# **Thrombosis Prevention Trial**

Submission date 07/09/2005	<b>Recruitment status</b> No longer recruiting	[_] P [_] P	
<b>Registration date</b> 08/09/2005	<b>Overall study status</b> Completed	[_] S [X] F	
Last Edited 29/05/2007	<b>Condition category</b> Circulatory System	[_] Ir	

- Prospectively registered
- ] Protocol
- Statistical analysis plan
- K] Results
- ] Individual participant data

### Plain English summary of protocol

Not provided at time of registration

# **Contact information**

**Type(s)** Scientific

**Contact name** Prof Tom Meade

### **Contact details**

Non-communicable Disease Epidemiology Unit London School of Hygiene and Tropical Medicine Keppel Street London United Kingdom WC1E 7HT +44 (0)20 7927 2182 tom.meade@lshtm.ac.uk

## Additional identifiers

EudraCT/CTIS number

**IRAS number** 

ClinicalTrials.gov number

Secondary identifying numbers N/A

# Study information

### Scientific Title

**Acronym** TPT

#### **Study objectives**

That primary prevention treatment in men at high risk with low intensity oral anticoagulation with warfarin and/or 75 mg aspirin daily (i.e. factorial design) reduces coronary heart disease events by 30%.

**Ethics approval required** Old ethics approval format

**Ethics approval(s)** Not provided at time of registration

**Study design** Randomised controlled trial.

**Primary study design** Interventional

**Secondary study design** Randomised controlled trial

**Study setting(s)** Not specified

**Study type(s)** Prevention

Participant information sheet

Health condition(s) or problem(s) studied Thrombosis

#### Interventions

Oral anticoagulation with warfarin to International Normalised Ratio of 1.5 and/or 75 mg aspirin daily compared with double placebo treatment, i.e. four treatment groups:

- 1. Active warfarin and active aspirin
- 2. Active warfarin and placebo aspirin
- 3. Placebo warfarin and active aspirin
- 4. Placebo warfarin and placebo aspirin

Intervention Type Drug

**Phase** Not Specified

### Drug/device/biological/vaccine name(s)

Warfarin and aspirin

#### **Primary outcome measure** All coronary heart disease events; fatal and non-fatal coronary events separately.

**Secondary outcome measures** Not provided at time of registration

Overall study start date 01/09/1988

**Completion date** 01/09/1997

# Eligibility

### Key inclusion criteria

In top 20% of risk score distribution based on smoking history, family history, systolic blood pressure, body mass index, blood cholesterol, factor VII activity, plasma fibrinogen. 5499 men aged 45-69 recruited in 108 practices in the Medical Research Council's General Practice Research Framework.

Participant type(s) Patient

**Age group** Adult

**Sex** Male

**Target number of participants** 4500 (5499 actually recruited).

#### Key exclusion criteria

Already on antithrombotic treatment; high risk of bleeding; liver or renal disease; serious concomitant disease; at discretion of general practitioner

Date of first enrolment 01/09/1988

Date of final enrolment 01/09/1997

## Locations

**Countries of recruitment** England United Kingdom

**Study participating centre Non-communicable Disease Epidemiology Unit** London United Kingdom WC1E 7HT

### Sponsor information

**Organisation** Sponsor not defined - Record provided by the Medical Research Council (UK)

#### Sponsor details

20 Park Crescent London United Kingdom W1B 1AL tom.meade@lshtm.ac.uk

**Sponsor type** Not defined

## Funder(s)

**Funder type** Research council

**Funder Name** Medical Research Council (UK)

Alternative Name(s) Medical Research Council (United Kingdom), UK Medical Research Council, MRC

**Funding Body Type** Government organisation

Funding Body Subtype National government

**Location** United Kingdom

# **Results and Publications**

### Publication and dissemination plan

Not provided at time of registration

Intention to publish date

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?
<u>Results article</u>	Results:	24/01/1998		Yes	No