

Clinical trials of rt-PA

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1 pulmonary embolism

Trial	Treatments	Patients	Trials design and methods
rt-PA vs no fibrinolysis			
PAIMS 2 , 1992 n=NA follow-up: 7 days	rt-PA 100 mg IV over 2 h and heparin versus Heparin 1750 IU/hr i.v. for 7 to 10 days	patients with angiographically documented pulmonary embolism	Parallel groups open Italy
Goldhaber , 1993 n=46/55 follow-up: 14 days	rt-PA 100 mg IV over 2 h then 1000 U/hr heparin,when PTT or TT was <2 times control. Subsequent heparin dose achieved PTT = 1.5 to 2.5 times the upperlimit of normal. versus heparin, initial dose 5000 U bolus followed by 1000 U/hr continuous i.v., 4 hr after the dose of heparin according to PTT. Target PTT = 1.5 to 2.5 times of normal	haemodynamically stable patients with acute pulmonary embolism	Parallel groups open US
rt-PA vs placebo			
Konstantinides , 2002 n=118/138 follow-up: <30 days	100 mg alteplase given as 10 mg bolus followed by 90 mg i.v. infusion over 2 hours then i.v. heparin 1000 U/hr adjusted to maintain APTT of 2.0 to 2.5times the upper normal limit. Oral anticoagulation was started on day 3 versus placebo + i.v. heparin 1000 U/hr adjusted to maintain APTT of 2.0 to 2.5times the upper normal limit. Oral anticoagulation was started on day 3	patients with acute pulmonary embolism and pulmonary hypertensionor right ventricular dysfunction but withoutarterial hypotension or shock	Parallel groups double blind Germany
PIOPED , 1990 n=9/4 follow-up: 7 days	rt-PA 4080 mg IV over 90 min plus heparin versus placebo+heparin	patients with acute pulmonary embolism	Parallel groups double blind US

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Trial	Treatments	Patients	Trials design and methods
Levine , 1990 n=33/25 follow-up: 10 days	rt-PA 0.6 mg/kg IV over 2 min and heparin, initial bolus of 5000 U, then 30,000 U for first 24 hr continuous infusion,only interrupted for the duration of the study drug infusion versus placebo + heparin bolus of 5000 U, then 30,000 U for first 24 hr continuous infusion	patients with objectively established acute symptomatic pulmonary embolism	Parallel groups double blind Canada

More details and results :

- fibrinolysis for pulmonary embolism in all type of patients at <http://www.trialresultscenter.org/go-Q110>

References

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Goldhaber, 1993:

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Entry terms: Tissue Plasminogen Activator, Tissue Activator D-44, Tissue Activator D 44, Tisokinase, Tissue-Type Plasminogen Activator, Tissue Type Plasminogen Activator, TTPA, T-Plasminogen Activator, T Plasminogen Activator, Alteplase, Activase, Actilyse, Lysatec rt-PA, Lysatec rt PA, Lysatec rtPA,