

OBTAIN

Occurrence of Bleeding and Thrombosis during Antiplatelet therapy In Non-cardiac surgery

Investigators

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The Aim of the Study

The OBTAIN study will examine the risks and benefits of continuing antiplatelet treatment in patients presenting for non-cardiac surgery who have one or more coronary artery stents in situ. The risks of perioperative major adverse cardiac events (MACE) in patients who discontinue antiplatelet drugs will be compared with the risk of intraoperative and postoperative bleeding in patients who continue these drugs.

The Clinical Problem

Percutaneous coronary intervention (PCI) has revolutionised the management of coronary artery disease but has brought with it difficult challenges for the anaesthetist.

It is not clear from current evidence if patients who have undergone PCI and are now to undergo non-cardiac surgery should have antiplatelet drugs continued through the perioperative period. If antiplatelet agents are stopped the patient is at a markedly increased risk of perioperative cardiac events (MACE). If they are continued the risk of intraoperative and postoperative bleeding may be increased.

The Size of the Problem

- 1.6 million PCI procedures will be performed in Europe in 2010
- Up to 5% of patients presenting for some types of non-cardiac surgery may have a coronary stent in situ.

The OBTAIN Study

The OBTAIN study is designed to tell us the best antiplatelet therapy to give to patients who have undergone PCI and now require non-cardiac surgery.

- Anaesthetists in participating centres will identify patients presenting for non-cardiac surgery who have coronary stents in situ and record details of their cardiac disease, antiplatelet agents and cardiac and bleeding complications.
- The statistical technique of propensity scoring will be used to match patients according to their antiplatelet therapy.

JOIN THE CLINICAL TRIAL NETWORK !

- The incidence of Major Adverse Cardiac Events (MACE) and bleeding will be compared between patients on different antiplatelet treatments.
- The safest antiplatelet strategy for non-cardiac surgery patients will be determined.

The Size of the Study

- We plan to study 1,400 patients
- At least 50 centres across all European countries will be needed

Inclusion Criteria

- Patients undergoing non-cardiac surgery within four years of PCI with the placement of a bare metal or drug eluting stent

Exclusion Criteria

- Patients maintained on anticoagulant therapy e.g. heparin infusion before and after surgery. (This does not include the use of a bolus dose of heparin during vascular surgery or low dose heparin for thromboprophylaxis.)
- Patients receiving bridging therapy with heparin or other drugs to compensate for the withdrawal of antiplatelet drugs.

Becoming a Local Investigator

- OBTAIN is one of four studies selected to launch the ESA Clinical Trials Network. All ESA members who have a relevant clinical practice are invited to participate.
- You can register to participate in the study in person at the ESA-CTN Booth at the Helsinki Congress or by e-mailing [INSERT ESA-CTN E-MAIL HERE].
- Data collection will use a tick-box form and electronic data transfer to avoid excessive paperwork.
- All centres and investigators that have contributed patients will be listed on the study website and the major publications from the study.
- All successfully recruiting centres will be identified as potential sites for future ESA Clinical Trials Network Studies



***Further information: www.euroanaesthesia.org and
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