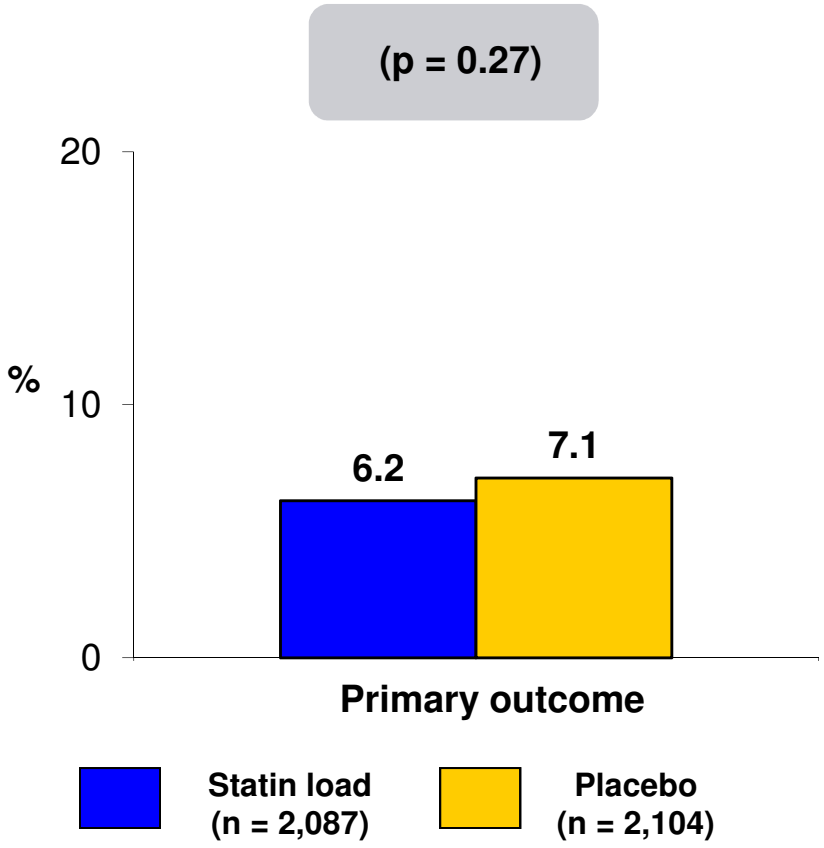
SECURE-PCI

Trial design: Patients presenting with ACS were randomized in a 1:1 fashion to receive either two loading doses of atorvastatin 80 mg before and 24 hours after a planned early invasive approach or placebo. Patients were followed for 30 days.



Results

- Primary outcome, MACE: statin vs. placebo: 6.2% vs. 7.1%, p = 0.27
- Death (statin vs. placebo): 3.2% vs. 3.3%, p = 0.84, MI: 2.9% vs. 3.7%, p = 0.18, stent thrombosis: 0.3% vs. 0.7%, p = 0.10
- LDL-C 79.6 vs. 75.8 mg/dl

Conclusions

- Routine administration of two early doses of high-dose atorvastatin is not superior to placebo in reducing cardiovascular events at 30 days among patients presenting with ACS and scheduled to undergo an early invasive approach
- Both arms received 40 mg of atorvastatin daily after the initial load; LDL-C levels were similar

Berwanger O, et al. JAMA 2018;Mar 11:[Epub]