

use of PPI therapy in conjunction with clopidogrel increases related hospital costs by at least 38 percent; the annual cost for patients on both a PPI and clopidogrel was \$6,061 as compared to \$4,400 for patients only taking clopidogrel. These findings will be presented this month at the annual meeting of the International Society for Pharmacoeconomics and Outcomes Research (ISPOR).

Study details

The Clopidogrel Outcomes Study investigated medical and pharmacy claims data of 16,690 patients who were taking clopidogrel following a stent procedure and tracked the study subjects for a 12-month period from 2005 to 2006. The study compared a group of 6,828 patients who were concurrently taking a PPI and clopidogrel to a group of 9,862 patients who were only taking clopidogrel. When PPIs were examined individually, all of the associations were highly statistically significant.

To address a related issue that has raised questions about the PPI/clopidogrel interaction, the researchers also looked at whether or not PPIs independently increase the risk of a CV event. The results of this study found that there was no independent effect from taking a PPI in the absence of clopidogrel. The study included 1,641 patients who had undergone a stent procedure but were not taking clopidogrel and compared CV event hospitalizations of patients on a PPI to those not taking a PPI. These findings were recently presented at the American Heart Association's Scientific Forum on Quality of Care and Outcomes Research in Cardiovascular and Stroke (QCOR).

“Our study, along with a 2007 FDA review and other researchers’ work, provides strong evidence that PPIs do not independently raise cardiovascular risks for stent patients and further strengthens the observation that this interaction exists between PPIs and clopidogrel and impairs the effectiveness of the antiplatelet drug,” said Epstein. “Given the totality of the evidence generated on this interaction and the known benefits of clopidogrel in reducing the risk of death, heart attack and stroke after coronary stenting, patients and their physicians should continue to trust in the use of this medication and consider a PPI only when clearly indicated.”

About Medco

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