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PHARMACOGENETICS IN ANTIPLATELET TREATMENT WITH CLOPIDOGREL IN VASCULAR PATHOLOGY

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BACKGROUND

Different polymorphisms have been associated with interindividual differences in response to clopidogrel. However, variability within the CYP2C19 and ABCB1 polymorphisms show the higher level of evidence.



We evaluated the effect of CYP2C19*2, ABCB1 3435 C>T polymorphisms separately, and the combined effect grouping patients into: -Loss of function alleles-carriers (LOF) -Non loss of function alleles carriers (non- LOF)

•Primary endpoint: ACS, stroke and reoperation for lower limb thrombosis post-PTA after the prescription of clopidogrel measured at12 months.

-Secundary endpoint : intermittent claudication and Fontaine/Rutherford degree measured at12 months.

MATERIAL AND METHODS

• 72 atherosclerotic of arteries of the lower limb disease patients following percutaneous transluminal angioplasty (PTA) treated with clopidogrel were recruited.

 The CYP2C19*2(rs4244285) and ABCB1(rs1045642) SNPs were genotyped using the TaqMan[®] allelic discrimination assay technology.

RESULTS								
	CYP2C19*2 LOF	CYP2C19*2 Non-LOF	OR (95% CI)	P-value	Combined LOF	Combined non-LOF	OR (95% CI)	P-value
Primary endpoint (n=25, 34.7%)	11 (44%)	14 (56%)	4.49 (1.45 – 13.84)	0.009	17 (68%)	8 (32%)	5.00 (1.75-14.27)	0.003
Non-primary endpoint (n=47, 65.3%)	7 (15%)	40 (85%)			14 (30%)	33 (70%)		
Fontaine/Rutherford degree worse evolution (n=30, 41.6%)	14 (46.6%)	16 (53.4%)	8.31 (2.36 – 29.16)	0.001	23 (76.6%)	7 (23.4%)	13.96 (4.44 – 43.82)	P<0.0001
Fontaine/Rutherford degree non-worse evolution (n=42, 58.4%)	4 (9%)	38 (91%)			8 (19%)	34 (81%)		





women	12 (26.7)
Diabetes	31 (68.9)
Hypertension	31 (68.9)
Dyslipidemia	15 (33.3)
Ex/ Smokers	31 (68.9)

•CYP2C19*2 LOF alleles and the combined CYP2C19*2 and ABCB1LOF alleles had a significant higher risk for the primary endpoint and a worse Fontaine/Rutherford degree evolution than non-LOF patients.

•CYP2C19 and ABCB1 polymorphisms could be used as genetic markers of cardiovascular events in vascular patology.



