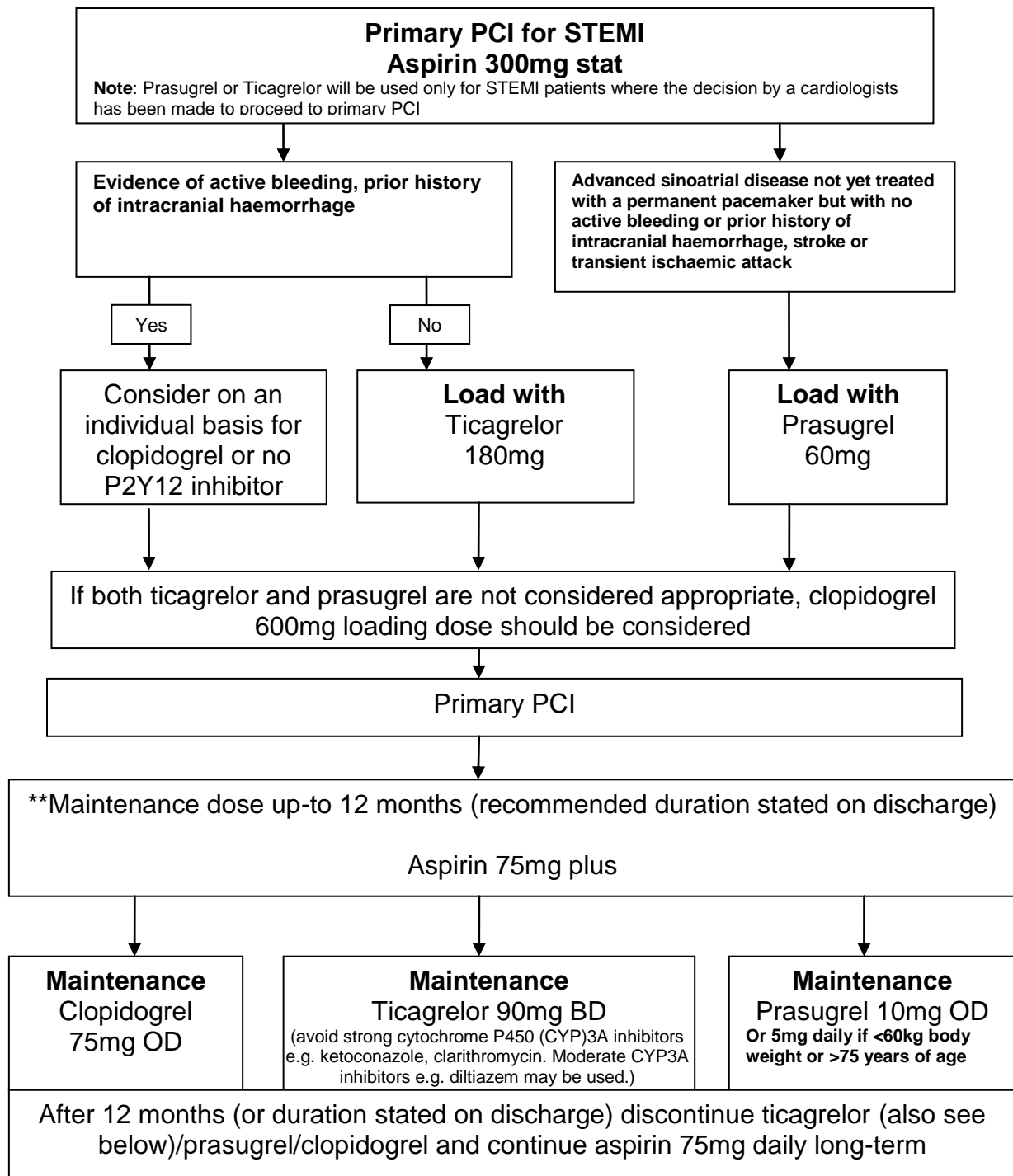


North Derbyshire Algorithm for Antiplatelet Therapy in Primary PCI- STEMI

For STEMI patients not undergoing PCI, NICE recommend aspirin and clopidogrel for at least 4 weeks.



Patients unable to tolerate ticagrelor should be considered for switching to prasugrel 10mg daily maintenance dose (or 5mg daily if <60kg body weight or >75 years of age) if there is not contraindication to prasugrel.

There is no interaction between proton pump inhibitors and either ticagrelor or prasugrel; these should be used in those at increased risk of bleeding. Do not use omeprazole if patient is switched to clopidogrel

In patients with MI who are at high risk of further coronary events, treatment with ticagrelor may be extended beyond one year (as per TA420) by downtitrating from 90mg twice daily to 60mg twice daily at one year and continuing for a further three years (in combination with aspirin 75mg once daily). **Follow cardiologist advice. The decision on intended duration of ticagrelor treatment will be made during hospital admission for the index myocardial infarction, usually following coronary angiography, and will be indicated in the discharge letter.