

# Rituximab in Patients With ST-elevation Myocardial Infarction

NCT05211401

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<b>Status</b>	RECRUITING
<b>Phase</b>	Phase 2
<b>Sponsor</b>	Assistance Publique - Hôpitaux de Paris
<b>Enrollment</b>	372 participants

## Key Eligibility Criteria

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### Inclusion (9)

- Age  $\geq$  18 years with no upper limit (women must be either postmenopausal defined as being amenorrhoeic for greater than 2 years with an appropriate clinical profile, e.g. age appropriate ( $\geq$ 55 years old), history of vasomotor symptoms) or having documented hysterectomy and/or bilateral oophorectomy) ;
  - Clinical evidence at presentation of anterior ST-elevation myocardial infarction (STEMI) defined as symptoms suggestive of acute myocardial ischemia, an electrocardiogram showing ST-segment elevation  $\geq$  2 mm in  $\geq$  2 contiguous leads in V1 to V4;
  - Complete occlusion (i.e. TIMI flow 0-1) of proximal or mid left anterior descending (LAD) coronary artery on urgent angiography interpreted as the infarct-related artery (IRA);
  - Onset of worse symptoms within 48 hours before primary PCI;
  - Patients with neutrophils  $\geq$  1.5 x 10<sup>9</sup>/L at the moment of admission
- ... and 4 more (see full listing online)

### Exclusion (32)

- History of previous MI;
  - Presentation with cardiac arrest;
  - Cardiogenic shock (defined as systolic blood pressure  $<$ 90 mmHg for  $>$ 30minutes, or necessitating vasopressors to achieve a blood pressure  $\geq$ 90 mmHg);
  - Cardiac electrical instability (defined as complete heart block needing temporary pacing or any tachyarrhythmia needing cardioversion);
  - Patients with Killip class III heart failure;
- ... and 27 more (see full listing online)

## Locations (1 total)

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Cardiology department, Hôpital Bichat, AP-HP, Paris, France