Global patterns of use of thrombolytic, antithrombotic and antiplatelet therapy in patients with acute coronary events. Insights from the Global Registry of Acute Coronary Events (GRACE)

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Background: There is an abundance of data from clinical trials on the use of thrombolytic, antithrombotic and AP agents in patients with ACS. However, the optimal integration of these agents into routine clinical practice remains the subject of debate because the relative merits of using these therapies individually and in combination are unclear.

Methods and results: GRACE is a prospective, multinational, observational study covering the spectrum of patients hospitalized with ACS. We examined patterns of use of thrombolytic, antithrombotic and AP therapies in 3354 unselected patients (Table). Of the patients who received intravenous GP IIb/IIIa inhibitors (n=373), 43% also received a LMWH.

Treatment	Aspirin/oral AP	Heparin	LMWH	GP IIb/IIIa	
		Patients (%)			
STEMI or LBBB (n=1259)	95	62	41	16	
With thrombolytic (n=49	9) 97	69	31	11	
Other ACS (n=2095)	90	51	45	8	

Table. Use of anticoagulant therapies in patients with ACS

Conclusions: Wide variations exist in the use of these therapies in patients with ACS. Future analyses of the GRACE data involving greater numbers of patients should help to reveal whether these variations are influenced by the results of randomized trials or practice guidelines.