

MHealth/UMMC Summary of Antiplatelet Management in Cases of Severe Bleeding or Need for Emergent Surgery

***There are no specific reversal agents for antiplatelet agents.

Benefits of stopping or reversing these medications must be weighed against risks of thrombosis, particularly in patients with recent cardiac/carotid stenting or stroke

Treatment of bleeding involves general hemostatic measures, discontinuation of antiplatelet medications, and on rare occasion the use of DDAVP or platelet transfusion.

Routine platelet transfusion for TBI patients on PTA antiplatelet agents is **NOT** indicated

Drug	Half Life	Management	Comments
Aspirin	15-30 minutes 5-10 days for platelet recovery	Hold medication Consider transfusion of 1 U platelets Consider DDAVP 0.3 mcg/kg x 1	Antiplatelet effects begin within one hour of dose and persist for 5+ days after stopping therapy
Clopidogrel (Plavix)	8 hours ~ 5 days for platelet recovery	Hold medication Consider transfusion of 2 U platelets Consider DDAVP 0.3 mcg/kg x 1	More rapid inhibition of platelet function is achieved with loading doses; Effects last up to 10 days after stopping therapy
Prasugrel (Effient)	7 hours ≤7 days for platelet recovery	Hold medication Consider transfusion of 2 U platelets Consider DDAVP 0.3 mcg/kg x 1	Antiplatelet effect lasts 5-7 days after stopping therapy
Ticagrelor (Brillinta)	~ 9 hours 3 days for platelet recovery	Hold medication Consider transfusion of 2 U platelets Consider DDAVP 0.3 mcg/kg x 1	Antiplatelet effects are decreased to ~30% activity after 2.5 days
Gp IIb-IIIa Eptifibatide (Integrilin) Abciximab (Reopro) Tirofiban (Aggrastat)	30-120 minutes	Stop infusion	Given short half-life, platelet transfusion is general not warranted