Ticagrelor-aspirin beneficial for mild-to-moderate stroke, TIA

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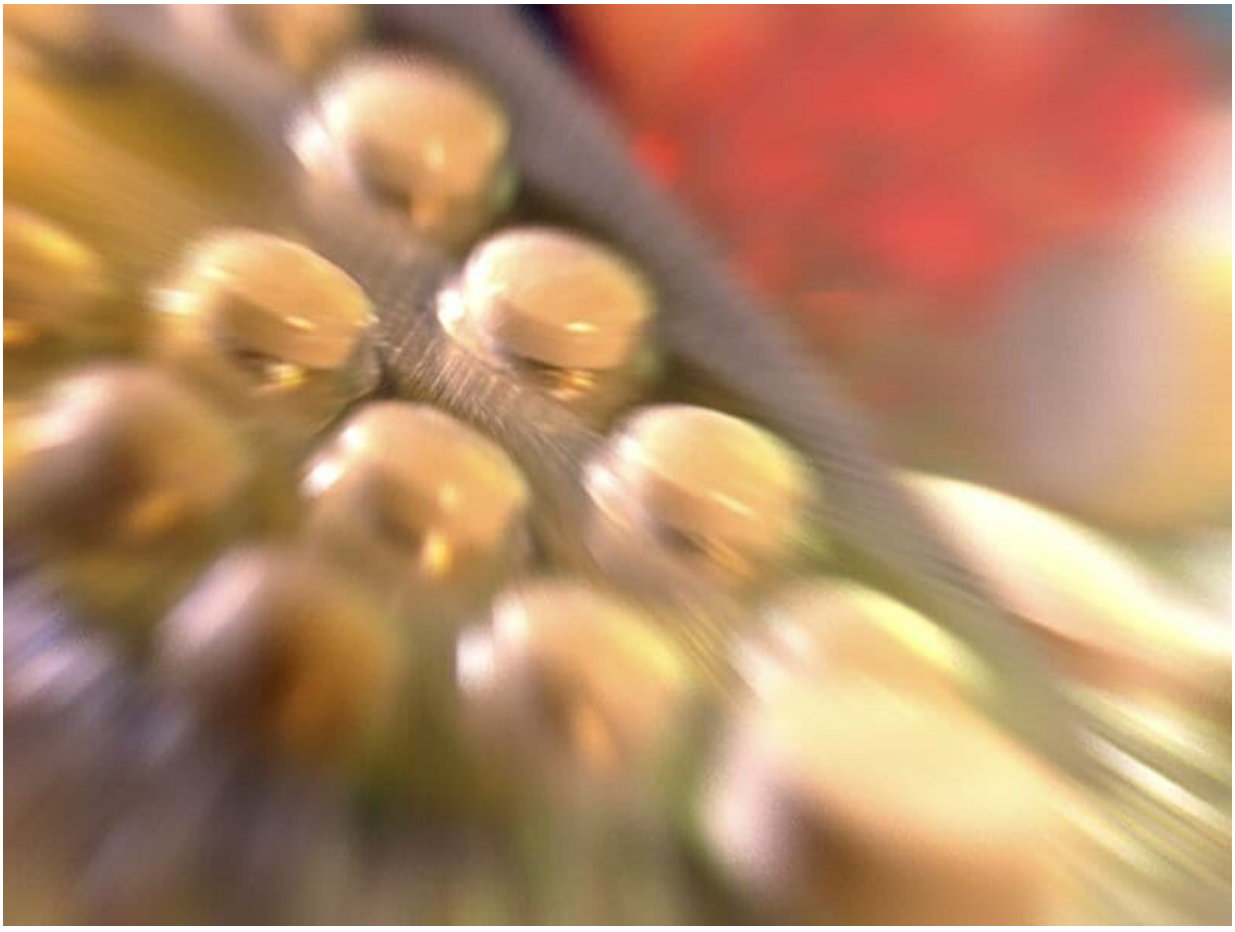

(HealthDay)—Ticagrelor-aspirin is associated with a reduced risk for the

composite of stroke or death within 30 days of mild-to-moderate acute noncardioembolic ischemic stroke or transient ischemic attack (TIA), according to a study published in the July 16 issue of the *New England Journal of Medicine*.

S. Claiborne Johnston, M.D., Ph.D., from Dell Medical School at the University of Texas at Austin, and colleagues conducted a randomized trial involving patients with a mild-to-moderate acute noncardioembolic ischemic stroke or TIA who were not undergoing thrombolysis or thrombectomy. Within 24 hours after symptom onset, patients were randomly assigned in a 1:1 ratio to receive either a 30-day regimen of ticagrelor plus aspirin (5,523 patients) or matching placebo plus aspirin (5,493 patients).

The researchers found that a primary-outcome event (composite of stroke or death within 30 days) occurred in 5.5 and 6.6 percent of patients in the ticagrelor-aspirin and aspirin groups, respectively (hazard ratio, 0.83). Ischemic stroke occurred in 5.0 and 6.3 percent in the ticagrelor-aspirin and aspirin groups, respectively (hazard ratio, 0.79). There was no significant between-group difference noted in the incidence of disability. Severe bleeding occurred in 0.5 and 0.1 percent of patients in the ticagrelor-aspirin and aspirin groups, respectively.

"Generalizability of the results of the current trial is limited by the exclusion of patients who had more severe strokes (National Institutes of Health Stroke Scale score >5), had a cardioembolic stroke, or had initiation of treatment more than 24 hours after symptom onset," the authors write.

Several authors disclosed financial ties to pharmaceutical companies, including AstraZeneca, which manufactures ticagrelor and funded the study.

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