

POPULAR TAVI: Aspirin With or Without Clopidogrel after Transcatheter Aortic Valve Implantation

Purpose: The current study (Cohort A) of POPULAR TAVI investigated the optimal antithrombotic therapy after Transcatheter aortic valve implantation (TAVI) in patients not taking oral anticoagulants

Trial Design: N=665, Parallel group, randomized, open label trial performed at 17 European sites.

Primary Endpoints: The co-primary outcomes were all bleeding (VARC-2) and non-procedural bleeding (BARC)

Secondary Endpoints: Two secondary outcomes, first examined bleeding and thromboembolic events and was a composite of CV mortality, non-procedural bleeding, all-cause stroke, or MI. The second examined only thromboembolic events and was a combination of CV mortality, ischemic stroke or MI.

	Aspirin (n=331)	Aspirin+ Clopidogrel (n=334)	Risk Ratio (95% CI)	P value
All bleeding	50 (15.1%)	89(26.6%)	RR 0.57 (95% CI 0.42-0.77)	P=0.001
Non-procedural bleeding	50 (15.1%)	83 (24.9%)	RR 0.61 (95% CI 0.44-0.83)	P=0.005
CV Mortality, Non-Procedural Bleeding, Stroke, MI	76 (23.0%)	104 (31.1%)	RR 0.74 (95% CI 0.57-0.95)	P= <0.001 (non-inferiority) P=0.04 (superiority)
CV Mortality, Ischemic Stroke, MI	32 (9.7%)	33 (9.9%)	RR 0.98 (95% CI 0.62-1.55)	P=0.04 (non-inferiority) P= 0.93 (superiority)

Results: Aspirin alone after TAVI reduces bleeding events significantly and does not increase rate of thromboembolic events, compared to aspirin+ 3 months clopidogrel in patients not on oral anticoagulation

