**PRASUGREL STILL NEEDS MORE ATTENTION!!!!!!!!!!**

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**Background:** Prasugrel is a thienopyridine that was approved in 2009 for use in patients with acute coronary syndromes undergoing PCI. It offers more consistent, faster platelet inhibition and has superior anti-ischemic efficacy at the cost of a higher risk of bleeding complications compared with clopidogrel. However, the increased use of prasugrel at discharge following PCI has resulted in its inappropriate use in patients that have absolute or relative contraindications to this drug. We conducted this research in order to assess the frequency of inappropriately used prasugrel and to encourage that physicians should use more caution when prescribing this drug.

**Methods: I**n this retrospective study we assessed the patterns of prasugrel use among 937 patients who underwent percutaneous coronary intervention and were discharged alive from July 2014 to July 2015 at a university-based tertiary medical center in West Virginia, USA. We defined the potential inappropriate use of prasugrel as use in patients who had a history of cerebrovascular disease (CVA), weighed less than 60kg or aged 75 year old or more.

**Results:** Prasugrel was prescribed to 12.9% (n=121) of patients who underwent PCI on hospital discharge. Among patients prescribed prasugrel, 42.1% (n=51/121) presented with acute coronary syndrome, while 57.8% (n=70/121) of patients received prasugrel for indications other than acute coronary syndromes. One or more known contraindications to the drug were present in 19.8% of patients discharged on this medication. Of those who were discharged inappropriately on prasugrel, 5% had history of CVA, 11.5% were aged 75 year old or more, and 3.3% weighed less than 60kg.

**Conclusion:** Prasugrel use in patients with known contraindications is not uncommon, but according to our study it’s been used inappropriately more frequently in our hospital when compared to literature data. This study aims to raise the awareness of the inappropriate use of prasugrel. Therefore, physicians should use more caution when prescribing this drug to patients undergoing PCI as inappropriate use may result in significant morbidity.