



Own procedure for endoscopy while taking anticoagulant medication

There are various recommendations for endoscopies while taking anticoagulant medication.

My own procedure is to take biopsies and remove small polyps (< 5mm) even in patients who are therapeutically anticoagulated and patients who are taking Aspirin cardio, Tiatral or Plavix. When taking a 2-drug combination (e.g. Tiatral and Plavix), I decide on a case-by-case basis. For endoscopic resection of large polyps, anticoagulation must be temporarily discontinued.

Since advanced colorectal neoplasms are present in only 8-9% of a screening population, i.e. are relatively rare, I recommend leaving the intake of anticoagulant medication before a first screening colonoscopy, since ultimately only in a few situations can the intervention not be carried out immediately.

For special endoscopic interventions such as dilatations, ligations, PEG tube insertions and also liver biopsies, the medication must be suspended before the intervention. Usually, such interventions take place electively after a prior discussion with the patient, so that the existing medication can be left in place for the time being.

The routine determination of Quick/INR and platelets is not necessary, this is limited to individual situations, which in turn can usually be planned and about which I will inform you in advance.

If current coagulation values are available, I am nevertheless happy if you also inform me of these during regular endoscopies at the time of registration.