

# Comparing Warfarin to Aspirin after tissue valve replacement with Epic prosthesis in the aortic position: multicenter randomised trial

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<b>Registration date</b> 22/09/2004	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 13/11/2007	<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

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## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

N/A

# Study information

## Scientific Title

## Acronym

WoA Epic

## Study objectives

Patients with prosthetic heart valves have a higher risk of developing valve thrombosis and arterial thromboembolism. However, antithrombotic therapy in the early postoperative period after Biological Aortic Valve Replacement (BAVR) is still controversial. Many regimens have been described. Thus, the aim of this study will be to compare the validity of two different regimens of therapy in the early postoperative period after BAVR with St Jude Epic prosthesis, and to evaluate the benefits, particularly in terms of survival and cerebral protection from thromboembolism and major bleeding.

## 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)

Hospital

## Study type(s)

Treatment

## Participant information sheet

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

Biological Aortic Valve Replacement

## Interventions

Patients will receive a specific regimen of therapy according to the result of randomisation. The administration of Low Molecular Weight Heparin (LMWH) will start on the first postoperative day, whereas warfarin and ASA on day 2. In patients receiving warfarin the use of LMWH will be continued until warfarin reached therapeutic levels as shown by a Prothrombin Time (PT) according to the International Normalised Ratio (INR; range 2.0 to 3.0). Anticoagulation with warfarin will be maintained for 3 postoperative months, then will be discontinued and

substituted with ASA. Those with concomitant coronary artery bypass grafting will not receive any double therapy warfarin plus ASA.

**Intervention Type**

Drug

**Phase**

Not Specified

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

Warfarin and aspirin (Acetylsalicylic Acid [ASA])

**Primary outcome measure**

Not provided at time of registration

**Secondary outcome measures**

Not provided at time of registration

**Overall study start date**

01/01/2001

**Completion date**

01/12/2002

## Eligibility

**Key inclusion criteria**

This is a prospective randomised multicenter trial using patients who will be consecutively admitted to Cardiac Surgery Units. All patients undergoing Biological Aortic Valve Replacement (BAVR) with a St Jude Epic prosthesis and in sinus rhythm before the operation will be considered to participate to the study. The patients, after the operation, will be randomised to each group immediately before starting the specific aspirin (Acetylsalicylic Acid [ASA]) or warfarin therapy.

**Participant type(s)**

Patient

**Age group**

Not Specified

**Sex**

Not Specified

**Target number of participants**

Not provided at time of registration

**Key exclusion criteria**

The patients with the following characteristics will be excluded:

1. History of cerebral ischaemia
2. Coagulopathy

3. Carotid atherosclerotic disease (stenosis greater than 50%, soft and ulcerated plaque)
4. Peripheral vascular disease
5. Concomitant mitral valve disease
6. Double valve replacement
7. Previous chronic anticoagulation therapy
8. Allergies to ASA or warfarin
9. Comparison of atrial fibrillation (AF) at any time during the study except for transient episode during the hospitalisation
10. Promptly cardioverted

**Date of first enrolment**

01/01/2001

**Date of final enrolment**

01/12/2002

## Locations

**Countries of recruitment**

Italy

**Study participating centre**

Via Gramsci 13

Parma

Italy

43100

## Sponsor information

**Organisation**

University of Parma (Italy)

**Sponsor details**

Cardiac Surgery Unit

Via Gramsci 13

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**Sponsor type**

University/education

**Website**

<http://www.unipr.it/>

**ROR**

<https://ror.org/02k7wn190>

## Funder(s)

**Funder type**

Other

**Funder Name**

Company of Saint Paul (Compagnia di S Paolo) (Italy)

**Funder Name**

Ministry for Universities and of Scientific and Technological Research (Ministero dell'Università e della Ricerca Scientifica e Tecnologica [MURST]) (Italy)

## 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="#">Abstract results</a>	PubMed Abstract:	03/08/2004		No	No
<a href="#">Other publications</a>	Full text:	03/08/2004		Yes	No