Cervical Artery Dissection in Stroke Study (CADISS)

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Background

Carotid and vertebral artery dissection is an important cause of stroke particularly in the young. It has been associated with a high rate of early recurrent stroke. The mechanism of stroke is believed to be primarily thromboembolic and both anticoagulants and antiplatelet agents are used in stroke prevention. There is no data from randomised controlled trials comparing the two drug treatments. The Cervical Artery Dissection in Stroke Study (CADISS) (http://www.dissection.co.uk/) aimed to recruit 250 patients with extracranial carotid and vertebral dissection and recent symptoms (within 7 days). Patients were randomised between antiplatelet therapy (AP) or anticoagulants (AC) for 3 months. The primary endpoint was recurrent stroke and death at 3 months, but follow-up data was collected to 12 months. 250 patients were recruited from 46 centres in 2 countries (UK and Australia). 126 were randomised to AP and 124 to AC. Mean age was 49.4 years in the AP group and 49.2 in the AC group, and the two groups were well matched for gender and risk factors. The arterial territory was carotid in 47% and vertebral in 53%. Follow-up was complete in all cases. The results including follow-up until 12 months will be presented. ISTRCTN number: ISRCTN44555237

Disclosure

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