The use of abciximab (c7E3 Fab) as a therapeutic adjunct to transluminal coronary balloon angioplasty - systematic review

Record Status
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Citation

Authors' objectives
This report determines whether the use of abciximab with angioplasty leads to a reduction in the frequency of myocardial infarction, the need for revascularization procedures or postangioplasty mortality, as well as in the late coronary reocclusion rate. It also examines the extent of the health benefits and the direct cost to the health-care system associated with this use of abciximab.

Authors' conclusions
There is clear evidence that use of abciximab with angioplasty will lower the myocardial infarction rate and the need for revascularization procedures, which are complications associated with angioplasty.

The greatest effect will be seen in procedures where the event rates (myocardial infarction and revascularization) are highest.

Confident estimates of the cost and health benefits to be expected from the use of abciximab in Quebec are not possible because of uncertainty as to the rate of myocardial infarction and revascularization events at present associated with angioplasty.

Although each myocardial infarct prevented may eventually result in some prolongation of life, there are still no conclusive data supporting such a hypothesis. Thus, estimates of cost effectiveness in terms of dollars per year of life cannot be used with confidence to directly compare the use of abciximab with other health care interventions.

These estimates are based on only four trials. However, until more trials are completed these provide the best available evidence on which to base policy decisions. The field is evolving and new evidence may soon necessitate revision of these conclusions.

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