

Dual Antiplatelet Therapy Escalation From Standard-dose Clopidogrel to Low-Dose Prasugrel in Patients With High Bleeding and Ischemic Risk Undergoing PCI: A Prospective, Randomized Pharmacodynamic Study (TAILOR-BLEED-2)

NCT07025148

Status	RECRUITING
Phase	Phase 4
Sponsor	University of Florida
Enrollment	40 participants

Key Eligibility Criteria

Inclusion (3)

- Patients with high bleeding risk (defined according to the ARC-HBR criteria) who have undergone PCI and are on maintenance treatment with DAPT, consisting of low-dose aspirin (81mg qd) with clopidogrel (75 mg qd) as part of standard of care for at least 30 days.
- Age ≥18 years.
- Provide written informed consent.

Exclusion (8)

- Prior cerebrovascular event.
 - PCI within 30 days.
 - Hemodynamic instability.
 - On treatment with any oral anticoagulant (vitamin K antagonists, dabigatran, rivaroxaban, apixaban, edoxaban) or chronic low-molecular-weight heparin (at venous thrombosis treatment, not for prophylaxis).
 - Hypersensitivity to Aspirin, Clopidogrel, or Prasugrel.
- ... and 3 more (see full listing online)

Locations (1 total)

University of Florida Health, Jacksonville, Florida, United States