Highest Efficacy of Dual Antiplatelet Therapy After Carotid Artery Stenting in High Bleeding Risk Patients

NCT06276374

Status	RECRUITING
Phase	Not Applicable
Sponsor	Woo-Keun Seo
Enrollment	1,556 participants

Key Eligibility Criteria

Inclusion (18)

- Patients e19 years
- Symptomatic patients with carotid artery stenosis* greater than 50% and asymptomatic patients with carotid artery stenosis* greater than 70% who are scheduled to undergo or who have undergone carotid artery stenting
- High bleeding risk is defined as a Bleeding Academic Research Consortium type 3 or 5 bleeding risk of e4% at 1 year or a risk of an intracranial hemorrhage (ICH) of e1% at 1 year, Patients who meet at least one of the criteria for high bleeding risk** below
- The degree of stenosis is determined using the method performed in the North American Symptomatic Carotid Endarterectomy Trial.
- Criteria for high bleeding risk (e 1)

... and 13 more (see full listing online)

Exclusion (8)

- Incidence of net clinical events, including cardiovascular and cerebrovascular accidents or major bleeding events, within 30 days following carotid artery stenting
- Discontinuation of dual antiplatelet therapy within 30 days after carotid stent implantation (However, use of a single antiplatelet therapy within 7 days due to acute infection and trauma is allowed, but dual antiplatelet therapy must be administered at 28 to 30 days after carotid stent implantation)
- Coronary artery stenting or other vascular stenting or vascular recanalization within 1 year (Revascularization surgery that requires CABG(Coronary Artery Bypass Graft) and other dual antiplatelet therapy)
- Aspirin or clopidogrel hypersensitivity
- Pregnant or breastfeeding women (Women of childbearing need to check for pregnancy using urine or blood tests before enrollment, and use appropriate contraception methods during the clinical trial period)

... and 3 more (see full listing online)

Locations (1 total)

Samsung Medical Center, Seoul, South Korea