

# ACUTE CORONARY SYNDROME: USE OF THE NEW ANTIPLATELET DRUGS IN CLINICAL PRACTICE

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## BACKGROUND

Prasugrel and ticagrelor are new antiplatelet agents developed for patients with Acute Coronary Syndrome (ACS) and high risk of thrombosis. Their benefits in terms of mortality and major cardiovascular events have been well established, but some concerns remain regarding their safety.

## PURPOSE

To analyse antiplatelet prescriptions focusing on new drugs and with a subgroup analysis (diabetes, renal function, age, weight, haemorrhage risk).

## MATERIALS AND METHODS

A retrospective observational study was carried out in our healthcare area from January to June 2013. Patients included had ACS and required antiplatelet therapy. Demographic and clinical data were obtained from electronic medical records (Historia de Salud®, PowerChart-Millennium® and Intensive Care Unit programme). CRUSADE scale was used to calculate the bleeding risk.

## RESULTS

379 patients



72.8% male  
mean age 64.9±12.8 years



Diagnosis

134 with ST-Segment Elevation Myocardial Infarction  
245 with Non-ST Elevation Myocardial Infarction



350 patients received clopidogrel  
52 were treated with new drugs

29 prasugrel  
23 ticagrelor



37 switched to new drugs

9 hospital deaths

At discharge:

280 with dual antiplatelet therapy



239 clopidogrel + AAS  
27 prasugrel + AAS  
15 ticagrelor + AAS

81 with single therapy

64 AAS  
17 clopidogrel

9 interrupted treatment

Table 1. Subgroup analysis on patients with dual therapy at discharge.

	Clopidogrel	Prasugrel	Ticagrelor
<b>Diabetic (n= 98)</b>	79	16	3
<b>ClCr&lt;60 ml/min at admission (n=46)</b>	44	2	0
<b>Age &gt;75years (n=60)</b>	58	0	2
<b>Weight &lt;60Kg (n=25)</b>	25	0	0
<b>Risk of haemorrhage:</b>			
- High (CRUSADE≥41points) (n=35)	33	2	0
- Low/moderate (CRUSADE≤30points) (n=212)	172	25	15

## CONCLUSIONS

**1** Use of new antiplatelet drugs in our healthcare area is still moderate.

**2** They are prescribed only in selected cases with low bleeding risk.

**3** The results show only a disposition towards prescribing prasugrel for diabetic patients according to the clinical trials results, but not in other subgroups that can benefit from new drugs.