

Newer Antiplatelets

Key Questions and Inclusion Criteria

Update 1

Key Questions

1. For adults with acute coronary syndromes or coronary revascularization via stenting or bypass grafting, prior ischemic stroke or TIA, or symptomatic peripheral vascular disease do antiplatelets differ in effectiveness?
2. For adults with acute coronary syndromes or coronary revascularization via stenting or bypass grafting, prior ischemic stroke or TIA, or symptomatic peripheral vascular disease do antiplatelets differ in safety or adverse events?
3. Are there subgroups of patients based on demographics (age, racial groups, gender), other medications (drug-drug interactions), comorbidities (drug-disease interactions), or pregnancy for which one antiplatelet is more effective or associated with fewer adverse events?

Inclusion Criteria

Adult populations

- Acute coronary syndromes or coronary revascularization via stenting or bypass grafting
- Prior ischemic stroke or TIA
- Symptomatic peripheral vascular disease

Interventions

Clopidogrel (Plavix)*

Ticlopidine (Ticlid)*

Dipyridamole and aspirin (Aggrenox)

*As monotherapy or in combination with aspirin

Effectiveness outcomes

Populations

- Acute coronary syndromes or coronary revascularization via stenting or bypass grafting
- Prior ischemic stroke or TIA
- Symptomatic peripheral vascular disease

Effectiveness outcomes

- a. Mortality (all-cause and cardiovascular)
- b. Cardiovascular events (MI, stroke)
- c. Invasive vascular procedure failure (including need for additional invasive vascular procedures)

Safety outcomes

- Overall adverse effects reported
- Withdrawals due to adverse effects
- Serious adverse events reported
- Specific adverse events or withdrawals due to specific adverse events (e.g., gastrointestinal, increased bleeding, neutropenia, rash, etc.)

Study designs

1. For effectiveness, controlled clinical trials and systematic reviews
2. For safety, controlled clinical trials and observational studies