

## ACC: PPI tx also beneficial for those on low-dose aspirin

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(HealthDay)—For patients requiring dual antiplatelet therapy (DAPT),

gastroprotection with proton-pump inhibitors (PPIs) is also beneficial for patients receiving low-dose aspirin, according to a study published online March 21 in the *Journal of the American College of Cardiology*. The research will also be presented at the upcoming annual meeting of the American College of Cardiology, to be held from April 2 to 4 in Chicago.

Muthiah Vaduganathan, M.D., M.P.H., from the Brigham and Women's Hospital Heart & Vascular Center in Boston, and colleagues classified 3,752 participants from the Clopidogrel and the Optimization of Gastrointestinal Events Trial (COGENT) into low-dose ( $\leq 100$  mg; 2,480 participants) and high-dose ( $> 100$  mg; 1,272 patients) aspirin groups. Patients were followed for a median of 110 days.

The researchers found that, compared with low-dose aspirin, high-dose aspirin correlated with similar 180-day Kaplan-Meier estimates of adjudicated composite gastrointestinal (GI) events (adjusted hazard ratio, 0.88; 95 percent confidence interval, 0.46 to 1.66) and major adverse cardiac events (adjusted hazard ratio, 0.73; 95 percent confidence interval, 0.48 to 1.11). In low-dose and high-dose aspirin groups, randomization to PPI therapy correlated with a reduction in 180-day Kaplan-Meier estimates of the primary GI end point, with no adverse effect on the primary cardiovascular end point in either group.

"Gastroprotection with PPI therapy should be utilized in appropriately selected patients with coronary artery disease requiring DAPT, even if the [patients](#) are on low-dose [aspirin](#)," the authors write.

Several authors disclosed financial ties to pharmaceutical companies, including Cogentus Pharmaceuticals, which funded the COGENT trial.

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