



### **About the DIVERSITY study, Ablisetti M et al**

Open-label, randomised, multicentre, Phase IIb/III trial evaluated the efficacy and safety of dabigatran vs SOC (low molecular weight heparin or vitamin K antagonist) in children aged from birth to <18 years old with acute VTE requiring anticoagulation therapy for 3 months.

The combined efficacy endpoint was the proportion of children with recurrent VTE, VTE-related death, and thrombus resolution. The secondary endpoints included safety as determined by bleeding events, and pharmacokinetic/pharmacodynamic relationships.

The results from the DIVERSITY trial demonstrated that dabigatran was non-inferior to SOC for paediatric patients at high risk of VTE, with comparable bleeding rates.

### **About the secondary VTE prevention study, Brandao L et al.**

Open-label, single-arm, prospective cohort, Phase III trial is the first study of its kind to describe outcomes in children treated with a direct oral anticoagulant for secondary VTE prevention. In the study, approximately 200 children received dabigatran for up to 12 months. The primary endpoints for this study included VTE recurrence, bleeding events, and mortality at 6 and 12 months.

The study showed a low overall frequency of recurrent VTEs and any major bleeding events. Based on these results, the authors concluded that this trial showed “favourable safety results” with dabigatran in children with VTE and persistent thrombosis risk factors.