# Clinical trials of antioxydants for cardiovascular prevention in patients with renal disease

TrialResults-center www.trialresultscenter.org

### 1 antioxydant

Trial	Treatments	Patients	Trials design and methods
acetylcysteine vs placebo			
Tepel , 2003 n=64/70 follow-up: 14.5 y	acetylcysteine 600 mg twice daily versus placebo	patients undergoing maintenance hemodialysis for a minimum of 3 months 3 times weekly in an ambulatory center	Parallel groups double-blind Germany
vitamin E vs placebo			
$\frac{\text{SPACE}}{\text{n}=97/99}$ follow-up: 1.42 years	vitamin E 800 IU daily versus matching placebo	Haemodialysis patients aged 4075 years with pre-existing cardiovascular disease	Parallel groups double -blind Israel
HOPE renal insufficiency subgroup, 2004 n=499/494 follow-up: 4.5y	vitamin E 400 IU/day, natural versus placebo	patients with either known cardiovascular disease or diabetes and at least one additional coronary risk factor and renal insufficiency (sub group)	Factorial plan double-blind North and South America, Europe

#### Tepel, 2003:

Tepel M, van der Giet M, Statz M, Jankowski J, Zidek W The antioxidant acetylcysteine reduces cardiovascular events in patients with end-stage renal failure: a randomized, controlled trial. Circulation 2003;107:992-5 [12600912]

#### **SPACE**, 2000:

Boaz M, Smetana S, Weinstein T, Matas Z, Gafter U, Iaina A, Knecht A, Weissgarten Y, Brunner D, Fainaru M, Green MS Secondary prevention with antioxidants of cardiovascular disease in endstage renal disease (SPACE): randomised placebo-controlled trial. Lancet 2000 Oct 7;356:1213-8 [11072938]

#### HOPE renal insufficiency subgroup, 2004:

Mann JF, Lonn EM, Yi Q, Gerstein HC, Hoogwerf BJ, Pogue J, Bosch J, Dagenais GR, Yusuf S Effects of vitamin E on cardiovascular outcomes in people with mild-to-moderate renal insufficiency: results of the HOPE study. Kidney Int 2004;65:1375-80 [15086477] 10.1111/j.1523-1755.2004.00513.x

## 2 About TrialResults-center.org

TrialResults-center is an innovative knowledge database that collects the results of RCTs and provides dynamic interactive systematic reviews and metaanalysis 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 the rapeutic 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.