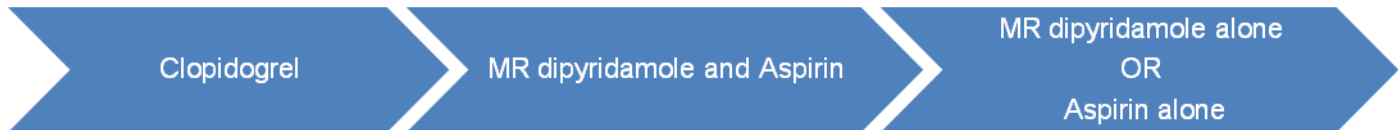


Prevention of Occlusive vascular events

NICE TA 210 – December 10 Summary

Ischaemic Stroke:



*Only move to next option due to contraindication or intolerance

Transient Ischaemic Stroke (TIA):



*Only move to next option due to contraindication or intolerance
(Clopidogrel is not licensed and is therefore not an option for TIA)

Peripheral arterial disease (PAD) and multi-vascular disease (PAD):



Myocardial Infarction (MI):



NICE clinical guidelines 48 and 94 should be followed, and then long-term aspirin should be used. Clopidogrel alone should only be used if aspirin is contraindicated or not tolerated.

Stroke due to underlying AF:

This guidance does not relate to a stroke associated with atrial fibrillation, for these patients a CHADS2 score should be done and warfarin initiated if appropriate.

Other Notes:

- All the above guidelines relate to generic clopidogrel, Plavix® is not a cost effective option
- People who are receiving MR dipyridamole and aspirin before the publication of the guidelines should have the option to continue current treatment until they and their clinician consider it appropriate to stop
- Treatment for ischaemic stroke and TIA is **no longer limited to 2 years'** duration from the most recent event