

Clinical trials of vasodilators therapy for peripheral vascular diseases in all type of patients

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1 sympathectomie avec chirurgie

Trial	Treatments	Patients	Trials design and methods
sympathectomie vs contrle			
Barnes RW , 1977 n=25/26 follow-up: 3 ans	sympathectomie bilatrale L2-L4 versus absence de sympathectomie	AOMI stade II (80%) et III (20%)	Parallel groups Ouvert
Satiani B , 1982 n=29/38 follow-up: 11 mois	sympathectomie bilatrale L2-L4 versus absence de sympathectomie	AOMI stade non prcis	Parallel groups Ouvert

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Value of concomitant sympathectomy in aortoiliac reconstruction. Results of a prospective, randomized study. Barnes RW, Baker WH, Shanik G, Maixner W, Hayes AC, Lin R, Clarke W Arch Surg 1977 Nov;112:1325-30 [921531]

Satiani B, 1982:

Prospective randomized study of concomitant lumbar sympathectomy with aortoiliac reconstruction. Satiani B, Liapis CD, Hayes JP, Kimmins S, Evans WE Am J Surg 1982 Jun;143:755-60 [7091512]

2 Vasodilator Agents

Trial	Treatments	Patients	Trials design and methods
vs			
Cornu C <i>ongoing</i> n=NA	-	259 patients avec AOMI stade II	
Farquhar JW <i>ongoing</i> n=NA	-	100 patients avec AOMI stades II ou III	
Vowden P <i>ongoing</i> n=NA	-	320 patients avec AOMI stade II	
naftidrofuryl IV vs control			

continued...

Trial	Treatments	Patients	Trials design and methods
Meehan , 1982 n=24/16 follow-up: 7 days	Naftidrofuryl (Nafronyl): par voie IV (200 mg*2/ jour pendant 2 heures dans 500 ml de srum sal isotonique) et par voie orale (200mg*3/ jour)+ repos au lit + rchauffement pendant 7 jours versus Repos au lit + rchauffement	AOMI stade III	Parallel groups Simple aveugle
buflomedil vs placebo			
Diamantopoulos , 2001 n=21/19 follow-up: 6 mois	Buflomedil 600 mg/ d versus placebo	Stade de la maladie: II de 3.4 ans en moyenne.	Parallel groups Double aveugle
LIMB , 2008 n=1043/1035 follow-up: 33 months	buflomedil 150-300 mg twice daily adjusted to creatinine clearance versus placebo	Patients >40 years with documented peripheral arterial obstructive disease, intermittent claudication, and an ankle-brachial index between 0.30 and 0.80	Parallel groups double blind 4 countries
cilostazol vs placebo			
Elam , 1998 n=NA follow-up:	cilostazol 100 mg twice daily versus placebo	-	Parallel groups double blind US
Otsuka 21-95-201 n=NA follow-up: 12 weeks	-	-	Parallel groups double blind US
Dawson , 1998 n=54/27 follow-up: 3 mois	Cilostazol 200 mg/d versus placebo	Stade de la maladie: II, avec dure des symptomes (annes) de : 6.25+/-0.82	Parallel groups Double aveugle
Beebe , 1999 n=346/170 follow-up: 6 mois	Cilostazol 100 ou 200 mg / j (2 groupes) versus placebo	AOMI stade II	Parallel groups Double aveugle
Dawson (cilostazol) , 2000 n=227/239 follow-up: 6 mois	Cilostazol 200 mg/d versus placebo	Stade de la maladie: II en situation chronique.	Parallel groups Double aveugle
Money , 1998 n=119/120 follow-up: 4 mois	Cilostazol 200 mg/d versus placebo	Stade de la maladie: II	Parallel groups Double aveugle
Strandness , 2002 n=265/129 follow-up: 6 mois	cilostazol 50 or 100 mg twice daily versus placebo	AOMI stade II.	Parallel groups Double aveugle
ginko biloba vs placebo			
Bauer , 1984 n=44/35 follow-up: 6 mois	ginko biloba 40 mg three times daily versus placebo	AOMI stade IIb	Parallel groups Double aveugle

continued...

Trial	Treatments	Patients	Trials design and methods
Peters , 1998 n=53/58 follow-up: 6 mois	ginko biloba EGb 761 three times daily versus placebo	AOMI stade IIb	Parallel groups Double aveugle
Naftidrofuryl vs placebo			
Clyne , 1980 n=63/65 follow-up: 6 mois	Naftidrofuryl 100 mg/d versus placebo	AOMI stade II	Parallel groups Double aveugle
NCIS , 2001 n=89/92 follow-up: 12 mois	naftidrofuryl 200 mg three times daily versus placebo	Stade de la maladie: II pendant 5.25 ans en moyenne	Parallel groups Double aveugle
NIQOL belgium , 2001 n=108/112 follow-up: 6 mois	Naftidrofuryl 200mg three times daily versus placebo	Stade de la maladie :II pendant 4.1 ans en moyenne	Parallel groups Double aveugle
NIQOL germany , 1999 n=142/127 follow-up: 6 mois	Naftidrofuryl 600 mg/d versus placebo	Stade de la maladie: II, dure (annes): 2.41+/-2.67 en moyenne.	Parallel groups Double aveugle
naftidrofuryl IV vs placebo			
Testart , 1994 n=20/17 follow-up: 8 jours	2 daily infusions of 400 mg of naftidrofuryl for 8 days versus placebo	AOMI stade III ou IV	Parallel groups Double aveugle
D'Hooge D , 2001 n=116/119 follow-up: 6 mois	- effet de naftidrofuryl sur la qualite de vie de patients souffrant de claudication intermittente stable : 3x200mg pdt 6 mois versus - placebo pdt 6 mois	- 235 patients - ge moyen 66,5 ans - 66,4% d'hommes	Parallel groups Double aveugle
pentoxifylline vs placebo			
APIC , 1989 n=37/37 follow-up: 12 mois	Pentoxifylline 800 mg/d versus placebo	Stade de la maladie : II, avec dure des symptmes de 10 mois en moyenne.	Factorial plan Double aveugle
Belcaro , 2002 n=30/30 follow-up: 6 mois	Pentoxifylline 1600 mg/d versus placebo	Stade de la maladie: II avec dure de la claudication de: 3+/- 2 mois en moyenne.	Parallel groups Double aveugle
Dawson (pentoxifylline) , 2000 n=232/239 follow-up: 6 mois	Pentoxifylline 1200 mg/d versus placebo	Stade de la maladie: II en situation chronique.	Parallel groups Double aveugle
Donaldson , 1984 n=40/40 follow-up: 2 mois	Oxpentifylline 600 mg/d versus placebo	AOMI stade II	Parallel groups Double aveugle
Porter , 1982 n=67/61 follow-up: 6 mois	Pentoxifylline between 600 mg/d and 1200 mg/d versus placebo	Stade de l'artriopathie: II, avec dure des symptomes de 2.9 ans en moyenne.	Parallel groups Double aveugle
naftidrofuryl IV vs prostacyclin			

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Trial	Treatments	Patients	Trials design and methods
Negus , 1987 n=15/14 follow-up: 24 h	Naftidrofuryl 0.02 mg/kg/min, intra-arterial, 3 days versus intra-arterial prostacyclin 8 ng/kg/min, 3 days	Stade de la maladie: III: 55.2% ; IV: 44.8% Dure de la douleur (semaines): groupe contrle: 30 +/-54.2 groupe ttt: 19.7 +/- 44.6	Parallel groups Double aveugle

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3 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.

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