Letter to the Editors

Response from John Posner, author of commentary

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Is the dose of dabigatran really more predictable than warfarin [1]?

Daniel F. B. Wright, Hesham S. Al-Sallami & Stephen B. Duffull

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Wright *et al.* wonder whether dabigatran will ultimately prove to be different from warfarin in terms of the need to individualize dosage and monitor anticoagulation. Certainly, there are a number of important factors that contribute to variability, but I do not think the population analyses are the most appropriate way to look at this. While dosage requirements may vary considerably between patients, what matters to the patient is the intra-individual variability. Unfortunately, as the result of the claim that monitoring is not required, we do not have sufficient information to make firm statements about this at present, in terms of either pharmacokinetics or a pharmacodynamic test of coagulation. We agree that all anticoagulants will have a low therapeutic index and should be monitored. I think the intra-individual variability and hence intensity of monitoring required for safe use of dabigatran remain to be established.

Competing Interests

The author has completed the Unified Competing Interest form at http://www.icmje.org/coi_disclosure.pdf (available on request from the corresponding author) and declares:

no support from any organisation for the submitted work, no financial relationships with any organisations that might have an interest in the submitted work in the previous 3 years and no other relationships or activities that could appear to have influenced the submitted work.

REFERENCE

- 1 Wright DF, Al-Sallami HS, Duffull SB. Is the dose of dabigatran really more predictable than warfarin? *Br J Clin Pharmacol* 2013; 76: 997–8.

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