

# Clinical trials of antithrombotics for stable angina in all type of patient

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## 1 aspirin

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

## References

### SAPAT, 1992:

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
<b>clopidogrel vs aspirin</b>			
<b>ASCET</b> [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

## References

ASCET, :

## 3 dipyridamol

Trial	Treatments	Patients	Trials design and methods
<b>dipyridamol vs control</b>			

continued...

<b>Trial</b>	<b>Treatments</b>	<b>Patients</b>	<b>Trials design and methods</b>
<b>Atlanta (Sbar) , 1967</b> n=30/30 follow-up: 6 months	dipyridamole 150mg daily versus placebo	patients with angina pectoris	parallel groups double-blind
<b>Wirecki , 1967</b> n=28/28 follow-up: 7 months	dipyridamole 150mg daily versus placebo	patients with angina pectoris	parallel groups double blind
<b>Becker , 1967</b> n=14/13 follow-up: 5 months	dipyridamole 225mg daily versus placebo	-	parallel groups double-blind
<b>dipyridamol vs placebo</b>			
<b>Kinsella , 1962</b> n=13/13 follow-up: 0.5 months	dipyridamole 37.5 mg and 100mg daily versus placebo	-	parallel groups double-blind
<b>Leiberman , 1964</b> n=19/19 follow-up: >3 months	dipyridamole 100mg daily versus placebo	-	parallel groups double blind
<b>Zion , 1961</b> n=14/14 follow-up: 0.5 months	Dipyridamole 37.5mg versus placebo	patients with angina pectoris	cross-over double-blind
<b>Dewar , 1961</b> n=17/17 follow-up: 0.5 months	Dipyridamole 100mg daily versus placebo	patients with angina pectoris	parallel groups double-blind
<b>Neumann , 1964</b> n=20/16 follow-up: 1.5 months	dipyridamole 150mg daily versus placebo	elderly with precordial pain	parallel groups double-blind
<b>Foulds , 1960</b> n=24/24 follow-up: 1 months	Dipyridamole 200mg daily versus placebo	patients with angina pectoris	parallel groups double-blind
<b>Igloe , 1970</b> n=26/22 follow-up: 2-7 months	Dipyridamole 200mg daily versus placebo	patients with angina pectoris	parallel groups double blind

## References

### Atlanta (Sbar), 1967:

Sbar S, Schlant RC Dipyridamole in the treatment of angina pectoris. A double-blind evaluation. JAMA 1967;201:865-7 [5340622]

### Wirecki, 1967:

Wirecki M Treatment of angina pectoris with dipyridamole: a long-term double blind study. J Chronic Dis 1967;20:139-45 [5336520]

### Becker, 1967:

Becker MC. Angina pectoris: A double blind study with dipyridamole Journal of the Newark Beth Israel Hospital 1967;18:88-94

### Kinsella, 1962:

KINSELLA D, TROUP W, MCGREGOR M Studies with a new coronary vasodilator drug: persantin. Am Heart J 1962;63:146-51 [14456202]

### Leiberman, 1964:

LEIBERMAN A, GUGLIEMELLI S PERSANTIN- A DOUBLE BLIND STUDY. Angiology 1964;15:290-2 [14170587]

**Zion, 1961:**

ZION MM, BRADLOW BA A controlled clinical trial of 'persantin' (R A 8) in angina pectoris. S Afr Med J 1961;35:11-3 [13788617]

**Dewar, 1961:**

DEWAR HA, HORLER AR A clinical trial of Persantin and Crodimyl in the treatment of angina of effort. Scott Med J 1961;6:149-52 [13722387]

**Neumann, 1964:**

NEUMANN M, LUISADA AA EFFECT OF RAPID AND SLOW-ACTING "CORONARY" DRUGS ON PRECORDIAL PAIN OF THE AGED. Am J Med Sci 1964;247:156-63 [14124704]

**Foulds, 1960:**

FOULDS T, MACKINNON J Controlled double-blind trial of "persantin" in treatment of angina pectoris. Br Med J 1960;2:835 [13824151]

**Igloe, 1970:**

Igloe MC Treatment of angina pectoris with dipyridamole: a double-blind study. J Am Geriatr Soc 1970;18:233-41 [4984849]

## 4 oral platelet GP IIb/IIIa receptor inhibitor

Trial	Treatments	Patients	Trials design and methods
<b>roxifiban vs placebo</b>			
<b>Murphy , 2003</b> n=120 follow-up: 30 days	roxifiban 0.25, 0.5, 0.75, 1, 1.25, 1.5, 2, or 2.5 mg/day for up to 30 days versus placebo	patients with stable coronary artery disease	Parallel groups double blind

### References

**Murphy, 2003:**

Murphy J, Wright RS, Gussak I, Williams B, Daly RN, Cain VA, Pieniaszek HJ, Sy SK, Ebling W, Simonson K, Wilcox RA, Kopecky SL The use of roxifiban (DMP754), a novel oral platelet glycoprotein IIb/IIIa receptor inhibitor, in patients with stable coronary artery disease. Am J Cardiovasc Drugs 2003;3:101-12 [14727937]

## 5 ticlopidine

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

### References

**Berglund, 1985:**

Berglund U, von Schenck H, Wallentin L Effects of ticlopidine of platelet function in men with stable angina pectoris. Thromb Haemost 1985;54:808-12 [3911481]

## 6 About TrialResults-center.org

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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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