

Case report	Nery <i>et al.</i> (2017) Efficacy and safety of direct-acting oral anticoagulants use in acute portal vein thrombosis unrelated to cirrhosis	Martinez <i>et al.</i> (2014) Treatment of acute portal vein thrombosis by non-traditional anticoagulation	Pannach <i>et al.</i> (2013) Successful treatment of acute portal vein thrombosis with rivaroxaban	Lenz <i>et al.</i> (2014) Successful treatment of partial portal vein thrombosis with low dose rivaroxaban	Yang <i>et al.</i> (2016) Recurrent acute portal vein thrombosis in liver cirrhosis treated by rivaroxaban	Ponziani <i>et al.</i> (2017) Portal vein thrombosis occurrence in a cirrhotic patient during treatment with rivaroxaban
Patient features	<ul style="list-style-type: none"> • 28-year-old female • Smoker (5 pack years) • Takes oral contraceptive • Cirrhotic • Child Pugh A • Acute PVT linked to heterozygosity of factor V-Leiden 	<ul style="list-style-type: none"> • 50-year-old white male • Extreme obesity, hypertension, type 2 diabetes and obstructive sleep apnoea • Cirrhotic – non-alcoholic steatohepatitis • Child Pugh A • CT shows PVT & MVT 	<ul style="list-style-type: none"> • 56-year-old male • History of haemochromatosis (over 20 years) • Non-cirrhotic • Abdominal duplex ultrasound found extensive acute PVT 	<ul style="list-style-type: none"> • 63-year-old-female • No previous thromboembolic event • Cirrhotic • Child Pugh A • CT aided diagnosis of partial PVT 	<ul style="list-style-type: none"> • 63-year-old-female • Cirrhotic • Child Pugh A • Recurrent PVT following treatment with three months of warfarin 	<ul style="list-style-type: none"> • 81-year-old female • History of atrial fibrillation and takes rivaroxaban 20mg daily • Cirrhotic • Child Pugh B • PVT diagnosed despite anticoagulation with DOAC
Initial treatment	Enoxaparin 1mg/kg s/c twice daily for 2 days then switched to DOAC	Unfractionated heparin intravenously No documentation when switched to DOAC	Started directly on DOAC	Started directly on DOAC	Enoxaparin 1mg/kg s/c and switched to warfarin for 3 months – resulted in recurrence. Then switched to DOAC	Drug history included rivaroxaban 20mg once daily Patient switched to LMWH
DOAC & dose	Rivaroxaban 15mg twice daily for 3 weeks and then 20mg daily	Rivaroxaban 20mg daily	Rivaroxaban 20mg daily	Rivaroxaban 10mg daily	Rivaroxaban 15mg twice daily for 3 weeks then, 20mg daily	-
Treatment duration	Greater than 6 months (continued anticoagulation)	6 months	Greater than 4 weeks	5 months	6 months	-
Response	After 1 month, CT scan showed complete recanalisation achieved in left branch and partial recanalisation in right branch. No extension of thrombus.	Complete resolution of the clot. No recurrence or adverse effects reported in follow up period.	Complete recanalisation seen at week 4	Complete recanalisation at 5 months. PVT recurred upon termination of DOAC. Re-canalisation achieved upon re-starting DOAC.	Complete resolution	-
Bleeding events	None	None	None	None	None	-