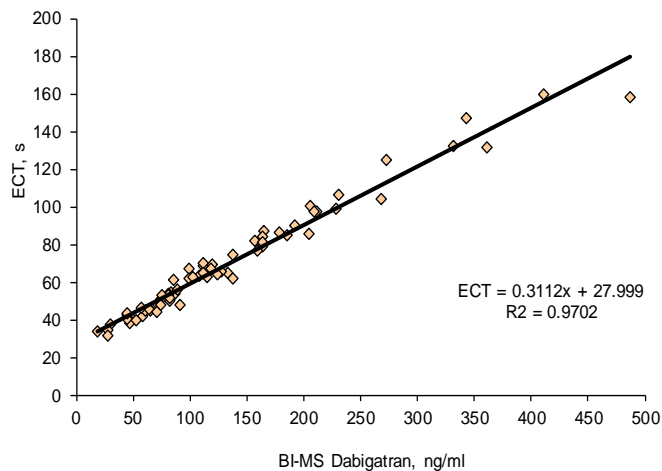
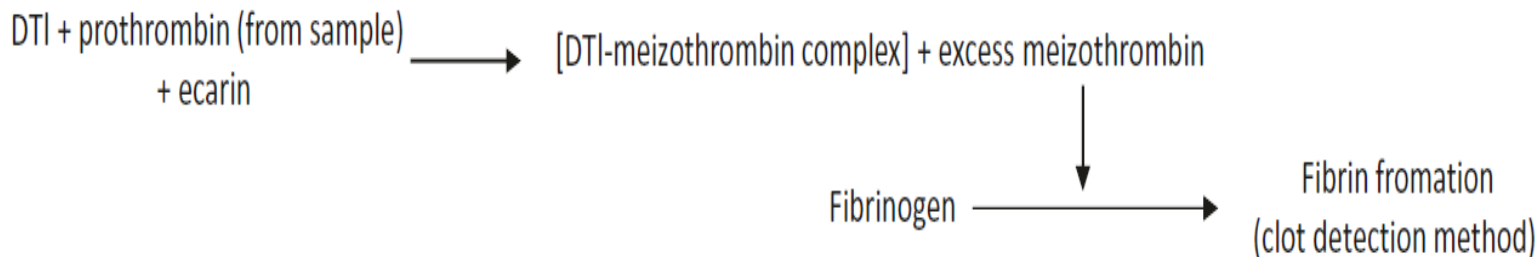


Figure modified from reference 7



PK: Chromogenic Ecarin Assay (ECA)^{3,6,7}

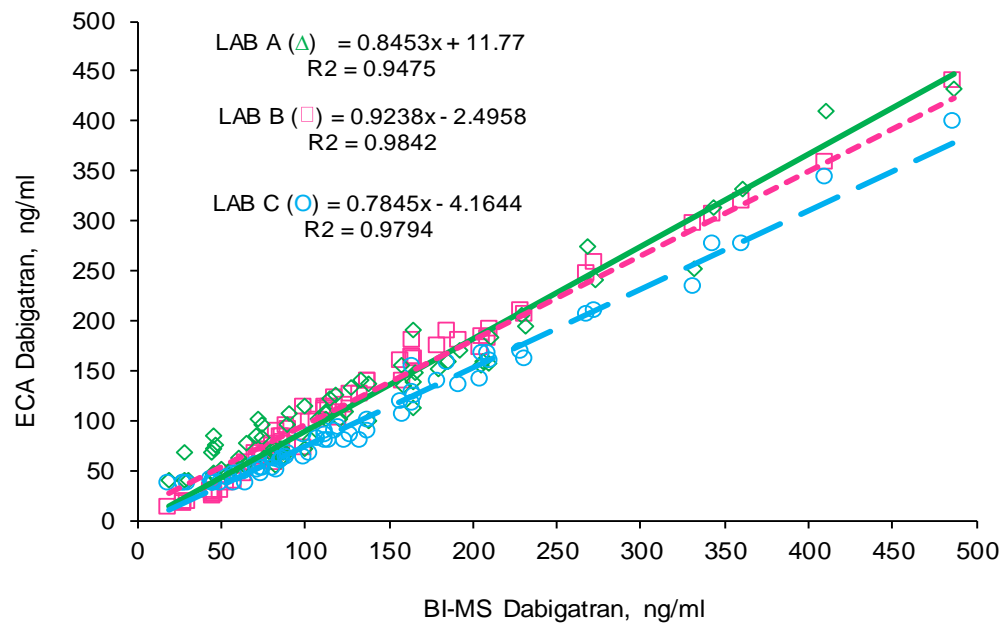
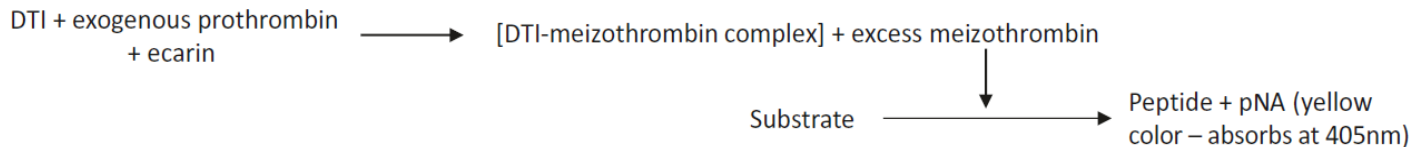
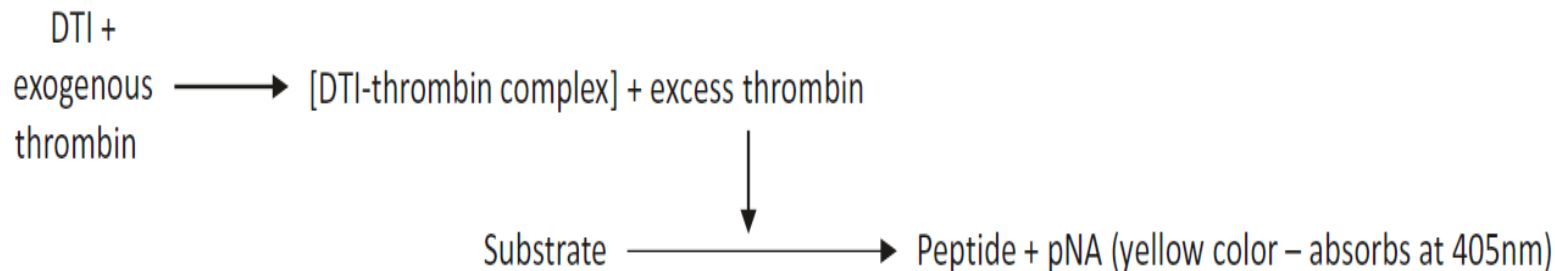


Figure modified from reference 7



PK: Chromogenic Ila Method^{6,8-10}



Measurement range⁸:

Dabi low: 0 – 120ng/mL

Dabi high: 50 – 500ng/mL

Within run precision⁸: <2.2%

Between run precision⁸: <5.3%



Summary: Laboratory assessment of dabigatran anticoagulation

- Screening tests such as PT and APTT are insufficient for assessing dabigatran anticoagulation
- A normal thrombin time virtually excludes dabigatran presence
- Mass spectrometry methods are considered the gold standard for measuring dabigatran
- Alternative quantitative methods have been demonstrated to be equivalent to mass spectrometry including the drug calibrated dilute thrombin time, ecarin clotting time, ecarin chromogenic assays. More data is required for chromogenic anti-IIa methods
- Alternative methods for quantifying dabigatran can be adapted to open-system (programmable) automated coagulation analyzers
 - However, there are no FDA approved methods



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Disclosures/Potential Conflicts of Interest

Upon Pearl submission, the presenters completed the Clinical Chemistry disclosure form. Disclosures and/or potential conflicts of interest:

- **Employment or Leadership:** No disclosures
- **Consultant or Advisory Role:** *Dr. Gosselin:* Consultant for Diagnostic Grifols and UniQure, and advisory board member for BioMarin.
- **Stock Ownership:** No disclosures
- **Honoraria:** *Dr. Adcock:* Siemens Healthcare Diagnostics
Dr. Gosselin: Siemens Healthcare Diagnostics, Machaon Laboratories, and Diagnostica Stago
- **Research Funding:** No disclosures
- **Expert Testimony:** *Dr. Gosselin:* Dabigatran and Rivaroxaban testing
- **Patents:** No disclosures



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