Table W1 Hepatotoxicity of ximelagatran*

Studies	Patients	Ximelagatran	Control	Duration of treatment	Definition of hepatotoxicity	Event rates	
						Ximelagatran	Control
SPORTIF II[1]	NVAF	20/40/60 mg twice daily	Warfarin INR 2.5	3 mo	ALT >3 × n	4.3%	0%
ESTEEM[2]	Post MI	24-60 mg twice daily + aspirin	Aspirin, 160 mg once daily	6 mo	ALT >5 × n	7.0%	1.0%
THRIVE III[3]	DVT	24 mg twice daily	Placebo	16.8 mo	ALT >3 × n	6.4%	1.2%
SPORTIF III	NVAF	36 mg twice daily	Warfarin INR 2.5	17.4 mo	ALT >3 × n	6.0%	1.0%

*ALT = alanine aminotransferase; DVT = deep venous thrombosis; MI = myocardial infarction; NVAF = nonvalvular atrial fibrillation; 3 × n = 3 times the upper limit of normal.

1 Petersen P, Grind M, Adler J**.** Ximelagatran versus warfarin for stroke prevention in patients with nonvalvular atrial fibrillation. SPORTIF II: a dose-guiding, tolerability, and safety study. *J Am Coll Cardiol* 2003;**41**:1445–51.
2 Wallentin L, Wilcox RG, Weaver WD, *et al***.** Oral ximelagatran for secondary prophylaxis after myocardial infarction: the ESTEEM randomized controlled trial. *Lancet* 2003;**362**:789–97.
3 Schulman S, Wahlander K, Lundstrom T**,** *et al.* Secondary prevention of venous thromboembolism with the oral direct thrombin inhibitor ximelagatran. *N Engl J Med* 2003;**349**:1762–4.