

Clinical trials of anticoagulant for acute coronary syndrome in All ACS (including AMI)

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1 oral anticoagulant

Trial	Treatments	Patients	Trials design and methods
coumadin vs control (on top of aspirin)			
ASPECT-2 (coumadin+asp vs asp) , 2002 n=333/336 follow-up: 1 year	coumadin(INR mean 2.4) +aspirin versus aspirin	UA, AMI	open the Netherlands
warfarin vs control (on top of aspirin)			
ATACS (pilot study) (warfarin vs control) , 1990 n=37/32 follow-up: 65279;3 months	heparin/warfarin target INR 65279;3-4.5 + aspirin versus aspirin alone	65279;UA, NSTEMI	open
ATACS , 1994 n=105/109 follow-up: 3 months	heparin/warfarin (INR median 2.3) + aspirin versus aspirin	UA, NSTEMI	open
CARS , 1997 n=5410/3393 follow-up: 14 months	warfarin (INR mean 1.5) (3 mg warfarin or 1 mg warfarin with 80 mg aspirin) versus aspirin 160 mg/d	AMI	
OASIS Pilot (phase 1) , 1998 n=155/154 follow-up: 6 months	warfarin 3mg/d for 6 months (INR mean 1.5) versus control	UA, NSTEMI	open
OASIS Pilot (phase 2) , 1998 n=98/99 follow-up: 3 months	warfarin adjusted dose (INR mean 2.3) for 3 months versus standard treatment	UA, NSTEMI	open
OASIS-2 Warfarin Substudy , 2001 n=1848/1864 follow-up: 5 months	warfarin target INR 65279;22.5 for 5 months +aspirin versus control	UA	open
APRICOT-2 , 2002 n=135/139 follow-up: 3 months	moderate-intensity coumarin target INR 2-3 (+aspirin) versus aspirin	STEMI	
CHAMP , 2002 n=2522/2537 follow-up: 2.7 years	-	AMI	

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Trial	Treatments	Patients	Trials design and methods
WARIS , 2002 n=1208/1206 follow-up: 4 years	-	AMI	
LoWASA , 2004 n=1659/1641 follow-up: 5 years	-	AMI	
Zibaenezhad , 2004 n=70/70 follow-up: 1 year	-	AMI	
warfarin vs placebo (on top of aspirin)			
Williams , 1997 n=29/28 follow-up: 2.5 months	warfarin target INR 65279;22.5 +aspirin versus placebo +aspirin	UA, AMI	double blind
Huyhn , 2001 n=44/46 follow-up: 1 year	warfarin adjusted dose for INR 22.5 +aspirin versus placebo +aspirin	UA, NSTEMI with prior CABG	double blind
coumadin vs aspirin			
ASPECT-2 (coumadin vs aspirin) , 2002 n=325/336 follow-up: 1 year (range 0-26 months)	coumadin (phenprocoumon or acenocoumarol) target INR 3-4 versus aspirin 80mg daily	UA, AMI	Parallel groups open the Netherlands
warfarin vs aspirin			
ATACS (pilot study) warfarin vs aspirin , 1990 n=24/32 follow-up: 65279;3 months	heparin/warfarin target INR 65279;3-4 versus aspirin 65279;325 mg daily	65279;UA, NSTEMI	open

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ASPECT-2 (coumadin+asp vs asp), 2002:

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ATACS, 1994:

Cohen M, Adams PC, Parry G, Xiong J, Chamberlain D, Wiczorek I, Fox KA, Chesebro JH, Strain J, Keller C Combination antithrombotic therapy in unstable rest angina and non-Q-wave infarction in nonprior aspirin users. Primary end points analysis from the ATACS trial. *Antithrombotic Therapy in Acute Coronary Syndromes Research Group. Circulation* 1994;89:81-8 [[8281698](#)]

CARS, 1997:

Randomised double-blind trial of fixed low-dose warfarin with aspirin after myocardial infarction. Coumadin Aspirin Reinfarction Study (CARS) Investigators. *Lancet* 1997;350:389-96 [[9259652](#)]

OASIS Pilot (phase 1), 1998:

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OASIS Pilot (phase 2), 1998:

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OASIS-2 Warfarin Substudy, 2001:

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CHAMP, 2002:

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WARIS, 2002:

Hurlen M, Abdelnoor M, Smith P, Erikssen J, Arnesen H Warfarin, aspirin, or both after myocardial infarction. *N Engl J Med* 2002;347:969-74 [[12324552](#)]

LoWASA, 2004:

Herlitz J, Holm J, Peterson M, Karlson BW, Haglid Evander M, Erhardt L Effect of fixed low-dose warfarin added to aspirin in the long term after acute myocardial infarction; the LoWASA Study. *Eur Heart J* 2004;25:232-9 [[14972424](#)]

Zibaenezhad, 2004:

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Williams, 1997:

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Huyhn, 2001:

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ASPECT-2 (coumadin vs aspirin), 2002:

ATACS (pilot study) warfarin vs aspirin, 1990:

Cohen M, Adams PC, Hawkins L, Bach M, Fuster V Usefulness of antithrombotic therapy in resting angina pectoris or non-Q-wave myocardial infarction in preventing death and myocardial infarction (a pilot study from the Antithrombotic Therapy in Acute Coronary Syndromes Study Group). *Am J Cardiol* 1990;66:1287-92 [[2244556](#)]

2 oral direct thrombin inhibitor

Trial	Treatments	Patients	Trials design and methods
dabigatran vs placebo			

continued...

Trial	Treatments	Patients	Trials design and methods
REDEEM, 2009 <i>unpublished</i> [NCT00621855] n=1501/373 follow-up: 6 months	dabigatran 4 dosages (50mg twice daily, 75mg twice daily, 110mg twice daily, 150mg twice daily) versus placebo	patients with recent acute coronary syndromes (ST- or non-ST-elevation myocardial infarction)	Parallel groups double blind

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REDEEM, 2009:

Oldgren J, Budaj A, Granger CB, Khder Y, Roberts J, Siegbahn A, Tijssen JG, Van de Werf F, Wallentin L Dabigatran vs. placebo in patients with acute coronary syndromes on dual antiplatelet therapy: a randomized, double-blind, phase II trial. *Eur Heart J* 2011 Nov;32:2781-9 [21551462]

3 oral factor Xa inhibitor

Trial	Treatments	Patients	Trials design and methods
apixaban vs placebo			
APPRAISE 2, 2011 [NCT00831441] n=3705/3687 follow-up: 8 months	apixaban 5mg twice daily versus placebo	patients with a recent acute coronary syndrome and at least two additional risk factors for recurrent ischemic events	Parallel groups double blind 39 countries
APPRAISE-1 (10mg od), 2009 [NCT00313300] n=318/611 follow-up: 6 months	apixaban 10 mg once daily versus placebo	patients with a recent ST-elevation or nonST-elevation acute coronary syndrome(<7 days)	Parallel groups double blind Europe, Middle East, North America
APPRAISE-1 (2.5 mg bid), 2009 [NCT00313300] n=NA follow-up: 6 months	Apixaban 2.5mg twice daily versus placebo	patients with a recent ST-elevation or nonST-elevation acute coronary syndrome(<7 days)	double blind Europe, Middle East, North America
APPRAISE japan <i>ongoing</i> [NCT00852397] n=NA follow-up:	2 doses of apixaban (2.5 mg BID and 5.0 mg BID) for 24 weeks in combination with standard therapy (aspirin and /or additional antiplatelet therapy) versus placebo	patients with recent (<=7 days) acute coronary syndrome	double-blind Japan
rivaroxaban 2.5mg vs placebo			
ATLAS ACS-TIMI 46 (2.5mg), 2009 [NCT00402597] n=152/1160 follow-up: 6 months	rivaroxaban 2.5 mg twice daily versus placebo	recent ACS patients treated with aspirin alone (n=761) or aspirin plus clopidogrel (n=2730)	double blind 27 countries

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Trial	Treatments	Patients	Trials design and methods
ATLAS ACS 2 - TIMI 51 (2.5mg) , 2011 [NCT00809965] n=5174/5176 follow-up: 13 months	rivaroxaban 2.5 mg twice daily in addition to standard care versus placebo	patients with a recent ACS	Parallel groups double blind 44 countries
rivaroxaban 5mg vs placebo			
ATLAS ACS-TIMI 46 (5mg) , 2009 [NCT00402597] n=519/1160 follow-up: 6 months	rivaroxaban 5 mg twice daily versus placebo	recent ACS patients treated with aspirin alone (n=761) or aspirin plus clopidogrel (n=2730)	Parallel groups double blind 27 countries
ATLAS ACS 2 - TIMI 51 (5mg) , 2011 [NCT00809965] n=5176/5176 follow-up: 13 months	rivaroxaban 5 mg twice daily in addition to standard care versus placebo	patients with a recent ACS	double blind 44 countries
ximelagatran vs placebo			
ESTEEM , 2003 n=1245/638 follow-up: 6 months	oral ximelagatran at doses of 24 mg, 36 mg, 48 mg, or 60 mg twice daily versus placebo	patients who had had recent ST-elevation or non-STelevation myocardial infarction	Parallel groups double-blind
otamixaban vs unfractionated heparin			
SEPIA-ACS1 TIMI 42 , 2009 [NCT00317395] n=2792/449 follow-up: 7 days	otamixaban 5 doses (008 mg/kg bolus followed by 0.035, 0.070, 0.105, 0.140, 0.175 mg/kg/h) versus Heparin+eptifibatide	patients with non-ST-elevation acute coronary syndromes	Parallel groups double blind 36 countries

References

APPRAISE 2, 2011:

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APPRAISE-1 (10mg od), 2009:

Apixaban, an Oral, Direct, Selective Factor Xa Inhibitor, in Combination With Antiplatelet Therapy After Acute Coronary Syndrome. Results of the Apixaban for Prevention of Acute Ischemic and Safety Events (APPRAISE) Trial. Circulation 2009;: [19470889]

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APPRAISE japan, :

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ATLAS ACS 2 - TIMI 51 (2.5mg), 2011:

ATLAS ACS-TIMI 46 (5mg), 2009:

ATLAS ACS 2 - TIMI 51 (5mg), 2011:

ESTEEM, 2003:

4 About TrialResults-center.org

TrialResults-center is an innovative knowledge database that collects the results of RCTs and provides dynamic interactive systematic reviews and meta-analysis in the field of all major heart and vessels diseases.

The TrialResults-center database provides a unique view of the treatment efficacy based on all data provided directly from clinical trial results, offering a valuable alternative to personal bibliographic search, published meta-analysis, etc. Furthermore, it would allow comparing easily the various concurrent therapeutic for the same clinical condition.

Rigorous meta-analysis method is used to populate TrialResults-center: widespread search of published and non published trials, study selection using pre-specified criteria, data extraction using standard form.

TrialResults-center is continually updated on a weekly basis. We continually search all new results (whatever their publication channel) and these news results are immediately added to the database with a maximum of 1 week.

TrialResults-center is non-profit and self-funded.