

# Zyban as an effective smoking cessation aid for patients following acute coronary syndrome (ACS): The ZESCA trial

<b>Submission date</b> 29/07/2005	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 29/07/2005	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 11/04/2019	<b>Condition category</b> 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 Mark Jeffrey Eisenberg

### Contact details

Cardiology and Clinical Epidemiology  
Sir Mortimer B Davis Jewish General Hospital  
McGill University  
3755 Cote Ste Catherine Road/Suite A118  
Montreal, Quebec  
Canada  
H3T 1E2  
+1 (0)514 340 8222 ext. 3564  
mark.eisenberg@mcgill.ca

## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

NCT00689611

## Secondary identifying numbers

MCT-64989

# Study information

## Scientific Title

Zyban as an effective smoking cessation aid for patients following acute coronary syndrome (ACS): a randomised controlled trial

## Acronym

ZESCA

## Study objectives

Nicotine dependence in patients with a recent enzyme-positive acute coronary syndrome:

1. To examine the impact of sustained-release bupropion on smoking abstinence rates at one year following an enzyme-positive acute coronary syndrome
2. To examine the safety of sustained-release bupropion in patients following an ACS

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Research Ethics Committee, Jewish General Hospital, Montreal, 24/01/2005

## Study design

Randomised controlled trial

## Primary study design

Interventional

## Secondary study design

Randomised controlled trial

## Study setting(s)

Hospital

## Study type(s)

Prevention

## Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

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

Acute coronary syndrome

## Interventions

Sustained-release bupropion versus placebo.

**Intervention Type**

Drug

**Phase**

Not Applicable

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

Bupropion

**Primary outcome measure**

Smoking abstinence rates at 12 months post-ACS

**Secondary outcome measures**

1. Cumulative side effects and safety of bupropion at 9 weeks
2. Composite clinical events (unstable angina, myocardial infarction [MI], seizure, death)

**Overall study start date**

01/09/2005

**Completion date**

01/04/2010

**Eligibility****Key inclusion criteria**

1. Age: greater than or equal to 18 years
2. Active smoker (greater than or equal to 10 cigarettes per day, on average) for the past year
3. Suffered an ACS and planned hospitalization of greater than or equal to 48 hours  
ACS is defined as positive Troponin T, Troponin I, or CK-MB levels and greater than or equal to one of the following:
  - 3.1. Ischaemic symptoms (i.e. typical chest pain) for at least 20 minutes
  - 3.2. Electrocardiogram (ECG) changes indicative of ischemia (ST-segment elevation or depression)
  - 3.3. Development of pathological Q waves on the ECGNote: If patient is to undergo percutaneous coronary intervention (PCI) and/or coronary artery bypass graft surgery (CABG), they are still eligible to be enrolled.
4. Motivated to quit smoking

**Participant type(s)**

Patient

**Age group**

Adult

**Lower age limit**

18 Years

**Sex**

Both

**Target number of participants**

1500

**Key exclusion criteria**

1. Current seizure disorder, history of seizures, or predisposition to seizures (e.g. history of brain tumour, severe head trauma, or stroke)
2. Current use of medications that lower seizure threshold e.g. amantadine, anti-depressants, anti-malarials, anti-psychotics, levodopa, lithium, quinalone antibiotics, ritonavir, systemic steroids, theophyllin, type 1C antiarrhythmics (e.g. encainide, flecainide, propafenone)
3. History of anorexia nervosa or bulimia
4. Current use of Wellbutrin or any other medications that contain bupropion
5. Pregnancy or lactation

**Date of first enrolment**

01/09/2005

**Date of final enrolment**

01/04/2010

**Locations****Countries of recruitment**

Canada

**Study participating centre**

**McGill University**

Montreal, Quebec

Canada

H3T 1E2

**Sponsor information****Organisation**

Sir Mortimer B Davis Jewish General Hospital (Canada)

**Sponsor details**

3755 Côte Ste Catherine

Montreal, Quebec

Canada

H3T 1E2

+1 (0)514 340 8222

meisenberg@epid.jgh.mcgill.ca

**Sponsor type**

Hospital/treatment centre

**Website**

<http://www.cihr-irsc.gc.ca>

**ROR**

<https://ror.org/056jjra10>

## Funder(s)

**Funder type**

Research organisation

**Funder Name**

Canadian Institutes of Health Research

**Alternative Name(s)**

Instituts de Recherche en Santé du Canada, Canadian Institutes of Health Research (CIHR), CIHR\_IRSC, Canadian Institutes of Health Research | Ottawa ON, CIHR, IRSC

**Funding Body Type**

Government organisation

**Funding Body Subtype**

National government

**Location**

Canada

## 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?
<a href="#">Basic results</a>				No	No
<a href="#">Results article</a>	results	01/03/2014	11/04/2019	Yes	No

[Results article](#)

results

01/03/2014

11/04/2019

Yes

No