

# SUITABILITY OF THE DUAL ANTIPLATELET THERAPY TO THE GUIDELINES OF EUROPEAN SOCIETY OF CARDIOLOGY IN ACUTE CORONARY SYNDROME



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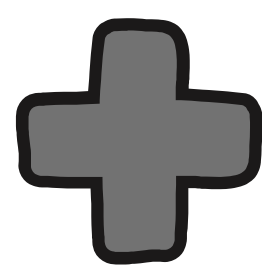
B01- ANTITHROMBOTIC AGENTS

## BACKGROUND

The dual antiplatelet therapy (DAPT)



acetylsalicylic acid



one P2Y12 platelet receptor inhibitor

represents the first line to treat patients with acute coronary syndrome (ACS).

## AIM AND OBJECTIVES

To review the DAPT prescribed to patients with ACS admitted in a third level hospital and to assess their adequacy grade to the European guidelines of cardiology (ESC).

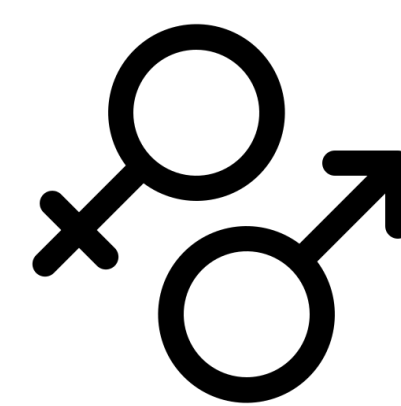
## MATERIALS AND METHODS

Observacional AND retrospective study



JAN-JUN 2022

Studied variables



diagnostic treatment cardiovascular risk factors (CVRF)

For each patient ischemic and hemorrhagic risk have been calculated (using GRACE and CRUSADE score)

Fragile patients → ≥ 3 CVRF

DX

Unstable angina	NSTEMI	STEMI
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ESC guidelines established the appropriate DAPT for each patient according to the ACS's type and patient's ischemic-hemorrhagic risk. Adequacy was assessed in terms of compliance or non-compliance with these recommendations.

HOW?

Data were exported from medical history thanks to SAP® informatics' tool and Silicon® electronic prescription program. Statistic analysis was made by Stata.v.15.0®.

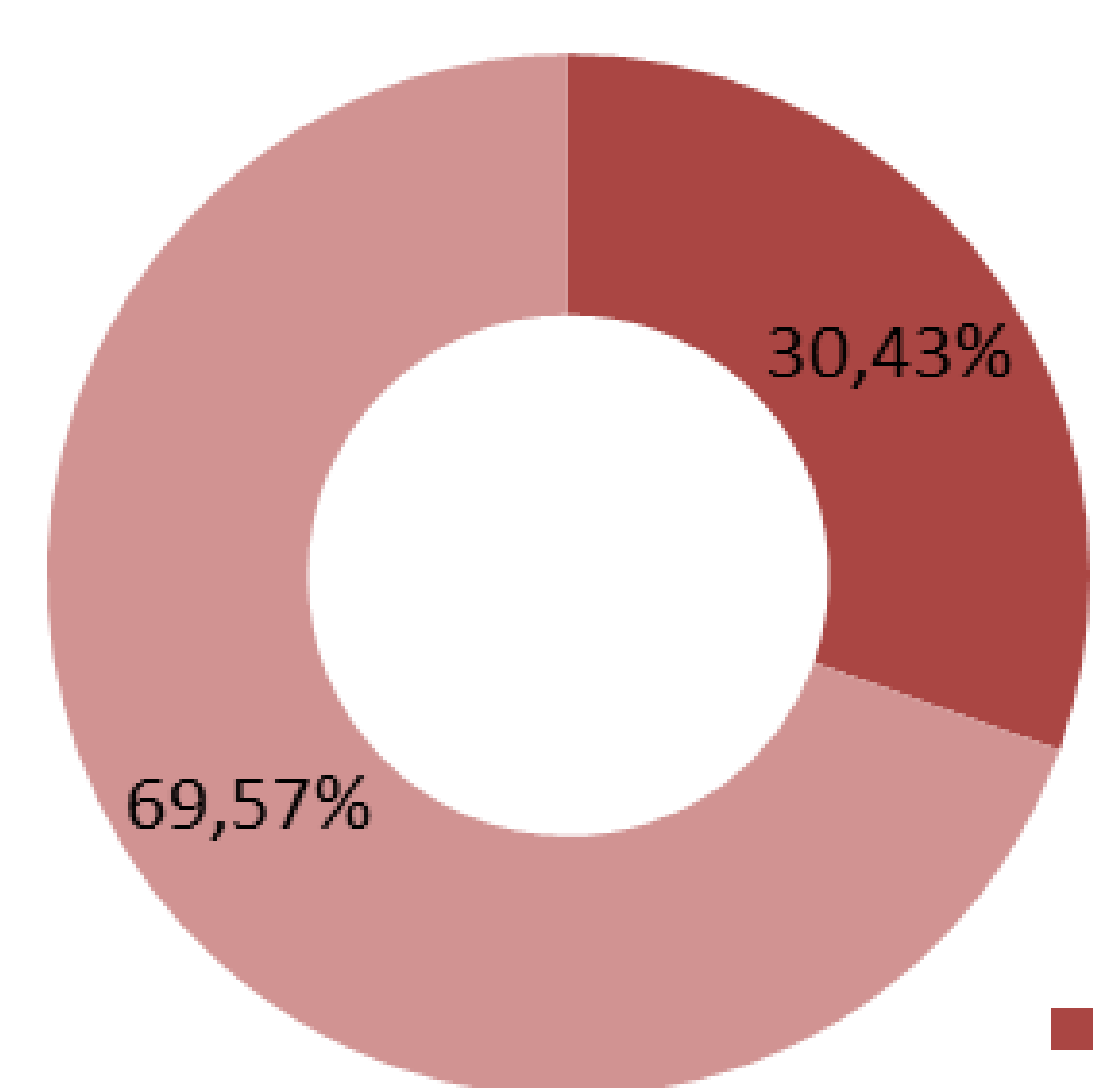
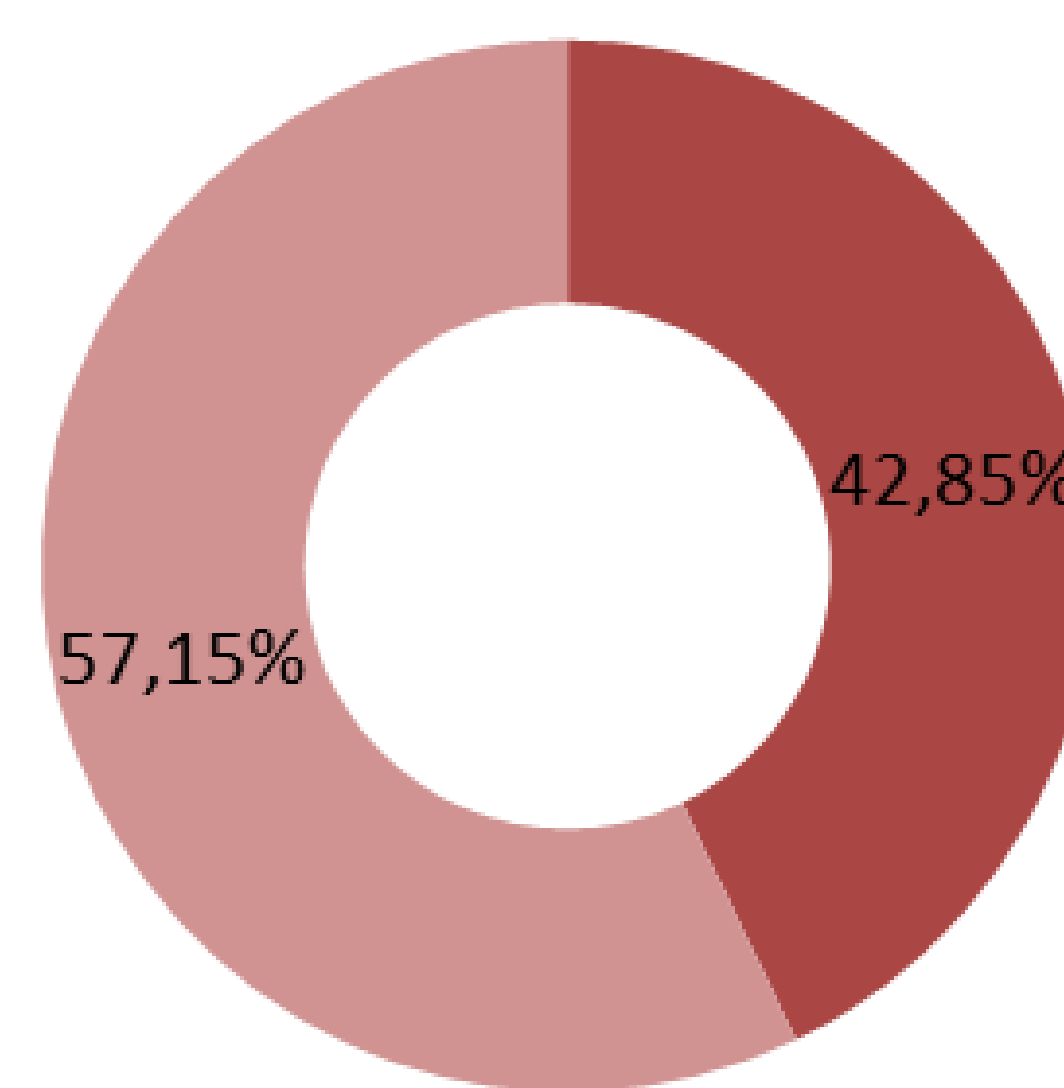
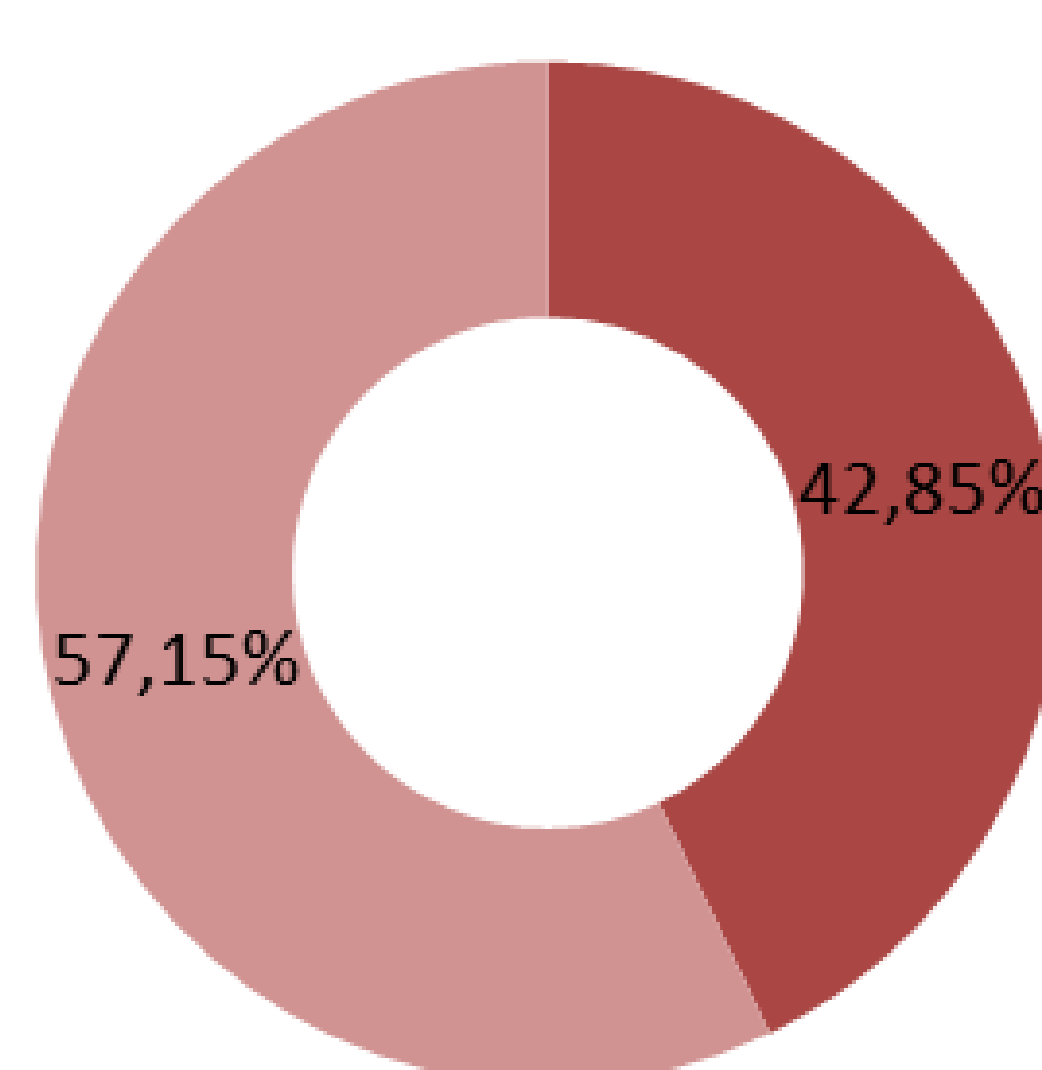
## RESULTS

95 patients

74,74%(71) ♂  
64,38±12,77 years

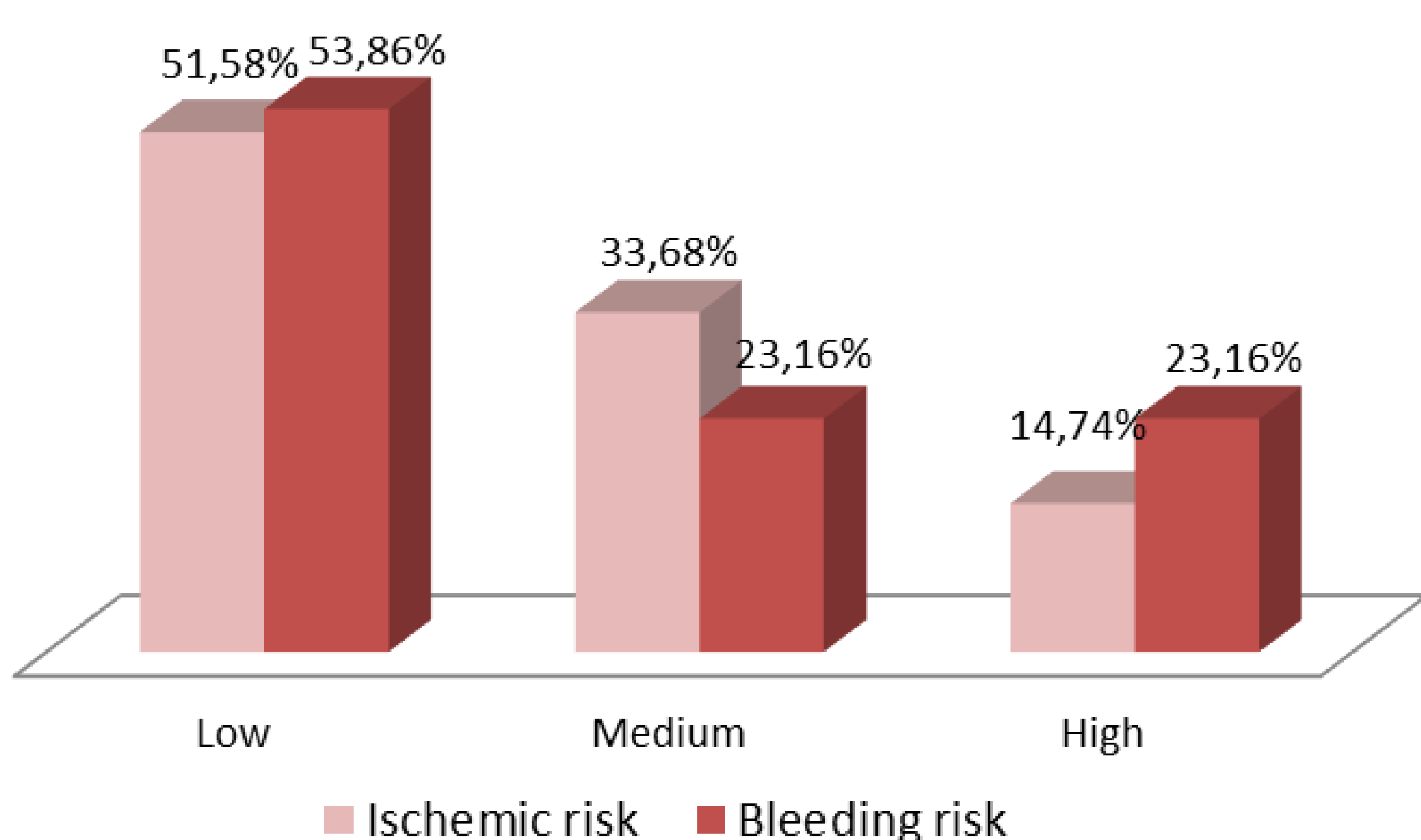
Non-adequacy of prescribed DAPT with ESC guidelines → 37,89%(36)

Unstable angina	NSTEMI	STEMI
7,37% (7)	44,21% (42)	48,42% (46)



NO  
YES

- ✓ DAPT all patients
- ✓ AC POST ICP 21,05% (20)



## CONCLUSION AND RELEVANCE

- % of non-adequacy of prescribed DAPT to recent published ESC guidelines is considerable, leading to disparity of criteria with guidelines and between professionals and possible treatment's inequity between patients
- Future studies could explore the importance of pharmacist integration and validation to avoid reported discrepancies.