

Clinical trials of heparin (UFH or LMWH) for acute myocardial infarction in patients eligible to receive fibrinolytic therapy

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1 Low molecular weight heparin

Trial	Treatments	Patients	Trials design and methods
Enoxaparin vs UFH			
Baird , 2002 n=149/151 follow-up: 90 d	Enoxaparin 40 mg TID, 4 d versus UFH 5000 IU bolus, then 30 000 IU over 24 h for 4d	patients receiving fibrinolytic therapy following acute myocardial infarction	Parallel groups 90-min TIMI flow
HART II , 2001 n=200/200 follow-up: 57 d	Enoxaparin 1 mg/kg BID, <=3d versus UFH 40005000 IU bolus, then 15 IU/kg per hour for >=3d	patients undergoing reperfusion therapy with an accelerated recombinant tissue plasminogen activator regimen and aspirin for AMI	Parallel groups open

References

Baird, 2002:

Baird SH, Menown IB, McBride SJ, Trouton TG, Wilson C Randomized comparison of enoxaparin with unfractionated heparin following fibrinolytic therapy for acute myocardial infarction. Eur Heart J 2002;23:627-32 [[11969277](#)]

HART II, 2001:

Ross AM, Molhoek P, Lundergan C, Knudtson M, Draoui Y, Regalado L, Le Louer V, Bigonzi F, Schwartz W, de Jong E, Coyne K Randomized comparison of enoxaparin, a low-molecular-weight heparin, with unfractionated heparin adjunctive to recombinant tissue plasminogen activator thrombolysis and aspirin: second trial of Heparin and Aspirin Reperfusion Therapy (HART II). Circulation 2001;104:648-52 [[11489769](#)]

2 unfractionated heparin

Trial	Treatments	Patients	Trials design and methods
UFH vs no heparin			
DUCCS , 1994 n=128/122 follow-up: 14 d	UFH no bolus, 15 IU/kg per h for 4 d; target aPTT 5090 s versus No heparin	patients with acute myocardial infarction four hours after APSAC administration, age <=85 y STEMI <=12 h	Parallel groups open
UFH vs placebo			

continued...

Trial	Treatments	Patients	Trials design and methods
ECSG , 1992 n=324/320 follow-up: In-hospital	UFH 5000 IU bolus, UFH 1000 IU/h for 48120 h versus Placebo	patients treated with alteplase thrombolysis for acute myocardial infarction, Age 2170 y STEMI <=6h	Parallel groups Double-blind

References

DUCCS, 1994:

O'Connor CM, Meese R, Carney R, Smith J, Conn E, Burks J, Hartman C, Roark S, Shadoff N, Heard M 3rd A randomized trial of intravenous heparin in conjunction with anistreplase (anisoylated plasminogen streptokinase activator complex) in acute myocardial infarction: the Duke University Clinical Cardiology Study (DUCCS) 1. J Am Coll Cardiol 1994;23:11-8 [[8277068](#)]

ECSG, 1992:

de Bono DP, Simoons ML, Tijssen J, Arnold AE, Betriu A, Burgersdijk C, Lpez Bescos L, Mueller E, Pfisterer M, Van de Werf F Effect of early intravenous heparin on coronary patency, infarct size, and bleeding complications after alteplase thrombolysis: results of a randomised double blind European Cooperative Study Group trial. Br Heart J 1992;67:122-8 [[1540431](#)]

3 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.

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