

# Clinical trials of secondary prevention for post myocardial infarction in all type of patients

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## 1 aspirin

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

## References

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## 2 clopidogrel

| Trial   | Treatments   | Patients  | Trials design and methods   |
|---|--|---|---|
| <b>clopidogrel vs aspirin</b>                           |  |   |   |
| <b>CAPRIE, 1996</b><br>n=9599/9586<br>follow-up: 1.91 y | Clopidogrel (75 mg) 1x/d for a minimum of one year and a maximum of 3 years<br>versus<br>Aspirin (325 mg) 1x/d | patients with atherosclerotic vascular disease manifested as either recent ischaemic stroke, recent myocardial infarction, or symptomatic peripheral arterial disease | Parallel groups<br>Double blind<br>16 countries (USA, Canada, Europe, Australia and NZ) |

## References

### CAPRIE, 1996:

, A randomised, blinded, trial of clopidogrel versus aspirin in patients at risk of ischaemic events (CAPRIE). CAPRIE Steering Committee. Lancet 1996; 348:1329-39 [8918275]

## 3 dipyridamol

| Trial   | Treatments   | Patients  | Trials design and methods                     |
|---|--|---|---|
| <b>dipyridamol + aspirin vs placebo</b>                         |  |   |   |
| <b>PARIS , 1980</b><br>n=810/406<br>follow-up: 41 months (mean) | Aspirin (324 mg) + dipyridamole (75 mg)<br>3x/d<br>versus<br>Placebo               | patients who had recovered from myocardial infarction   | Parallel groups<br>Double blind<br>USA and UK |
| <b>PARIS-II , 1986</b><br>n=1563/1565<br>follow-up: 23.4 months | Aspirin (330 mg) + dipyridamole (75 mg)<br>3x/d<br>versus<br>Placebo               | patients who had recovered from myocardial infarction, suffered from 4 weeks to 4 months previously | Parallel groups<br>Double blind<br>USA and UK |
| <b>dipyridamol + aspirin vs aspirin</b>                         |  |   |   |
| <b>PARIS , 1980</b><br>n=810/810<br>follow-up: 41 months        | Aspirin (324 mg) + dipyridamole (75 mg)<br>3x/d<br>versus<br>Aspirin (324 mg) 3x/d | patients who had recovered from myocardial infarction   | Parallel groups<br>Double blind<br>USA and GB |

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## 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.

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