

# The effect of continuation of anti-platelet agents on bleeding complications after dento-alveolar surgical procedures

<b>Submission date</b> 08/03/2006	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
<b>Registration date</b> 08/03/2006	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
<b>Last Edited</b> 19/08/2009	<b>Condition category</b> Oral Health	<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

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### Contact details

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## Additional identifiers

## Study information

Scientific Title

Acronym

BLACK

### **Study objectives**

Common traditional practice until now has been discontinuation of the antiplatelet therapy 7 to 10 days prior to dental surgery, but controlled prospective data in the literature to support this practice are lacking. The discontinuation of antiplatelet treatment to ensure an adequate hemostasis during and after dental surgery needs to be offset against the (rebound) risk of thrombo-embolic complications if this treatment is stopped.

The hypothesis is that antiplatelet therapy can safely be continued prior to dental surgery.

### **Ethics approval required**

Old ethics approval format

### **Ethics approval(s)**

Received from local medical ethics committee

### **Study design**

Randomised double blind placebo controlled parallel group trial

### **Primary study design**

Interventional

### **Study type(s)**

Treatment

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

Parodontitis apicalis, adult parodontitis, caries

### **Interventions**

Patients will be randomised to continue their medication of anti-platelet agents during the ten days prior to the procedure or to stop treatment. The study will be double blind; hence, patients will receive their initial medication in the form of study medication or placebo in the form of study medication for ten days prior to their treatment.

### **Intervention Type**

Other

### **Phase**

Not Specified

### **Primary outcome(s)**

Peri-procedural blood loss

### **Key secondary outcome(s)**

1. Occurrence of thrombo-embolic events at 30 days follow-up
2. The predictive effect of measurements in DNA, blood and saliva on peri-procedural hemostasis and blood loss

### **Completion date**

01/09/2007

# Eligibility

## Key inclusion criteria

1. Patient on antiplatelet therapy who has to be treated in the AMC at the Department of Oral and Maxillofacial surgery
2. Approval of the prescribing physician
3. At least 18 years old

## Participant type(s)

Patient

## Healthy volunteers allowed

No

## Age group

Adult

## Lower age limit

18 years

## Sex

All

## Key exclusion criteria

1. Known coagulation defect
2. Use of oral anticoagulant treatment (vitamin K antagonists) or therapeutic heparin
3. Severe kidney dysfunction (creatinine clearance <20 ml/min) or hepatic dysfunction
4. Unstable coronary artery disease
5. Patients younger than 18 years of age
6. Refusal to provide informed consent
7. Recent placement of a coronary stent (during the last 6 months)

## Date of first enrolment

01/09/2005

## Date of final enrolment

01/09/2007

# Locations

## Countries of recruitment

Netherlands

## Study participating centre

Academic Medical Center (AMC)

Amsterdam

Netherlands

1100 DD

# Sponsor information

## Organisation

Academic Medical Centre (AMC) (Netherlands)

## ROR

<https://ror.org/03t4gr691>

# Funder(s)

## Funder type

Hospital/treatment centre

## Funder Name

Academic Medical Center (AMC) Department of Oral- and Maxillofacial Surgery and Department of Internal Medicine (Netherlands)

# Results and Publications

## Individual participant data (IPD) sharing plan

## IPD sharing plan summary

Not provided at time of registration