

SAFETY AND EFFECTIVENESS OF THE OFF-LABEL USE OF CANGRELOR IN PERIOPERATIVE BRIDGING: A CASE SERIES

AUTORES

J. SANTANDER REBOREDA, P. LALUEZA BROTO, P. MARRERO ÁVAREZ, M. BOSCH FERRER, H.C. GARCÍA DIAZ, D. ANGUITA DOMINGO, M.Q. GORGAS TORNER

BACKGROUND AND IMPORTANCE



Cangrelor has been proposed for the off-label indication of antiplatelet bridging prior to surgery in patients felt to be at high risk for thrombotic complications, particularly in those who have had recent coronary stenting and are therefore at higher risk for subacute stent thrombosis.

AIM AND OBJECTIVES

To determine the safety and effectiveness of cangrelor bridging therapy for patients undergoing urgent invasive procedures

MATERIALS AND METHODS



Retrospective observational study that included all patients who received cangrelor for off-label bridging purposes from January 2022 and June 2023 in a tertiary hospital. Demographic, clinical and those variables related with the treatment were captured from electronic record data.

- Efficacy: we report in-hospital mortality and thrombotic events, including stroke and myocardial infarction, during 30 days after cangrelor administration.
- Safety: bleeding was only considered associated with cangrelor if it occurred during administration or up to \bullet 48 hours after discontinuation according to Bleeding Academic Research Consortium (BARC) 3-5.

RESULTS

Hemorrhag ASTAP* Days of Start times of Anti-aggregant Surgical Previous Patie antiplatelet the canorelor intervention restarted ic risk antiaggregant nts

- patients were identified • 7 (100% male; median age 71 years).
- All of them had coronary arterial stenting within the previous 1 month. The rest of the data can be found at the table.
- No patient in the study developed in-stent thrombosis thrombotic other or complication while receiving cangrelor neither withing 30 days of stopping therapy.
- patient experienced No

nts	Intervention	(HAS- BLEED)	antiaggregant	withdrawal	before the procedure	restarted	
1	Catheter implantation	3	Clopidogrel	2	21	Clopidogrel	2
2	Femur fracture	3	Clopidogrel	5	72	Clopidogrel	1
3	Catheterism	4	Ticagrelor	5	72	Clopidogrel	24
4	Femur fracture	3	Ticagrelor	3	72	Ticagrelor	12
5	Catheterism	6	Clopidogrel	5	72	Clopidogrel	120
6	Angioplasty	6	Clopidogrel	3	72	Clopidogrel	4

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Clopidogrel

relevant bleeding clinically according to BARC.

*ASTAP : Anti-aggregation start times after procedure

Ticagrelor

CONCLUSION AND RELEVANCE

This study of patients receiving cangrelor as short-term antiplatelet therapy prior to surgical procedures with history of coronary stent placement demonstrated that a low dose of 0,75 mcg/kg/min provided adequate efficacy and security.

Catheterism



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