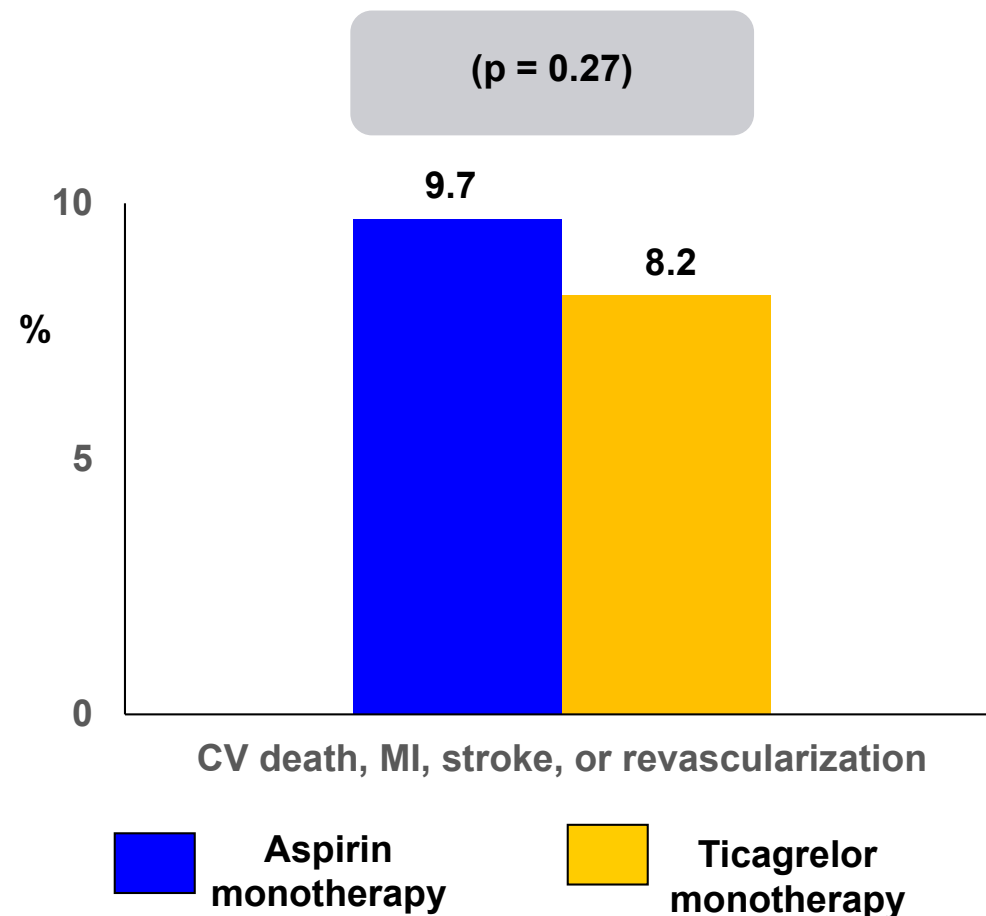


Trial description: Patients scheduled for CABG were randomized to aspirin monotherapy 100 mg daily (n = 931) vs. ticagrelor monotherapy 90 mg twice daily (n = 928).



RESULTS

- CV death, MI, stroke, or revascularization: 9.7% with ticagrelor vs. 8.2% with aspirin (p = 0.27)
- CV mortality: 1.2% with ticagrelor vs. 1.4% with aspirin (p = 0.68)
- Major bleeding: 3.7% with ticagrelor vs. 3.2% with aspirin (p = 0.53)

CONCLUSIONS

- Among patients undergoing CABG, the use of ticagrelor monotherapy did not reduce major adverse cardiac events compared with aspirin monotherapy
- Major bleeding was similar between groups