Reduced-dose prasugrel efficacious for acute coronary syndrome

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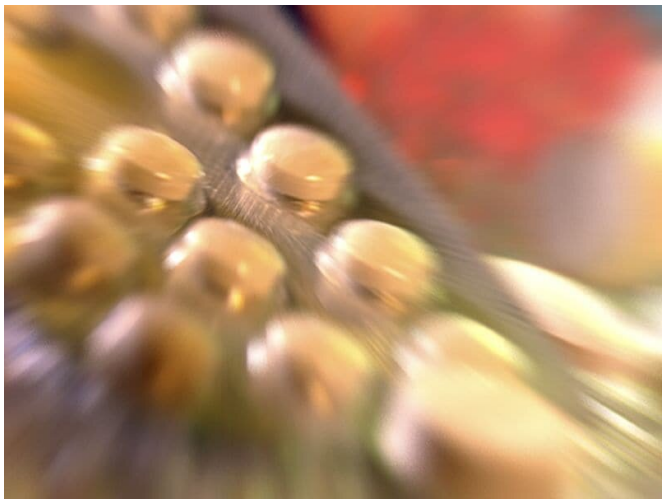

(HealthDay)—For elderly or low-weight patients with acute coronary syndrome (ACS), a reduced dose of prasugrel is efficacious compared with ticagrelor, according to a study published online July 21 in the *Annals of Internal Medicine*.

Maurizio Menichelli, M.D., from Ospedale Fabrizio Spaziani in Frosinone, Italy, and colleagues conducted a prespecified analysis of 3,997 patients with ACS planned for invasive management randomly assigned to receive either a standard dose of ticagrelor or prasugrel (reduced dose in elderly or low-weight group; standard dose in neither elderly nor low-weight group).

The researchers found that the efficacy end point (composite of death, myocardial infarction, or stroke) occurred in 12.7 and 14.6 percent of patients assigned to receive prasugrel and ticagrelor, respectively, in the elderly or low-weight group (hazard ratio, 0.82; 95 percent confidence interval, 0.60 to 1.14). The efficacy end point occurred in 4.8 and 7.3 percent of those receiving prasugrel and ticagrelor, respectively, among those who were neither elderly nor low-weight (hazard ratio, 0.65; 95 percent confidence interval, 0.48 to 0.88). Bleeding Academic Research Consortium type 3 to 5 bleeding was reduced for patients receiving prasugrel versus ticagrelor in the elderly or low-weight group (8.1 versus 10.6 percent; hazard ratio, 0.72; 95 percent confidence interval, 0.46 to 1.12).

The "current analyses suggest that the prasugrel dose reduction regimen for elderly or underweight patients with ACS is effective and safe," write the authors of an accompanying editorial.

Several authors disclosed financial ties to pharmaceutical companies, including Eli Lilly, which manufactures prasugrel.

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