

# Clinical trials of CABG

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## 1 stable angina

Trial	Treatments	Patients	Trials design and methods
<b>TMR+CABG vs CABG</b>			
<a href="#">Allen , 2000</a> n=132/131 follow-up:	coronary bypass of suitable vessels plus transmyocardial revascularization to areas not graftable versus coronary bypass alone with nongraftable areas left unrevascularized	patients whose standard of care was coronary artery bypass grafting and who had one or more ischemic areas not amenable to bypass grafting	single blind
<a href="#">Loubani , 2003</a> n=10/10 follow-up: 36 months	coronary artery bypass grafting plus transmyocardial laser revascularization with a holmium:YAG (yttrium-aluminum-garnet) laser to nongraftable areas versus coronary artery bypass grafting	Patients who had elective coronary artery bypass with one or more nongraftable coronary arteries	Parallel groups open UK
<a href="#">Zhao , 2006</a> n=40/40 follow-up: 3.4y	transmyocardial laser revascularization (holmium: YAG) combined with off-pump coronary artery bypass versus off-pump coronary artery bypass	patients with diffusely diseased target vessels	Parallel groups open China
<b>CABG+surgical ventricular reconstruction vs CABG</b>			
<a href="#">STICH (ventricular reconstruction) , 2009</a> [NCT00023595] n=501/499 follow-up: 48 months	CABG with surgical ventricular reconstruction versus CABG	patients with anterior-apical regional left ventricular dysfunction	Parallel groups open
<b>CABG vs medical treatment</b>			
<a href="#">STICH (vs med) , 2011</a> [NCT00023595] n=602/610 follow-up: 56 months	CABG versus medical therapy	patients with congestive heart failure and severe LV dysfunction	Parallel groups open 26 countries

continued...

<b>Trial</b>	<b>Treatments</b>	<b>Patients</b>	<b>Trials design and methods</b>
<b>CASS subgroup , 1985</b> n=78/82 follow-up: 7 years	CABG versus medical treatment	selected patients with chronic, stable coronary artery disease, sub group of patients ejection fractions above 0.34 but below 0.50 at base line	Parallel groups open
<b>ECSS (European) , 1988</b> n=394/373 follow-up: 12 y	early coronary bypass surgery versus medical therapy	men with midl or moderate angina pectoris of at least 3 months duration and an obstruction of 50% or more in at least 2 major coronary arteries in the absence of marked LV dysfunction	Parallel groups open Europe (6 countries)
<b>CASS , 1983</b> [NCT00000489] n=390/390 follow-up: 5y	surgical versus nonsurgical	patients with stable ischemic heart disease	Parallel groups open USA, Canada
<b>VA , 1984</b> n=332/354 follow-up: 7 y	coronary-artery bypass grafting versus medical treatment	patients with stable angina	Parallel groups open
<b>Texas , 1977</b> n=56/60 follow-up:	-	-	
<b>Oregon , 1979</b> n=51/49 follow-up:	surgical treatment versus medical treatment	patients with stable, disabling angina	
<b>New zealand 1 , 1981</b> n=50/50 follow-up: 4.5 y	surgical versus nonsurgical	men 60 years of age or younger who had recovered from a recurrent myocardial infarction	
<b>MASS II , 2007</b> n=203/203 follow-up: 5 years	coronary artery bypass graft (CABG) versus medical therapy	multivessel coronary artery disease with stable angina and preserved ventricular function.	Parallel groups open
<b>CABG or PCI vs medical treatment</b>			
<b>BARI 2D , 2009</b> [NCT00006305] n=1176/1192 follow-up: 5.3 y	prompt revascularization with intensive medical therapy versus intensive medical therapy alone	patients with type 2 diabetes and heart disease	Parallel groups open US, Canada, Brazil, Mexico, Czech Republic, Austria

More details and results :

- myocardial revascularization for stable angina in all type of patient at <http://www.trialresultscenter.org/go-Q25>
- myocardial revascularization for stable angina in diabetic patients at <http://www.trialresultscenter.org/go-Q29>

- myocardial revascularization for stable angina in patients with Left Ventricular Dysfunction at <http://www.trialresultscenter.org/go-Q501>

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## 2 coronary artery disease

Trial	Treatments	Patients	Trials design and methods
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continued...

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<b>CABG or PCI vs medical treatment</b>			
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More details and results :

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- myocardial revascularization for coronary artery disease in diabetic patients at <http://www.trialresultscenter.org/go-Q30>
- transmyocardial revacularization for coronary artery disease in all type of patients at <http://www.trialresultscenter.org/go-Q274>
- myocardial revascularization for coronary artery disease in patients with left ventricular dysfunction at <http://www.trialresultscenter.org/go-Q502>

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