

Clinical trials of statins for heart failure in all type of patients

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1 statins

| Trial | Treatments | Patients | Trials design and methods |
|---|--|---|--|
| atorvastatin vs control | | | |
| Wojnicz , 2006 n=36/38 follow-up: 6 months | atorvastatin 40 mg/day versus conventional treatment for heart failure | patients with inflammatory dilated cardiomyopathy (DC) (positive immunohistochemistry results on endomyocardial biopsy) | Parallel groups open |
| Yamada , 2007 n=19/19 follow-up: mean 2.58y | atorvastatin 10 mg/d versus standard treatment | outpatients with mild to moderate CHF and radionuclide left ventricular ejection fraction (LVEF) <40% | Parallel groups |
| simvastatin vs control | | | |
| Hong , 2005 n=106/96 follow-up: 1 year | simvastatin versus no treatment | patients with ischemic heart failure who underwent percutaneous coronary intervention (PCI) for acute myocardial infarction (left ventricular [LV] ejection fraction <40%) | Parallel groups open |
| atorvastatin vs placebo | | | |
| Strey , 2005 n=24/24 follow-up: 6 weeks | atorvastatin 40mg versus placebo | patients with stable, symptomatic heart failure (New York Heart Association Class II or III) and a left ventricular ejection fraction <40% | Cross over |
| Sola , 2006 n=54/54 follow-up: 1y | atorvastatin 20 mg/day versus placebo | patients with nonischemic HF and a left ventricular ejection fraction (LVEF) <=35% | Parallel groups double blind |
| cerivastatin vs placebo | | | |
| Laufs , 2004 n=8/7 follow-up: mean 20 weeks | cerivastatin 0.4 mg versus placebo | patients with heart failure NYHA II-III caused by non-ischemic dilated cardiomyopathy | Parallel groups double blind |
| rosuvastatin vs placebo | | | |
| CORONA , 2007 [NCT00206310] n=2514/2497 follow-up: 32.9 months median | rosuvastatin 10mg/d versus placebo | patients at least 60 years of age with NYHA class II, III, or IV ischemic, systolic heart failure | Parallel groups double blind |
| Krum , 2007 n=40/46 follow-up: 6 months | rosuvastatine 40mg/d versus placebo | patients with systolic (LVEF<40%) CHF of ischemic or nonischemic etiology | Parallel groups double blind Australia |

continued...

| Trial | Treatments | Patients | Trials design and methods |
|--|--|---|--|
| GISSI-HF rosuvastatine , 2008 [NCT00336336] n=2314/2317 follow-up: 3.9y median (IQR 3-4.4) | low-dose rosuvastatin 10 mg daily versus placebo | Patients with NYHA classes II to IV heart failure, whatever the cause and the LVEF and already receiving optimized recommended therapy with no clear indication or contraindication to cholesterol-lowering therapy | Parallel groups double blind Italy |
| simvastatin vs placebo | | | |
| Node , 2003 n=24/27 follow-up: | simvastatin 10mg/d versus placebo | patients with symptomatic, nonischemic, dilated cardiomyopathy | |
| simvastatin vs ezetimibe | | | |
| Landmesser , 2005 n=10/10 follow-up: | simvastatin 10mg/d versus ezetimibe 10mg/d | patients with chronic heart failure | |

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2 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.

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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