

aspirin: usual recommended low dose = 81-162mg/day
clopidogrel = Plavix; **dipyridamole + aspirin** = Aggrenox;
prasugrel = Effient

ATC - *BMJ*. January 12 2002; 324(7329):71-86
CAPRIE - *Lancet*. Nov 16 1996; 348(9038):1329-1339
CHARISMA - *N Engl J Med*. Apr 20 2006; 354(16):1706-1717
CLARITY - *N Engl J Med*. Mar 24 2005; 352(12):1179-1189
COMMIT - *Lancet*. Nov 5 2005; 366(9497):1607-1621
CURE - *N Engl J Med*. Aug 16 2001; 345(7):494-502
ESPRIT - *Lancet*. May 20 2006; 367:1665-1673
ESPS2 - *J Neurol Sci*. Nov 1996; 143(1):1-13
MATCH - *Lancet*. Jul 24-30 2004; 364(9431):331-337
PRoFESS - *N Eng J Med*; Sep 18 2008; 359(12):1238-1251
TRITON - *N Eng J Med*. Nov 15 2007; 357(20):2001-2015

Full explanations and references are contained in the evidence document which accompanies this card. These are general recommendations only; specific clinical decisions must be made by the treating physician based on assessment of the individual patient.

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Antiplatelet therapy: a summary of the evidence

Condition	Recommended Treatment	Evidence
Acute Coronary Syndromes [Unstable angina, non-ST-segment elevation MI (NSTEMI), and ST-segment elevation MI (STEMI)]	CLOPIDOGREL + ASPIRIN for at least 1 year. PRASUGREL + ASPIRIN for 15 months may be a superior alternative for some non-elderly ACS patients who have undergone PCI.	CURE, COMMIT, CLARITY, CHARISMA, CAPRIE, TRITON
Past MI	CLOPIDOGREL for high-risk patients*, ASPIRIN for all others	CHARISMA, CAPRIE
Stable angina	ASPIRIN	Antiplatelet Trialists Collaboration, CHARISMA
Elective PCI	CLOPIDOGREL + ASPIRIN for at least a year	CREDO
Stroke	CLOPIDOGREL or ASPIRIN + DIPYRIDAMOLE	MATCH, CHARISMA, ESPS2, ESPRIT, ProFESS
PAD	CLOPIDOGREL	CHARISMA, CAPRIE
PRIMARY PREVENTION	ASPIRIN only for patients in whom benefits outweigh risks	POPADAD, JPAD, USPSTF

***High risk patients:** history of coronary artery disease, stroke, or TIA, and any of the following: bypass surgery, events involving multiple vascular beds, two or more ischemic events, diabetes, or high cholesterol.