> AF or VTE [venous thromboembolism], whether an NOAC or warfarin.[1]
>
> We also stated:
>
> [Warfarin] remains a treatment option for patients with AF or VTE [venous thromboembolism] in whom excellent anticoagulation control is attainable.[1]

Rather than engage in a potentially protracted debate on the relative merits and drawbacks of NOACs and warfarin as anticoagulants, we urge readers to reach their own conclusions by reviewing the evidence and by considering patient values and preferences, as well as the costs, of these treatment options. We also would refer readers to clinical practice guidelines developed by the Canadian Cardiovascular Society, the American College of Chest Physicians, and the European Society of Cardiology, which endorse the use of NOACs as a first-line anticoagulant option for stroke prevention for most patients with AF based on at least comparable efficacy and safety, and less intracranial hemorrhage compared with warfarin.[5-7]

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Competing interests
None declared

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We stand by our conclusion

We thank Dr Lam for his comment[1] pertaining to our Tools for Practice article on the effects of nonsteroidal anti-inflammatory drugs (NSAIDs) on fracture healing.[2] Animal studies can be very useful for hypothesis generation; however, in this case the human and the animal data differ. The references Lam provided pertained to animal studies and the review article primarily also described animal studies.[1] The human studies referenced in the Boursinos et al study[3] did not show a deleterious effect of NSAIDs on fracture healing.

Recently, another randomized controlled study comparing an NSAID (ie, ibuprofen) with morphine for children with uncomplicated fractures found that ibuprofen provided equivalent short-term pain relief with fewer adverse events.[4] We hope that the authors will also report nonunion rates.

Until evidence from randomized controlled studies demonstrate adverse effects of NSAIDs on human fracture healing, we stand by our original conclusion that NSAIDs can be used for short-term pain relief for children and adults with orthopedic injuries or fractures.

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