

Effect of clopidogrel and acetylsalicylic acid (ASA) versus clopidogrel or ASA alone on brachial flow mediated vasodilation in patients with coronary artery disease

Submission date 13/12/2009	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
Registration date 06/01/2010	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
Last Edited 19/05/2011	Condition category Circulatory System	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

Dr Ascan Warnholtz

Contact details

Department of Medicine II
Johannes Gutenberg-University Mainz
Langenbeckstrasse 1
Mainz
Germany
55131

Additional identifiers

Protocol serial number

N/A

Study information

Scientific Title

Effect of clopidogrel and acetylsalicylic acid (ASA) versus clopidogrel or ASA alone on brachial flow mediated vasodilation in patients with coronary artery disease: a prospective, double-blind, randomised, single-centre trial

Acronym

CASSANDRA

Study objectives

Treatment with clopidogrel 75 mg per day improves brachial artery flow-mediated dilation of patients with coronary artery disease.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Local ethics committee (Ethik-Kommission der Landesärztekammer Rheinland-Pfalz) approved on the 20th December 2004

Study design

Prospective double-blind randomised single-centre three-armed phase IV clinical trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Stable coronary artery disease

Interventions

Clopidogrel 75 mg per day versus clopidogrel 75 mg and acetylsalicylic acid 100 mg per day versus acetylsalicylic acid 100 mg per day for 4 weeks.

Intervention Type

Drug

Phase

Phase IV

Drug/device/biological/vaccine name(s)

Clopidogrel, acetylsalicylic acid (ASA)

Primary outcome(s)

Effect of treatment on the absolute change in % flow-mediated dilation (FMD) of the right brachial artery. Evaluated by measurements at the beginning of the trial and at the end of treatment at day 28.

Key secondary outcome(s)

Effects of treatment on:

1. Platelet superoxide production
2. Adenosine diphosphate (ADP)-induced platelet aggregation
3. Nitroglycerin-induced brachial artery dilation
4. Inflammatory markers

Evaluated by measurements at the beginning of the trial and at the end of treatment at day 28.

Completion date

06/06/2007

Eligibility

Key inclusion criteria

1. Men or women, older than 18 years of age
2. Angiographically documented coronary artery disease
3. Absence of angina pectoris within the previous four weeks
4. Written informed consent must be available before enrolment in the trial

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

1. Stroke or peripheral arterial revascularisation within the previous 12 weeks
2. Clopidogrel intolerance
3. Planned coronary stent implantation within the next 6 weeks
4. Haemodynamically significant valvular heart disease
5. Known hyper- or hypothyroidism
6. Renal dysfunction (creatinine more than 2.0 mg/dl)
7. Chronic inflammatory intestinal disease or history of malabsorption
8. History of chronic liver disease or pancreatitis
9. Existence of acute gastric ulcers or acute gastrointestinal bleeding
10. Haemoglobin less than 12 g/dl, white blood cells (WBC) less than 4/nl or platelet count less than 100/nl
11. History of organ transplantation
12. Anticipated non-compliance with the protocol
13. Pregnancy
14. Participation in another clinical trial

- 15. Clinical signs of congestive heart failure or left ventricular ejection fraction less than 40%
- 16. Uncontrolled hypertension (blood pressure more than 180/105 mmHg)
- 17. Orthostatic hypotension (supine systolic blood pressure less than 90 mmHg)
- 18. Treatment with clopidogrel or ticlopidine within the last 28 days prior to study start
- 19. Initiation of treatment with angiotensin converting enzyme (ACE) inhibitor, statin or calcium channel blocker within previous 2 weeks

Date of first enrolment

10/04/2006

Date of final enrolment

06/06/2007

Locations

Countries of recruitment

Germany

Study participating centre

Department of Medicine II

Mainz

Germany

55131

Sponsor information

Organisation

Johannes Gutenberg-University Mainz (Johannes Gutenberg-Universitat Mainz) (Germany)

ROR

<https://ror.org/023b0x485>

Funder(s)

Funder type

Industry

Funder Name

Bristol-Myers Squibb GmbH & Co. KGaA (Germany)

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/01/2011		Yes	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes