

Review Form 1.6

Journal Name:	Journal of Pharmaceutical Research International
Manuscript Number:	Ms_JPRI_79818
Title of the Manuscript:	A recent update on Oral Anticoagulants
Type of the Article	Review Article

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound. To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

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PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments		
Minor REVISION comments	<p style="text-align: center;">My review</p> <p style="text-align: center;"><i>A recent update on Oral Anticoagulants</i></p> <p>Oral anticoagulants (so-called vitamin K antagonists) significantly reduce the risk of thrombosis recurrence and the incidence of embolic complications in people with paroxysmal atrial fibrillation and after implantation of artificial heart valves. Anticoagulants produce a sudden reduction of about 50% in the frequency of strokes and prevent clots from forming where needed and can cause bleeding.</p> <p>Oral anticoagulants which are not vitamin K antagonists or originally called new oral anticoagulants, now referred to as direct oral anticoagulants are the better alternative to a vitamin K antagonist. By convention, oral anticoagulants are warfarin-like drugs that act by interfering with the synthesis of a clotting factor.</p> <p>The new generation of oral anticoagulants, originally referred to as NOAC (<i>novel oral anticoagulants</i>), or new oral anticoagulants, are now represented by four substances - dabigatran, rivaroxaban, apixaban and edoxaban.</p> <p>Since the introduction of warfarin into therapy (1954), vitamin K antagonists (VKA) have become the staple oral anticoagulants (despite numerous practical problems).</p> <p>The most important of these are the need for individual dose selection and monitoring of the desired potency by laboratory assessment of prothrombin time (PT), long and unpredictable duration of action after the last dose, no antidote to rapidly reverse the anticoagulant effect, multiple drug and food interactions, and variation in the anticoagulant effect over time.</p> <p>Remember, new oral anticoagulants (NOACs) are currently the drugs of choice for people with atrial fibrillation (a type of heart arrhythmia - AF). They are not indicated in patients with moderate or severe stenosis (aortic valve stenosis, stenosis of the left arterial outlet) and with artificial heart valves. It is currently estimated that 93 percent of AF patients are candidates for NOAC treatment.</p> <p>Direct thrombin inhibitors and direct factor Xa inhibitors act at key sites in the coagulation cascade. These drugs inactivated both the circulation and the activated clotting factor (bound to the clot and did not produce anti-platelet antibodies). These measures are considered to have less need for monitoring and evaluation. Compared to traditional anticoagulants, patient adherence is better, treatment is easier, and thromboprophylaxis is better.</p> <p>Remember, however, DOACs-<i>Direct Oral Anticoagulants</i> are expensive and have a limited half-life. Depending on creatinine clearance (the most easily obtained parameter to estimate glomerular filtration rate), doses should be reduced or avoided in patients with impaired renal function. When changing anticoagulants, the goal is to maintain stable anticoagulation.</p> <p>In conclusion, I state that the reviewed work <i>A recent update on Oral Anticoagulants</i> is written "a bit" chaotically, scientific information should be systematized so that the knowledge provided explains the latest results of research and their possibility of practical application of safe anticoagulants.</p> <p>In the opinion of the reviewer, manuscript titled <i>A recent update on Oral Anticoagulants</i>, after a particularly careful linguistic revision of the text and emphasizing the importance of research/work on new generation anticoagulants - NOAC, as well as indications and contraindications for oral anticoagulants, is ready for printing.</p> <p>However, remember, it is believed that the new generation of anticoagulants -</p>	

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	NOACs, which are oral antagonists of thrombin or active factor X, are the preferred choice in the prevention of cardiovascular and deep vein thrombosi /pulmonary embolism.	
Optional/General comments		

PART 2:

	Reviewer's comment	Author's comment <i>(if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
Are there ethical issues in this manuscript?	<i>(If yes, Kindly please write down the ethical issues here in details)</i>	

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