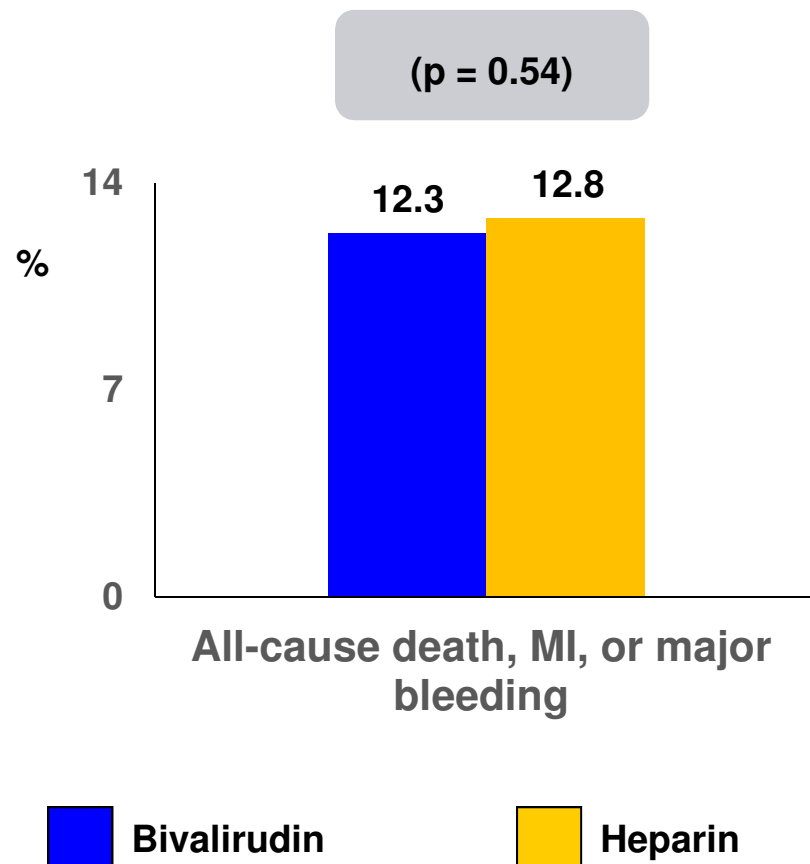


VALIDATE-SWEDEHEART

Trial design: Patients with acute coronary syndromes undergoing coronary revascularization were randomized to bivalirudin monotherapy (n = 3,004) vs. unfractionated heparin monotherapy (n = 3,002).



Results

- All-cause death, MI, or major bleeding at 180 days: 12.3% of the bivalirudin group vs. 12.8% of the unfractionated heparin group (p = 0.54)
- MI at 180 days: 2.0% vs. 2.4% (p = 0.33), respectively, for bivalirudin vs. heparin
- Definite/probable stent thrombosis: 1.9% vs. 2.0% (p = 0.78), respectively, for bivalirudin vs. heparin

Conclusions

- Among patients with acute coronary syndromes undergoing coronary revascularization, bivalirudin was not effective at preventing death, MI, or major bleeding with unfractionated heparin