

Targeting the Use of Glycoprotein IIb/IIIa Platelet Inhibitors

Richard W. Nesto, MD, FACC,* Norman E. Lepor, MD, FACC, FAHA†
Supplement Editors, *Targeting the Use of Glycoprotein IIb/IIIa Platelet Inhibitors*

* Department of Cardiovascular Medicine, Lahey Clinic Medical Center, Burlington, MA;

† Cedars-Sinai Medical Center, Los Angeles, CA

[Rev Cardiovasc Med. 2002;3(suppl 1):S1-S2]

© 2002 MedReviews, LLC

The process leading to the development of glycoprotein IIb/IIIa (GP IIb/IIIa) receptor inhibitors has led to our understanding of the role of platelets, endothelium, and inflammation in coronary artery disease, and of the progression to acute coronary ischemic events. The use of these agents, particularly in the catheterization laboratory as adjuvants to percutaneous coronary interventions, has led to better outcomes for our patients. Recent data from clinical trials corroborate what we experienced in the catheterization laboratory many years ago. Procedural outcomes were complicated by thrombosis resistant to treatment during the course of angioplasty or the need for early repeat coronary angiography due to abrupt closure. The accumulation of clinical research data has allowed us to more clearly delineate the role of GP IIb/IIIa inhibitors. Clinical trial data support the efficacy of the three available agents. The purpose of this publication is to provide a forum for respected, objective thought leaders to offer you, the reader, an evidence-based review of this subject. This guide will hopefully assist you, the clinician, in targeting or matching the use of the various GP IIb/IIIa inhibitors to clinical situations, utilizing an evidence-based approach, thereby maximizing both effectiveness and efficiency.

We have selected the high-risk presentations of unstable angina, non ST-segment acute myocardial infarction (MI), ST-segment elevation MI, and diabetes, because available clinical data present us with a hierarchy of efficacy within the IIb/IIIa inhibitor class (abciximab, tirofiban, and eptifibatide) for use in these populations. The clinical data have prompted American College of Cardiology/American Heart Association in their 2002 guidelines

to recommend the specific use of abciximab as an adjuvant for interventions in diabetic patients. A comprehensive economic analysis is presented, to allow you to compare the economic efficiency of abciximab as a life-saving therapy relative to other commonly accepted life-saving therapies. A peek into the future is also provided, as we provide some insight into the potential use of GP IIb/IIIa inhibitors in patients undergoing

peripheral vascular procedures.

We would like to thank Drs. A. Michael Lincoff, Eric Dippel, Gary Ansel, and Hans Meier-Ewert for partnering with us to bring you this up-to-date, comprehensive, and objective presentation. We are grateful to Eli Lilly, Inc. for underwriting this important initiative, and to the staff at MedReviews, LLC, who have lived up to their reputation as producers of excellent medical education initiatives. ■