Letter to the Editor

Dipyridamole and acetylsalicylic acid in the secondary prevention of stroke

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Sir,

With interest we read the report on the ESPS 2 trial (Diener et al., 1996), in which dipyridamole appeared effective when added to aspirin in the secondary prevention after cerebral ischemia. These results are remarkable, since they are at variance to a large body of evidence that points to no effect of the combination dipyridamole and aspirin in comparison to aspirin only, regardless of the indication (Antiplatelet Trialists’ Collaboration, 1994; Cannegevier et al., 1994). From the report we understand that a number of patients were excluded from the analysis because of major protocol deviations. This concerned the considerable number of 452 patients, amounting up to 6.4% of the total number of patients randomized. Since, although possibly defendable, this constitutes a departure from the intention-to-treat principle, we think it important to know if outcome event data are available on these patients, and if the results on this large group that was deleted from the published analysis were different from the published results, i.e., was a similar effect of dipyridamole plus aspirin found, an exaggerated effect, or no effect?

References

