

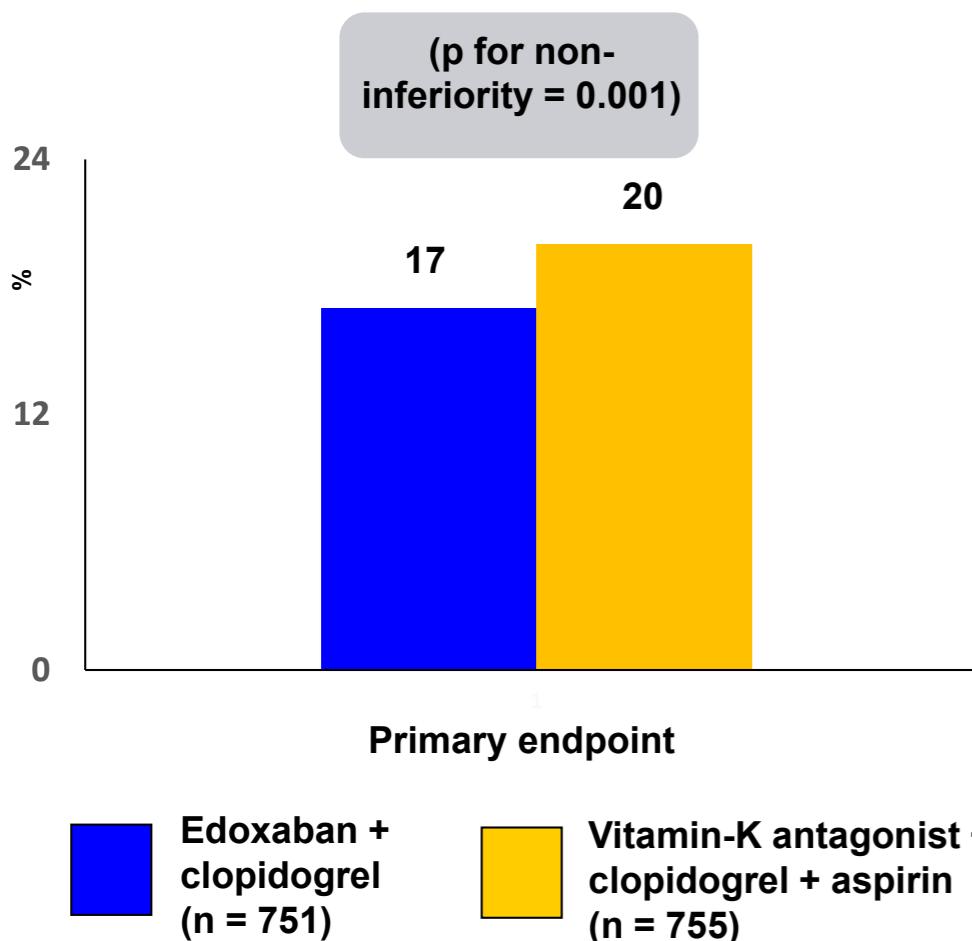
ENTRUST-AF PCI

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Trial Description: Patients with atrial fibrillation and recent PCI were randomized to edoxaban 60 mg daily plus clopidogrel 75 mg daily for 12 months versus a vitamin K antagonist and clopidogrel 75 mg daily for 12 months plus aspirin (100 mg once daily, for 1–12 months).



RESULTS

- Primary endpoint: major or clinically relevant nonmajor bleeding at 12 months occurred in 17% of the edoxaban group compared with 20% of the vitamin K antagonist group (p for noninferiority = 0.001, p for superiority = 0.12)
- Cardiovascular death, myocardial infarction, stroke, systemic embolism, or definite stent thrombosis: 7% with edoxaban vs. 6% with vitamin K antagonist (p = NS)

CONCLUSIONS

- Among patients with atrial fibrillation and recent PCI, edoxaban/clopidogrel vs. vitamin K antagonist/dual antiplatelet therapy was noninferior for bleeding, with similar ischemic outcomes

Vranckx P, et al. Lancet 2019;Sep 3:[Epub]