



# TRITON TIMI-38 STENT ANALYSIS

## Prasugrel Compared to Clopidogrel in Patients with Acute Coronary Syndromes Undergoing PCI with Stenting: the TRITON - TIMI 38 Stent Analysis

Stephen D. Wiviott, Elliott M. Antman, Ivan Horvath, Matyas Keltai, Jean-Paul R. Herrman, Frans van de Werf, William Downey, Benjamin M. Scirica, Sabina A. Murphy, Carolyn H. McCabe, Eugene Braunwald.

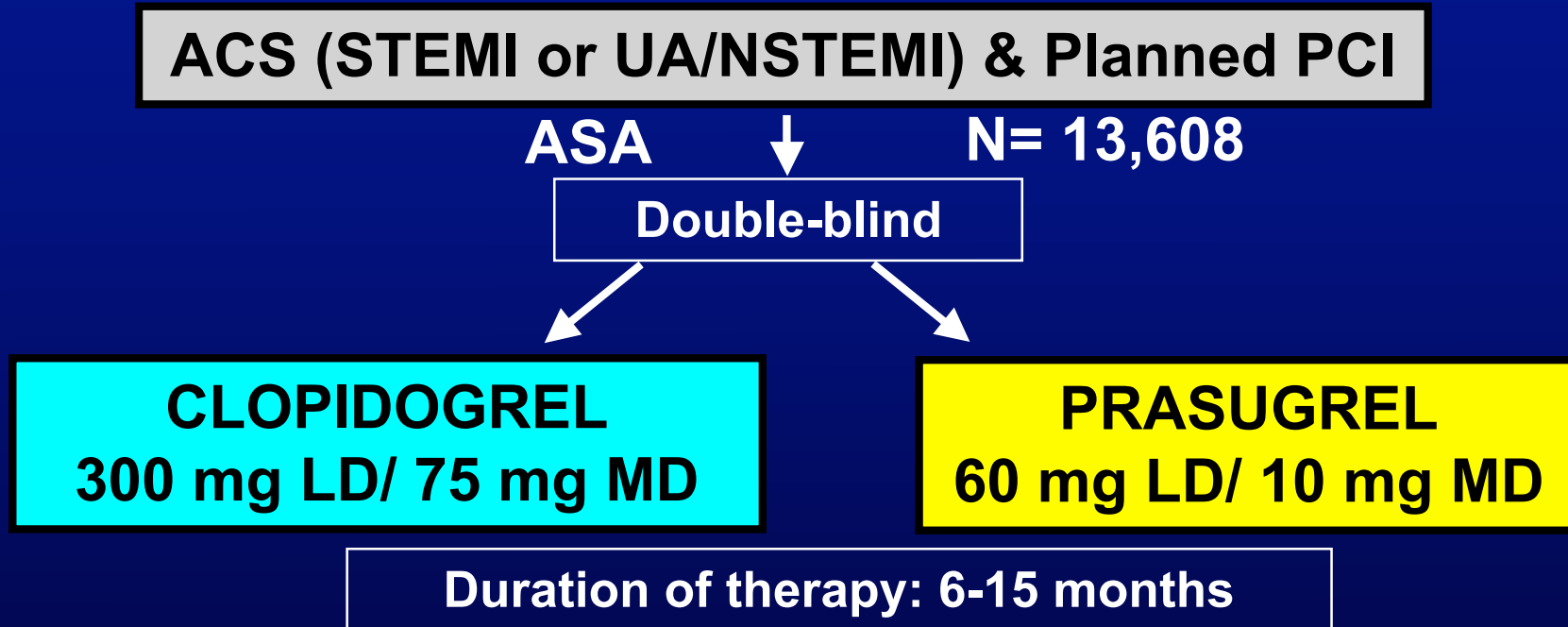
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### *Disclosure Statement:*

The TRITON-TIMI 38 trial was supported by a research grant to the Brigham and Women's Hospital from Daiichi Sankyo Co. Ltd and Eli Lilly & Co.



# Main Trial Design



**1° endpoint:** CV death, MI, Stroke

**2° endpoint:** **Stent Thrombosis**

**Safety endpoints:** TIMI major bleeds, Life-threatening bleeds

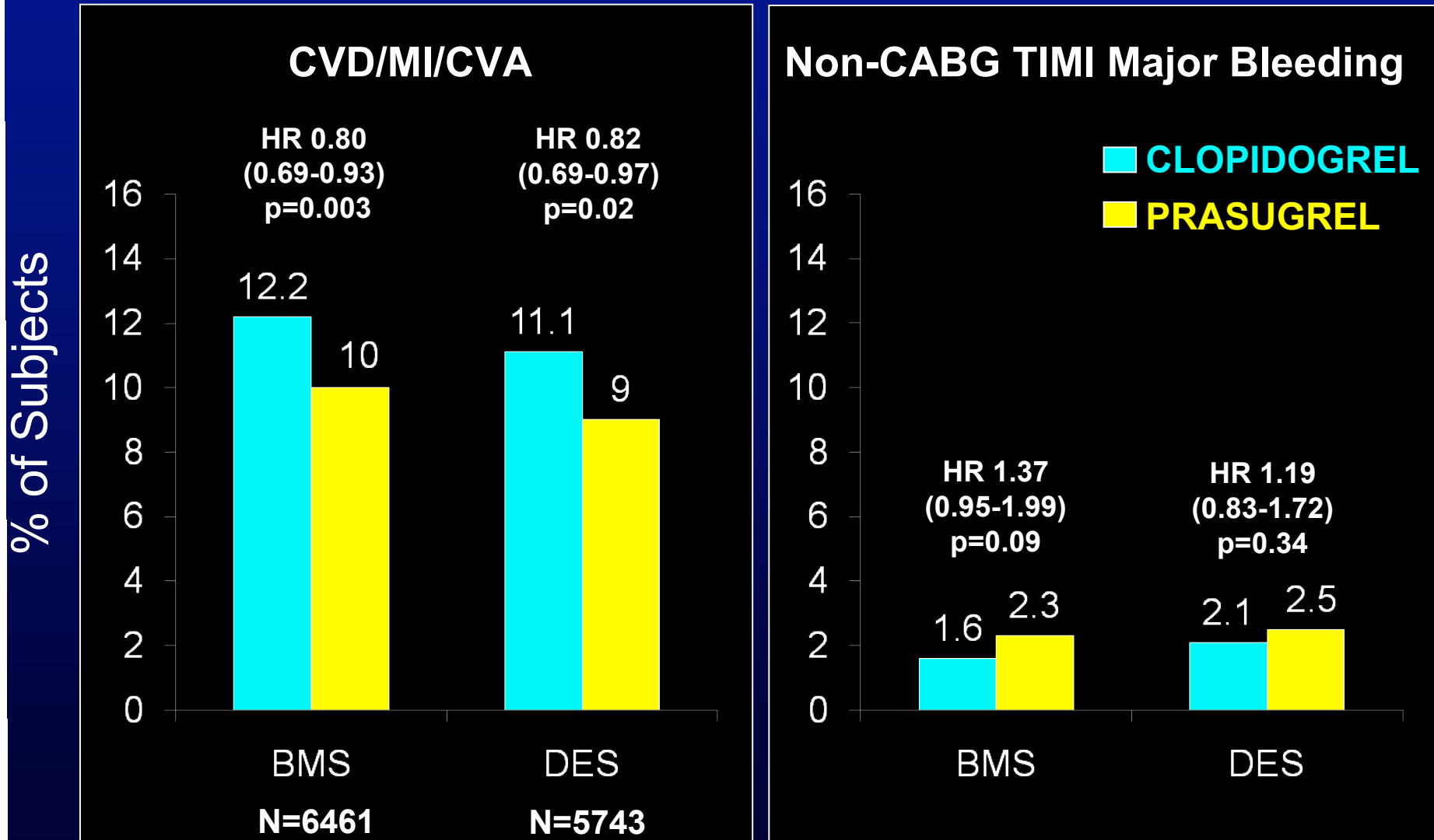


To compare the efficacy and safety of **PRASUGREL** and **CLOPIDOGREL** in 12,844 patients with at least one stent as part of the index procedure with respect to:

- Stent Thrombosis (ARC definitions)
- Ischemic Events, Bleeding
- Overall and stratified by stent type received



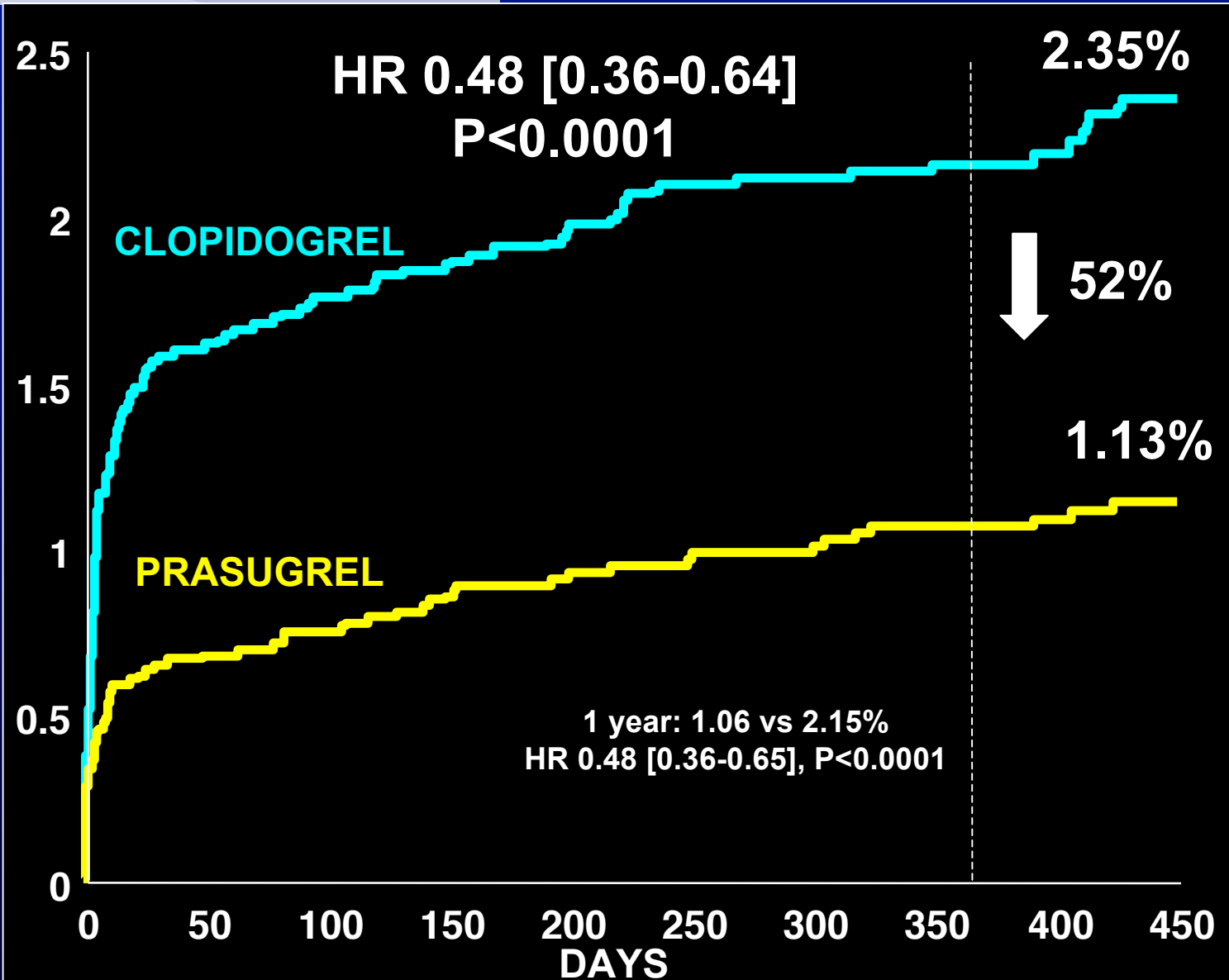
# Key Efficacy, Safety EP: Stratified by Stent Type





# Definite/Probable ST: Any Stent (N=12844)

% of Subjects



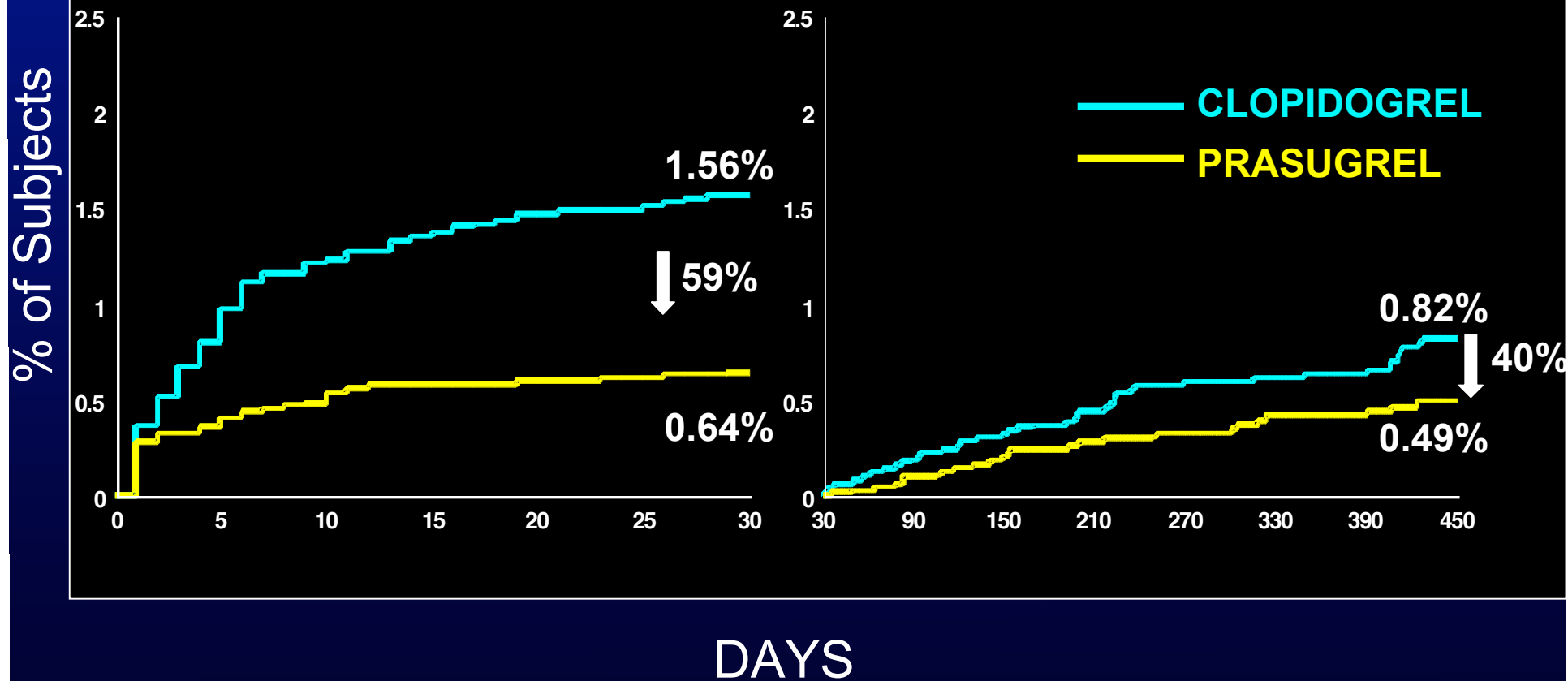
# Definite/Probable ST: Any Stent (N=12844)

## EARLY ST

HR 0.41 [0.29-0.59]  
P<0.0001

## LATE ST

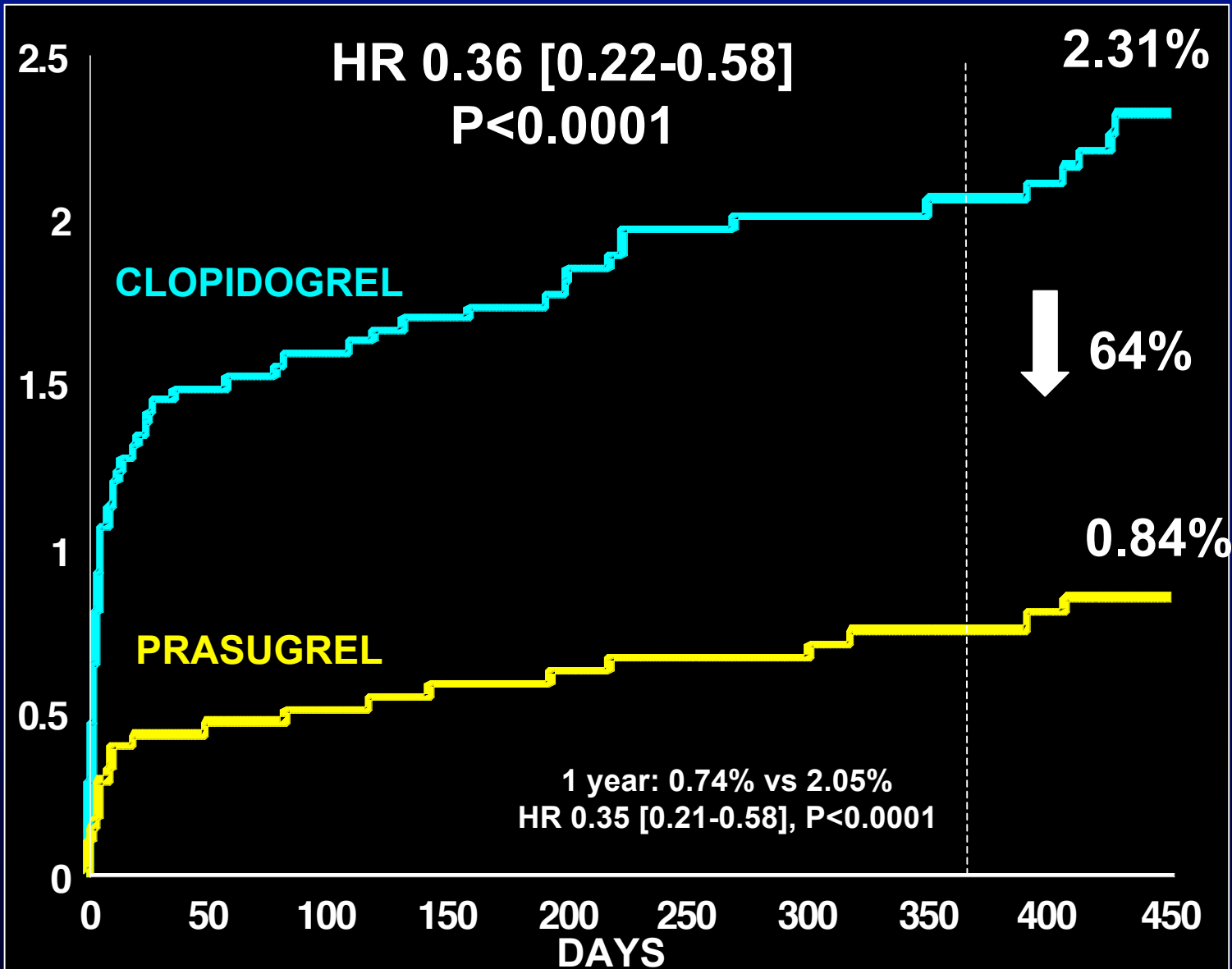
HR 0.60 [0.37-0.97]  
P=0.03





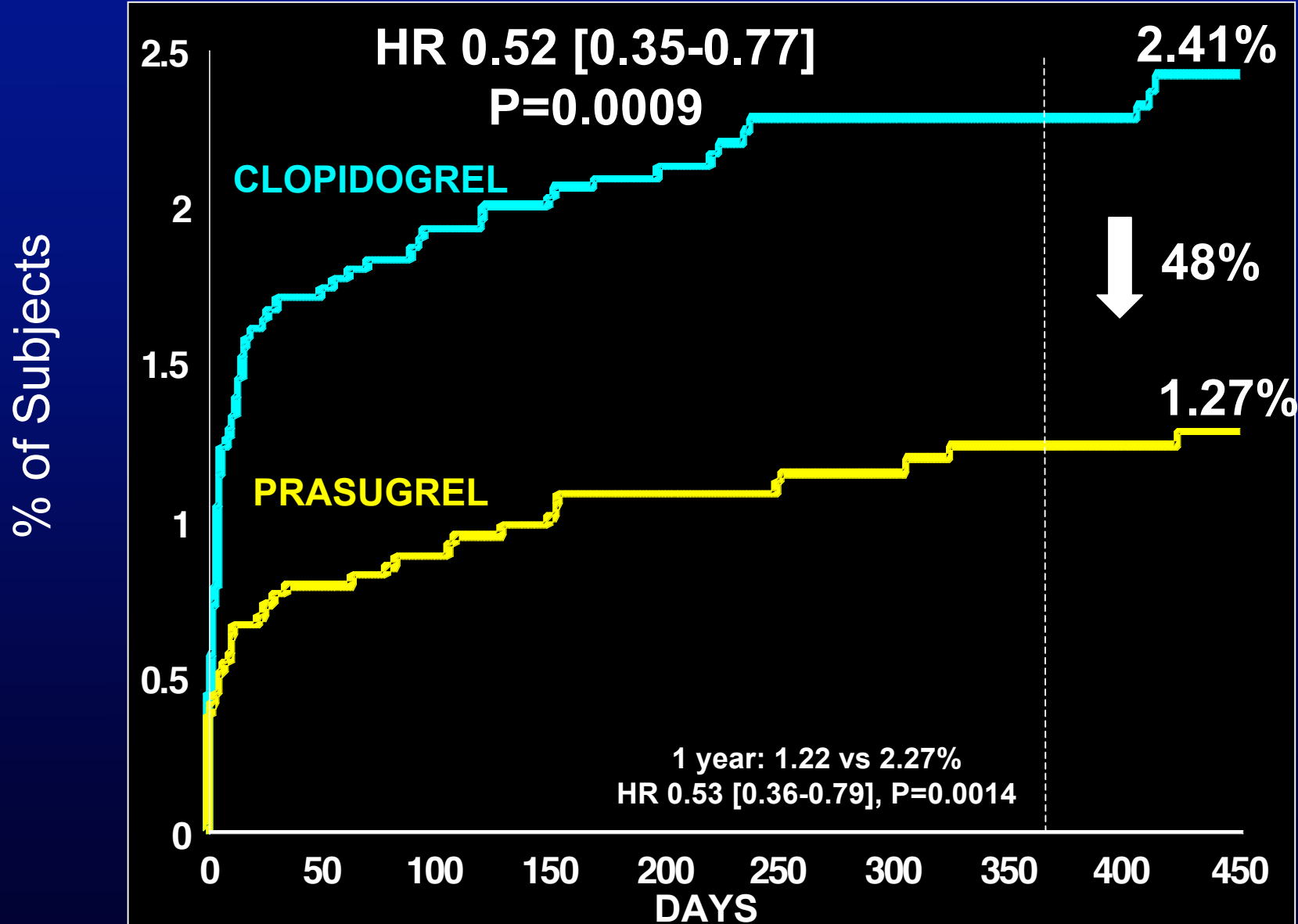
# Definite/Probable ST: DES Only (N=5743)

% of Subjects





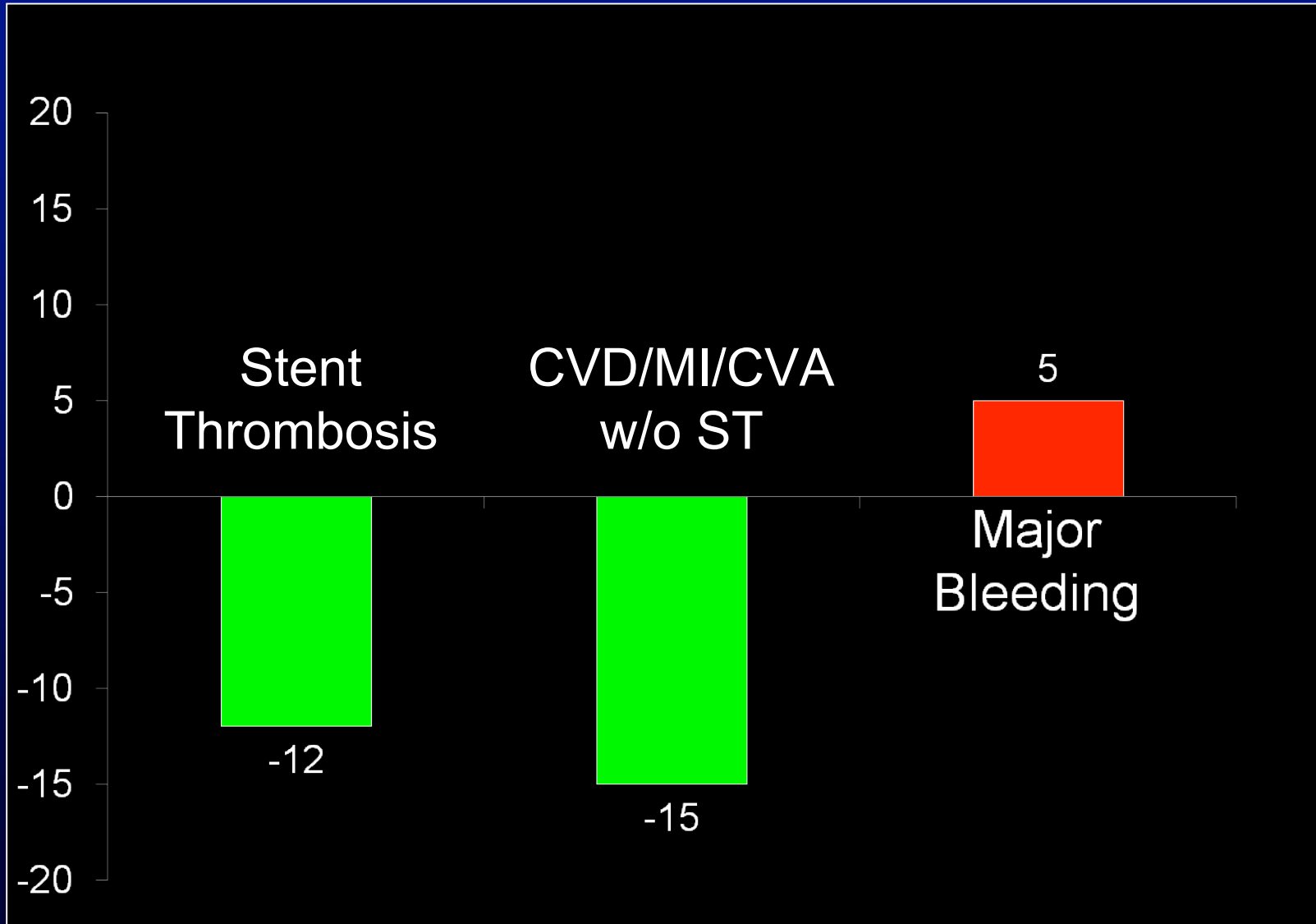
# Definite/Probable ST: BMS Only (N=6461)





## Balance of Efficacy and Safety (Stented Population)

Events per 1000 patients treated





- Stent Thrombosis is a rare, but devastating complication of PCI associated with a high mortality. Efforts to reduce ST have focused on compliance w/ and duration of ASA/clopidogrel
- Our data indicate that an agent w/ more rapid, consistent, and greater inhibition of platelet aggregation (prasugrel) results in major reductions in ST regardless of stent type, both early and late, and across a broad array of clinical and procedural characteristics