

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

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## 1 antibiotics

Trial	Treatments	Patients	Trials design and methods
<b>Azithromycin vs placebo</b>			
<b>Gupta et al , 1997</b> n=43/41 follow-up: 65279;18mo	65279;Azithromycin 500 mg/d for 3 d (28 received 1 course, 12 received 2 courses 3 mo apart) versus placebo	Male patients at least 6 mo from documented MI and with titers to Chlamydia pneumoniae $\geq 1:64$	Parallel groups double blind
<b>ACADEMIC , 1999</b> n=150/152 follow-up: 2y	Azithromycin 500 mg/d for 3 d then 500 mg/wk for 3 mo versus placebo	Patients with CAD and C pneumoniae titers of $\geq 1:16$ . Patients were at least 5 d from an MI	Parallel groups double blind
<b>STAMINA (Azithromycin) , 2002</b> n=111/107 follow-up: 1y	Azithromycin 500 mg/d for 3 d plus omeprazole 20 mg 2/d for 1 wk plus metronidazole 400 mg 2/d for 1 wk versus placebo	Patients with ACS	Parallel groups double blind England
<b>AZACS , 2003</b> n=2004/2008 follow-up: 6mo	Azithromycin 500 mg on day 1 followed by 250 mg/d for 4d versus placebo	Patients with ACS	Parallel groups double blind
<b>WIZARD , 2003</b> n=3879/3868 follow-up: 14mo	Azithromycin 600 mg/d for 3 d then 1/wk for 11 wk versus placebo	Patients with a history of MI of more than 6 weeks before and with C pneumoniae titers of $\geq 1:16$	Parallel groups double blind North America, Europe, Argentina, India
<b>ACES , 2005</b> [NCT00000617] n=2004/2008 follow-up: 4y	Azithromycin 600 mg/wk for 1 y versus placebo	Patients with stable CAD	Parallel groups double blind US
<b>clarithromycin vs placebo</b>			
<b>CLARIFY , 2001</b> n=74/74 follow-up: 1y	Clarithromycin 500 mg/d for 85 d versus placebo	Patients with ACS	Parallel groups double blind
<b>CLARICOR , 2006</b> [NCT00121550] n=2172/2201 follow-up: 3 years	clarithromycin 500 mg/day versus placebo	patients with adischarge diagnosis of myocardial infarction or angina pectoris	Parallel groups double blind Denmark
<b>Gatifloxacin vs placebo</b>			

continued...

<b>Trial</b>	<b>Treatments</b>	<b>Patients</b>	<b>Trials design and methods</b>
<b>PROVE-IT , 2005</b> n=2076/2086 follow-up: 24mo	Gatifloxacin 400 mg/d for 10 d/mo for 2y versus placebo	Patients hospitalized with ACS in the preceding 10 d	Parallel groups double blind
<b>Roxithromycin vs placebo</b>			
<b>ROXIS , 1999</b> n=102/100 follow-up: 6mo	Roxithromycin 150 mg 2/d for 30 d versus placebo	Patients with documented history of CAD and ACS	Parallel groups double blind
<b>Leowattana et al , 2001</b> n=40/20 follow-up: 3mo	Roxithromycin 150 mg/d for 30 d versus placebo	Patients with ACS	Parallel groups
<b>ANTIBIO , 2003</b> n=433/437 follow-up: 1y	Roxithromycin 300 mg/d for 6 wk versus placebo	Patients with unstable angina or MI	Parallel groups double blind

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## 2 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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