

Table 1. Treatment of CAT: Update of randomized clinical trials.

Study	Number of patients	Drug, dose and duration	Primary endpoint	Recurrent VTE	Major bleeding and other bleedings	Mortality and other endpoints
CATCH trial ⁷	900	Tinzaparin 175 IU/24 h vs warfarin at a dose adjusted to maintain the INR within the therapeutic range (2.0-3.0) for a total of 6 months	Recurrent VTE	7.2% vs. 10.5%, HR 0.65 (95% IC 0.41-1.03); p = 0.07	Major bleeding 2.7 vs. 2.4%, HR 0.89 (95% CI, 0.40-1.99); p = 0.77 CRNMB 10.9 vs. 15.3% HR 0.58 (95% CI 0.40-0.84); p = 0.004	33.4 vs. 30.6%, HR 1.08 (95% CI, 0.85-1.36); p = 0.54
HOKUSAI ⁶ Cancer VTE trial	1,050	Edoxaban 30-60 mg vs dalteparin (CLOT regimen) 6-12 months	Composite of recurrent VTE or major bleeding during the 12 months after randomization regardless of treatment duration *Primary endpoint results edoxaban 12.8% vs. dalteparin 13.5%, HR 0.97, 95% CI 0.70-1.36; p = 0.006 for noninferiority	7.9 vs. 11.3%, HR 0.71 (95% CI 0.48-1.06); p = 0.09 6 months analysis 6.5 vs. 8.8%, HR 0.75 (95% CI 0.48-1.17); p = 0.21	Major bleeding 6.9 vs. 4.0%, HR 1.7 (95% CI 1.03-3.04); p = 0.04 CRNMB 14.6 vs. 11.1% HR 1.38 (95% CI 0.98-1.94); p = NR Major bleeding & CRNMB 18.6 vs. 13.9% HR 1.40 (95% CI 1.03-1.89); p = NR 6 months analysis major bleeding 5.6 vs. 3.2%, HR 1.74 (95% CI 0.95-3.18); p = 0.07	39.5 vs 36.6%, HR 1.12 (95% CI 0.92-1.37); p = NR 6 months analysis 26.8 vs. 24.2%, HR 1.14, (95% CI 0.90-1.45); p = NR EFS 55.0 vs. 56.5% HR 0.93 (95% CI 0.77-1.11), p = NR
SELECT-D trial ³ (pilot study)	406	Rivaroxaban 15 mg twice daily for 3 weeks, then 20 mg once daily vs dalteparin (CLOT regimen) for a total of 6 months	Recurrent VTE	4 vs.11%, HR 0.43 (95% CI 0.19-0.99); p = NR	Major bleeding 6 vs. 4% HR 1.83 (95% CI 0.68-4.96); p = NR CRNMB 13 vs. 4% HR 3.76 (95% CI 1.63-8.69); p = NR	25 vs 30%, p = NR

ADAM trial ⁵	300	Apixaban 10 mg twice daily for seven days followed by 5 mg twice daily for six months vs dalteparin (CLOT regimen) for a total of 6 months	Major bleeding	0.7 vs. 6.3%, HR 0.099 (95% CI 0.013-0.780); p = 0.0281	Major bleeding 0.0% vs. 1.4% HR not estimable; p = 0.138 Major bleeding & CRNMB 6.0 vs. 6.0%, HR 0.931 (95% CI 0.43-2.02); p = 0.88	16 vs. 11%, HR 1.40, 95% CI 0.82-2.43; p = 0.3078
CARAVAGGIO ⁴	1,168	Apixaban 10 mg twice daily for seven days followed by 5 mg twice daily for six months vs dalteparin (CLOT regimen) for a total of 6 months	Objectively confirmed recurrent VTE (blinded central outcome adjudication)	5.6 vs. 7.9%, HR 0.63 (95% CI 0.37-0.1.07); <0.001 for non-inferiority; 0.09 for superiority	Major bleeding 3.8 vs. 4% HR 0.82 (95% CI 0.40-1.60); p = 0.60 CRNMB 9.0 vs. 6.0% HR 1.42 (95% CI 0.88-2.30); p = NR Major bleeding & CRNMB 12.2 vs. 9.7% HR 1.16 (95% CI 0.77-1.75); p = NR	23.4 vs. 26.4%, HR 0.82 (95% CI 0.62-1.09); p = NR EFS 73.3 vs. 68.6% HR 1.36 (95% CI 1.05-1.76), p = NR

CRNMB: Clinically relevant nonmajor bleeding, EFS: Event free survival; INR: international normalized ratio, NR: not reported.

CLOT regimen: subcutaneous dalteparin at a dose of 200 IU per kilogram of body weight once daily for 1 month followed by dalteparin at a dose of 150 IU per kilogram once daily.