Clinical trials of myocardial revascularization for acute myocardial infarction in facilated PCI

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1 combination facilated PCI

Trial	Treatments	Patients	Trials design and methods
Abciximab + reteplase vs primary intervention			
BRAVE (Kastrati) , 2004 n=125/128 follow-up: 30 days	-	symptom duration <12h	
FINESSE (combination-facilitated PCI) , 2008 [NCT00046228] n=828/806 follow-up: 90 days	combination-facilitated PCI with abciximab plus half-dose reteplase versus primary PCI (abciximab administered immediately before the procedure)	patients with acute ST-segment elevation myocardial infarction; symptom duration <6h	Parallel groups open
Eptifibatide + tenecteplase vs primary intervention			
ADVANCE-MI , 2005 n=69/77 follow-up: 30 days	-	symptom duration <4h	

References

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FINESSE (combination-facilitated PCI), 2008:

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ADVANCE-MI, 2005:

Facilitated percutaneous coronary intervention for acute ST-segment elevation myocardial infarction: results from the prematurely terminated ADdressing the Value of facilitated ANgioplasty after Combination therapy or Eptifibatide monotherapy in acute Myocardial Infarction (ADVANCE MI) trial. Am Heart J 2005;150:116-22 [16084157]

2 GP IIb/IIIa inhibitor-facilitated PCI

Trial	Treatments	Patients	Trials design and methods
Abciximab vs primary intervention			
ERAMI (Mesquita Gabriel) , 2003 n=36/38 follow-up: 30-day	facilated PCI with Abciximab; 025 mg/kg intravenous bolus, 0125 g/kg per min infusion versus primary intervention	symptom duration <12h	
FINESSE (abciximab-facilitated PCI) , 2008 [NCT00046228] n=818/806 follow-up: 90 days	abciximab-facilitated PCI versus primary PCI (abciximab administered immediately before the procedure)	patients with acute ST-segment elevation myocardial infarction; symptom duration <6h	Parallel groups open
REOMOBILE (Arntz) , 2003 n=52/48 follow-up: 30-day	facilated PCI with Abciximab; 025 mg/kg intravenous bolus, 0125 g/kg per min infusion versus primary intervention	symptom duration <6h	
Zorman , 2002 n=56/56 follow-up: In hospital	facilated PCI with Abciximab; 025 mg/kg intravenous bolus, 0125 g/kg per min infusion versus primary intervention	symptom duration <12h	
ReoPro-BRIDGING (Gyongyosi) , 2004 n=28/27 follow-up: 30-day	facilated PCI with Abciximab; 025 mg/kg intravenous bolus, 0125 g/kg per min infusion versus primary intervention	symptom duration <6h	
Bellandi , 2006 n=27/28 follow-up: 30-day	facilated PCI with Abciximab; 025 mg/kg intravenous bolus, 0125 g/kg per min infusion versus primary intervention	symptom duration <6h	
Eptifibatide vs primary intervention			
INTAMI (Zeymer) , 2005 n=53/49 follow-up: 30-day	facilated PCI with Eptifibatide; 180 g/kg intravenous double bolus, 20 g/kg per min infusion versus primary intervention	symptom duration <12h	
Tirofiban vs primary intervention			
On-Time (vant Hof) , 2004 n=245/247 follow-up: 65279;30-day	facilated PCI with Tirofiban; 10 g/kg intravenous bolus, 015 g/kg per min infusion versus primary intervention	symptom duration <6h	
TIGER-PA (Lee) , 2003 n=50/50 follow-up: 30-day	facilated PCI with Tirofiban; 10 g/kg intravenous bolus, 015 g/kg per min infusion versus primary intervention	symptom duration <12h	
Cutlip , 2003 n=28/30 follow-up: 30-day	facilated PCI with Tirofiban; 10 g/kg intravenous bolus, 015 g/kg per min infusion versus primary intervention	symptom duration <12h	

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Mesquita Gabriel H, Oliveira J, et almag Early administration of abciximab bolus in the emergency room improves microperfusion after primary percutaneous coronary intervention, as assessed by TIMI frame count: results of the ERAMI trialNO Eur Heart J 2003; 24 (suppl): 543 (abstr& txtPag

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REOMOBILE (Arntz), 2003:

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Zorman, 2002:

Zorman S, Zorman D, Noc M Effects of abciximab pretreatment in patients with acute myocardial infarction undergoing primary angioplasty. Am J Cardiol 2002;90:533-6 [12208418]

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Gyngysi M, Domanovits H, Benzer W, Haugk M, Heinisch B, Sodeck G, Hdl R, Gaul G, Bonner G, Wojta J, Laggner A, Glogar D, Huber K Use of abciximab prior to primary angioplasty in STEMI results in early recanalization of the infarct-related artery and improved myocardial tissue reperfusion - results of the Austrian multi-centre randomized ReoPro-BRIDGING Study. Eur Heart J 2004;25:2125-33 [15571828]

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Cutlip DE, Ricciardi MJ, Ling FS, Carrozza JP Jr, Dua V, Garringer J, Giri S, Caputo RP Effect of tirofiban before primary angioplasty on initial coronary flow and early ST-segment resolution in patients with acute myocardial infarction. Am J Cardiol 2003;92:977-80 [14556878]

3 thrombolysis-facilitated PCI

Trial	Treatments	Patients	Trials design and methods
vs primary intervention			
ASSENT-4 PCI (Van de Werf) , 2006 [NCT00168792] n=829/838 follow-up: 30-day	facilated PCI with tenecplase bodyweight-adjusted intravenous bolus: 30 mg of drug if bodyweight <60 kg, 35 mg if6069 kg, 40 mg if 7079 kg, 45 mg if 8089 kg, and 50 mg if >=90 kg versus primary intervention	symptom duration <6 h	
alteplase vs primary intervention			
LIMI (Vermeer) , 1999 n=74/75 follow-up: 42-day	facilated PCI with Alteplase 50 mg(intravenous bolus)mag versus primary intervention	symptom duration <6h	
PACT (Ross,) , 1999 n=302/304 follow-up: 30-day	facilated PCI with alteplase 50 mg (intravenous bolus) versus primary intervention	symptom duration <6h	
streptokinase vs primary intervention			
SAMI (ONeill) , 1992 n=59/63 follow-up: In hospital	facilated PCI with streptokinase 15 million units(intravenous) versus primary intervention	symptom duration <4h	
PRAGUE (Widimisky) , 2000 n=100/101 follow-up: 30-day	facilated PCI with Streptokinase 15 million units (intravenous) versus primary intervention	symptom duration <6h	
tenecteplase vs primary intervention			
GRACIA (Fernandez-Aviles,) , 2004 n=104/108 follow-up: 30-day	facilated PCI with bodyweight-adjusted intravenous tenecteplase bolus: 30 mg of drug if bodyweight <60 kg, 35 mg if6069 kg, 40 mg if 7079 kg, 45 mg if 8089 kg, and 50 mg if >=90 kg and Abciximab; 025 mg/kg intravenousbolus, 0125 g/kg per min infusi versus primary intervention	symptom duration <12h	

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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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