

## Reply: Pulmonary thromboembolism in an emergency hospital: Are our patients different?

PETROS IOANNOU

Department of Internal Medicine, University Hospital of Heraklion, Heraklion, Crete, Greece

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In their recent work published in the Romanian Journal of Internal Medicine, Balahura *et al.* reviewed the cases of pulmonary embolism (PE) diagnosed in an emergency hospital in Bucharest during a 3 year period from January 2014 to December 2016 [1]. Among their observations was that novel oral anticoagulants (NOACs) were administered in 26.3% of patients diagnosed with PE, while vitamin K antagonists (VKA) were administered in 71.7% of them [1]. The authors state that their study was performed at a time when NOACs were just becoming available in the hospitals of Romania, and they imply that more patients with PE could be treated nowadays with NOACs. However, in other studies from countries

where NOACs had been available for a longer time, like in the USA [2] and in Western Europe [3], there are shown similar percentages of patients treated with NOACs for PE [2, 3], that actually do not exceed 30% of the patients treated. This implies that the numbers noted by Balahura *et al.* are actually showing an unambiguous truth about NOAC use in PE; there is an underlying hesitance to use these new medications even though they are supported by large trials that demonstrate their effectiveness and safety in this patient population [4-8].

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**Correspondence to:** Petros Ioannou MD, MSc, PhD, Department of Internal Medicine, University Hospital of Heraklion, Stavrakia and Voutes, Heraklion, Crete, Greece, PC 71500, Tel.: (+30)2810392728; Fax: (+30)2810392359  
E-mail: petros\_io@hotmail.com

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