**DOAC IN CANCER PATIENTS: VENOUS THROMBOEMBOLISM AND ATRIAL FIBRILLATION**

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Venous thromboembolism (VTE) is particularly common in cancer patients. Among all patients with VTE, 20% have underlying active malignancy. VTE may be the presenting sign of an occult malignancy and 10% of patients with idiopathic VTE develop cancer within 2 years. Among hospitalized cancer patients, the cumulative incidence of deep venous thrombosis (DVT) has been reported at 4.6%. On the other hand, up to 50% of cancer patients were found to have evidence of DVT at autopsy. Compared to controls, patients with cancer have a higher risk of first and recurrent VTE, as well as bleeding on anticoagulants. Until now, the gold standard of the treatment is low molecular weight heparin, but the results of the trials ongoing and a better understanding of bleeding risks related to DOACs’ pharmacodynamic interaction with chemotherapy and a better evidence of clinical safety will be available, would let us to change the therapeutic approach to this pathology. The data of safety of DOACs in cancer patients will let the clinicians to expand their use also in atrial fibrillation.