

Clinical trials of antithrombotics for peripheral vascular diseases in after revascularisation

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1 anti-agrgant

Trial	Treatments	Patients	Trials design and methods
vs contrle			
Green , 1982 n=32/17 follow-up: 12 mois	Association: aspirine (ASA)+ dipyridamole(DIP)(n=16) ou aspirine seul(n=16). versus placebo	40% de patients au stade II 60% de patients avec ischmie critique	Parallel groups Double aveugle
Kohler , 1984 n=44/44 follow-up: 24 mois	Association Aspirine (ASA) et dipyridamole(DIP)(commence 1 jour aprs l'intervention). versus placebo	AOMI stade non prcis	Parallel groups Double aveugle
Goldman , 1984 n=22/31 follow-up: 12 mois	Association aspirine (ASA): 300mg et dipyridamole (DIP): 75 mg; 3 fois par jour, commenant 48 heures avant l'intervention , pendant 12 mois. versus Placebo.	Stade II: 20.8% Stade III,IV: 79.2% .	Parallel groups Double aveugle
Donaldson , 1985 n=33/32 follow-up: 12 mois	Association aspirine(ASA)+ dipirydamole (DIP). versus placebo	patients au stade II (PM 60m)	Parallel groups Double aveugle
Clyne , 1987 n=70/70 follow-up: 12 mois	Association: aspirine(ASA) + dipyridamole (DIP). versus placebo	stade II svre et stade III	Parallel groups Non dterminable
McCollum , 1991 n=286/263 follow-up: 35 mois	Aspirine + dipyridamole versus Placebo	40% de patients au stade II 60% de patients au stade IV	Parallel groups Double aveugle
aspirin vs contrle			
Lassila R , 1991 n=72/72 follow-up: 3 ans	- prvention de l'occlusion des artres pripriques par traitement base d'aspirine. - 250 mg aspirine par jour pendant 3 mois depuis le 17me jour aprs l'opratiion versus absence de traitement	- 144 patients dont 59 claudicants, 41 ischmies avances - ge moyen 60 ans - 105 hommes	Parallel groups Ouvert
ticlopidine vs contrle			

continued...

Trial	Treatments	Patients	Trials design and methods
Becquemín , 1997 n=122/121 follow-up: 24 mois	Ticlopidine (Ticlid, sanofi) 250 mg*2 /j versus placebo	Patients au stade II IV	Parallel groups Double aveugle
aspirin vs			
BOA , 2000 n=1351/1339 follow-up: 21 mois	Aspirine 80 mg/j peros dbut 5j aprs l'intervention pendant 21 mois versus Anti vitamine K: phenprocoumon ou acnocoumarol (INR cible :3.0-4.5) dbut 5j aprs l'intervention pendant 21 mois	51% de patients au stade II 21% de patients au stade III 28% de patients au stade IV	Parallel groups Ouvert
vs HBPM			
Edmondson , 1994 n=106/94 follow-up: 12 mois	Aspirine (ASA) et dipyridamole (DIP) versus Hparine de bas poids molculaire (Fragmin).	stade II pour 107 patients sauvetage de membre pour 93 patients	Parallel groups Ouvert

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2 antivitamins K

Trial	Treatments	Patients	Trials design and methods
phenprocoumon vs contrle			
Kretschmer , 1992 n=66/64 follow-up: 10 ans	phenprocoumon commenc pendant la 2me semaine post-opratoire. Temps de Quick cible : 15 25% versus absence d'anti-coagulation	51% de patients au stade II	Parallel groups Ouvert
warfarin vs contrle			
Sarac , 1998 n=32/24 follow-up: 3 ans	hparine (6 24 h avant l'intervention) puis warfarin pour un INR entre 2 et 3. versus pas d'anti-coagulation	AOMI stade non precis	Parallel groups Ouvert
Johnson , 2002 n=308/306 follow-up: 5 ans	warfarin 5 mg/j au 2me ou 3me j post-opratoire. INR cible : 1.4 2.8 versus contrle	stades II IV 614 patients inclus	Parallel groups Ouvert

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Trial	Treatments	Patients	Trials design and methods
rivaroxaban vs placebo			
VOYAGER PAD <i>ongoing</i> [NCT02504216] n=6500 follow-up:	Rivaroxaban 2.5 mg orally twice daily (5 mg cumulative daily dose) versus Placebo	Patients With Symptomatic Peripheral Artery Disease Undergoing Lower Extremity Revascularization Procedures	

References

VOYAGER PAD, :

4 About TrialResults-center.org

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