

Milrinone, dobutamine similarly effective for cardiogenic shock

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(HealthDay)—Results from a pragmatic randomized, double-blind

clinical trial indicate that milrinone and dobutamine yield similar outcomes in the treatment of cardiogenic shock, according to a study published in the Aug. 5 issue of the *New England Journal of Medicine*.

Rebecca Mathew, M.D., from the University of Ottawa Heart Institute in Canada, and colleagues randomly assigned patients with [cardiogenic shock](#) to receive milrinone (96 patients) or dobutamine (96 patients). Comparisons were made with respect to a composite primary outcome of in-hospital death from any cause, resuscitated cardiac arrest, receipt of a cardiac transplant or [mechanical circulatory support](#), nonfatal myocardial infarction, transient ischemic attack or stroke diagnosed by a neurologist, or initiation of renal replacement therapy.

The researchers found that the primary outcome was similar between the two groups (49 percent in the milrinone group and 54 percent in the dobutamine group; relative risk [RR], 0.90; 95 percent confidence interval [CI], 0.69 to 1.19; $P = 0.47$). Results were similar when looking at individual components, including in-hospital death (RR, 0.85; 95 percent CI, 0.60 to 1.21), resuscitated [cardiac arrest](#) (hazard ratio [HR], 0.78; 95 percent CI, 0.29 to 2.07), receipt of mechanical circulatory support (HR, 0.78; 95 percent CI, 0.36 to 1.71), or initiation of renal replacement therapy (HR, 1.39; 95 percent CI, 0.73 to 2.67).

"In contrast to our hypothesis, we did not find a significant advantage of milrinone over dobutamine with respect to the composite primary outcome or secondary outcomes," the authors write.

One author disclosed financial ties to the medical technology industry.

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

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