

# Clinical trials of antiarrhythmic drugs for heart failure in all type of heart failure

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## 1 amiodarone

Trial	Treatments	Patients	Trials design and methods
<b>amiodarone vs no treatment</b>			
<b>GESICA , 1994</b> n=260/256 follow-up: 110 years	amiodarone 300 mg/day versus no treatment	patients with severe heart failure Any two of CTR >0.55, LVEF ≤35% , echo LVED >32 cm/m2	open
<b>EPAMSA , 1985</b> n=66/61 follow-up: 081 years	amiodarone 400 mg/day versus no treatment	patients with reduced left ventricular ejection fraction ( <35% ) and asymptomatic ventricular arrhythmias (Lown classes 2 and 4) LVEF ≤35% and Lown class 25	open
<b>amiodarone vs placebo</b>			
<b>Nicklas , 1991</b> n=101 follow-up: NA	amiodarone 200 mg/day versus placebo	patients with ejection fractions less than 30% , New York Heart Association class III or IV symptoms, and frequent but asymptomatic spontaneous ventricular ectopy (Lown class II to V) LVEF ≤30% and Lown class 25	double blind
<b>Hamer , 1989</b> n=34 follow-up: 163 years	amiodarone 200 mg/day versus placebo	patients with severe congestive heart failure but no sustained ventricular arrhythmia	double blind
<b>STATCHF , 1995</b> n=674 follow-up: 215 years	amiodarone 200 mg/day versus placebo	patients with symptoms of congestive heart failure, cardiac enlargement, 10 or more premature ventricular contractions per hour, and a left ventricular ejection fraction of 40 percent or less LVEF ≤40% and ≥10 VPD/h and LVED ≥55 mm or CTR >0.55	double blind
<b>amiodarone vs ICD</b>			
<b>AMIOVIRT , 2003</b> n=52/51 follow-up: 2 y	amiodarones versus implantable cardioverter-defibrillatorag	patients with nonischemic dilated cardiomyopathy, asymptomatic nonsustained ventricular tachycardia, and left ventricular ejection fraction ≤0.35	Parallel groups US

## References

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**Hamer, 1989:**

Hamer AW, Arkles LB, Johns JA Beneficial effects of low dose amiodarone in patients with congestive cardiac failure: a placebo-controlled trial. *J Am Coll Cardiol* 1989;14:1768-74 [[2685081](#)]

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Singh SN, Fletcher RD, Fisher SG, Singh BN, Lewis HD, Deedwania PC, Massie BM, Colling C, Lazzari D Amiodarone in patients with congestive heart failure and asymptomatic ventricular arrhythmia. Survival Trial of Antiarrhythmic Therapy in Congestive Heart Failure. *N Engl J Med* 1995;333:77-82 [[7539890](#)]

**AMIOVIRT, 2003:**

Strickberger SA, Hummel JD, Bartlett TG, Frumin HI, Schuger CD, Beau SL, Bitar C, Morady F Amiodarone versus implantable cardioverter-defibrillator: randomized trial in patients with nonischemic dilated cardiomyopathy and asymptomatic nonsustained ventricular tachycardia-AMIOVIRT. *J Am Coll Cardiol* 2003 May 21;41:1707-12 [[12767651](#)]

## 2 dronedarone

Trial	Treatments	Patients	Trials design and methods
<b>dronedarone vs placebo</b>			
<b>ANDROMEDA , 2008</b> [NCT00543699] n=310/317 follow-up: median 2 months	dronedarone 400mg twice daily versus placebo	patients hospitalized with symptomatic heart failure and severe left ventricular systolic dysfunction	Parallel groups double blind

## References

**ANDROMEDA, 2008:**

Kber L, Torp-Pedersen C, McMurray JJ, Gtzsche O, Lvy S, Crijns H, Amlie J, Carlsen J Increased mortality after dronedarone therapy for severe heart failure. *N Engl J Med* 2008;358:2678-87 [[18565860](#)]

## 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.

TrialResults-center is non-profit and self-funded.