

Clinical trials of antiplatelets drug for cardiovascular prevention in secondary prevention in patients with CAD

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1 aspirin

Trial	Treatments	Patients	Trials design and methods
aspirin vs placebo			
CDPA , 1976 n=758/771 follow-up: 1.83 y	Aspirin (324 mg) 3x/d versus Placebo	MI survivors	Parallel groups Double blind USA
Cardiff I , 1974 n=615/624 follow-up: 2 years	Aspirin (300 mg) 1x/d versus Placebo	MI survivors	Parallel groups Double blind UK
Cardiff II , 1979 n=832/850 follow-up: 1 y	Aspirin (300 mg) 3x/d for one year versus Placebo	patients with myocardial infarction	Parallel groups Double blind South Wales
Vogel , 1979 n=672/668 follow-up: 1.75 y (mean)	Aspirin (1.5 g daily) on an average period of 22 months versus Placebo	-	Parallel groups Double blind Germany
AMIS , 1980 [NCT00000491] n=2267/2257 follow-up: >3 y	Aspirin (500 mg) 2x/d for at least 3 years versus Placebo	men and women who had had a documented myocardial infarction	Parallel groups Double blind USA
GAMIS , 1980 n=317/309 follow-up: 2 y	Aspirin (500 mg) 3x/d for 2 years versus Placebo	patients who had survived a myocardial infarction for 30-42 days	Parallel groups Double blind Germany, Austria,
PARIS , 1980 n=810/406 follow-up: 41 mo	Aspirin (324 mg) 3x/d versus Placebo	patients who had recovered from myocardial infarction	Parallel groups Double blind USA, UK
JAMIS , 1999 n=250/230 follow-up: 1.3 y (mean)	Aspirin (81 mg) 1x/d versus No antiplatelets	patients with AMI within 1 month from the onset of symptoms	Parallel groups Open Japan

continued...

Trial	Treatments	Patients	Trials design and methods
SAPAT , 1992 n=1009/1026 follow-up: 50 months	aspirin 75 mg daily versus placebo	patients with stable chronic angina pectoris	Parallel groups double blind Sweden

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PARIS, 1980:

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Juul-Miller S, Edvardsson N, Jahnmatz B, Rosn A, Srensen S, Omblus R Double-blind trial of aspirin in primary prevention of myocardial infarction in patients with stable chronic angina pectoris. The Swedish Angina Pectoris Aspirin Trial (SAPAT) Group. Lancet 1992;340:1421-5 [1360557]

2 clopidogrel

Trial	Treatments	Patients	Trials design and methods
clopidogrel vs aspirin			
ASCET [NCT00222261] n=498/503 follow-up:	clopidogrel 75 mg once daily for two years versus Aspirin 160 mg once daily for two years	patients with documented coronary heart disease and treated with aspirin	Parallel groups open

continued...

Trial	Treatments	Patients	Trials design and methods
CAPRIE , 1996 n=9599/9586 follow-up: mean 1.91 years	clopidogrel 75 mg once daily versus aspirin 325 mg once daily	patients with atherosclerotic vascular disease manifested as either recent ischaemic stroke, recent myocardial infarction, or symptomatic peripheral arterial disease	Parallel groups Double blind 16 countries
clopidogrel vs placebo (on top aspirin)			
CHARISMA , 2006 [NCT00050817] n=7802/7801 follow-up: median 28 months	clopidogrel (75 mg per day) plus low-dose aspirin (75 to 162 mg per day) versus placebo plus low-dose aspirin	patients with either clinically evident cardiovascular disease or multiple risk factors	Parallel groups Double blind 32 countries

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3

3 dipyridamol

Trial	Treatments	Patients	Trials design and methods
dipyridamol vs control			
Atlanta (Sbar) , 1967 n=30/30 follow-up: 6 months	dipyridamole 150mg daily versus placebo	patients with angina pectoris	parallel groups double-blind
Wirecki , 1967 n=28/28 follow-up: 7 months	dipyridamole 150mg daily versus placebo	patients with angina pectoris	parallel groups double blind
Becker , 1967 n=14/13 follow-up: 5 months	dipyridamole 225mg daily versus placebo	-	parallel groups double-blind
dipyridamol vs placebo			
Kinsella , 1962 n=13/13 follow-up: 0.5 months	dipyridamole 37.5 mg and 100mg daily versus placebo	-	parallel groups double-blind
Leiberman , 1964 n=19/19 follow-up: >3 months	dipyridamole 100mg daily versus placebo	-	parallel groups double blind

continued...

Trial	Treatments	Patients	Trials design and methods
Zion , 1961 n=14/14 follow-up: 0.5 months	Dipyridamole 37.5mg versus placebo	patients with angina pectoris	cross-over double-blind
Dewar , 1961 n=17/17 follow-up: 0.5 months	Dipyridamole 100mg daily versus placebo	patients with angina pectoris	parallel groups double-blind
Neumann , 1964 n=20/16 follow-up: 1.5 months	dipyridamole 150mg daily versus placebo	elderly with precordial pain	parallel groups double-blind
Foulds , 1960 n=24/24 follow-up: 1 months	Dipyridamole 200mg daily versus placebo	patients with angina pectoris	parallel groups double-blind
Igloe , 1970 n=26/22 follow-up: 2-7 months	Dipyridamole 200mg daily versus placebo	patients with angina pectoris	parallel groups double blind
dipyridamol + aspirin vs placebo			
PARIS , 1980 n=810/406 follow-up: 41 months (mean)	Aspirin (324 mg) + dipyridamole (75 mg) 3x/d versus Placebo	patients who had recovered from myocardial infarction	Parallel groups Double blind USA and UK
PARIS-II , 1986 n=1563/1565 follow-up: 23.4 months	Aspirin (330 mg) + dipyridamole (75 mg) 3x/d versus Placebo	patients who had recovered from myocardial infarction, suffered from 4 weeks to 4 months previously	Parallel groups Double blind USA and UK
dipyridamol + aspirin vs aspirin			
PARIS , 1980 n=810/810 follow-up: 41 months	Aspirin (324 mg) + dipyridamole (75 mg) 3x/d versus Aspirin (324 mg) 3x/d	patuents who had recovered from myocardial infarction	Parallel groups Double blind USA and GB

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4 P2Y12 receptor-antagonist

CT

Trial	Treatments	Patients	Trials design and methods
ticagrelor vs placebo (on top aspirin)			
PEGASUS 90mg , 2015 [NCT01225562] n=7050/7067 follow-up: 2.75 y (median)	-	patients who had had a myocardial infarction 1 to 3 years earlier	double-blind
PEGASUS 60mg , 2015 [NCT01225562] n=7045/7067 follow-up: 2.75 y (median)	ticagrelor at a dose of 60 mg twice daily versus placebo	patients who had had a myocardial infarction 1 to 3 years earlier	Parallel groups double-blind

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PEGASUS 90mg, 2015:

Bonaca MP, Bhatt DL, Braunwald E, Cohen M, Steg PG, Storey RF, Held P, Jensen EC, Sabatine MS Design and rationale for the Prevention of Cardiovascular Events in Patients With Prior Heart Attack Using Ticagrelor Compared to Placebo on a Background of Aspirin-Thrombolysis in Myocardial Infarction 54 (PEGASUS-TIMI 54) trial. Am Heart J 2014;167:437-444.e5 [[24655690](#)]

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PEGASUS 60mg, 2015:

Bonaca MP, Bhatt DL, Braunwald E, Cohen M, Steg PG, Storey RF, Held P, Jensen EC, Sabatine MS Design and rationale for the Prevention of Cardiovascular Events in Patients With Prior Heart Attack Using Ticagrelor Compared to Placebo on a Background of Aspirin-Thrombolysis in Myocardial Infarction 54 (PEGASUS-TIMI 54) trial. *Am Heart J* 2014;167:437-444.e5 [24655690]

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5 selective PAR-1 thrombin receptor antagonist

Trial	Treatments	Patients	Trials design and methods
vorapaxar vs placebo (on top aspirin)			
TRA-2P TIMI 50 , 2012 [NCT00526474] n=13225/13244 follow-up: 2.5 y (median)	vorapaxar (SCH 530348) 2.5-mg daily versus placebo (added to the existing standard of care for preventing heart attack and stroke (eg, aspirin, clopidogrel)	patients with a known history of atherosclerosis (MI, ischemic stroke, or peripheral vascular disease)	Parallel groups double-blind

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6 ticlopidine

Trial	Treatments	Patients	Trials design and methods
ticlopidine vs placebo			
Berglund , 1985 n=21/17 follow-up: 2m	ticlopidine 500 mg daily versus placebo	middle-aged men with stable incapacitating angina pectoris	parallel groups double blind

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7 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.

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