## 6<sup>th</sup> International Conference on Clinical & Experimental Cardiology November 30-December 02, 2015 San Antonio, USA

## Efficacy and safety of tenecteplase with standard anticoagulation therapy versus standard anticoagulation therapy alone for sub massive or intermediate-risk pulmonary embolism: A meta-analysis

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**Objectives:** To determine the efficacy and safety of tenecteplase with anticoagulation versus anticoagulation alone in patients with intermediate-risk Pulmonary Embolism (PE) in reducing all-cause mortality, respiratory distress requiring Mechanical Ventilation (MV), recurrence of PE and major bleeding episodes.

Design: Meta-analysis including three RCTs.

Setting: Studies included were performed in Italian, German, and American medical centers.

**Participants:** Inclusion criteria: adult patients diagnosed with PE with RV dysfunction on echocardiogram or CT scan with stable hemodynamic status. Exclusion criteria: hemodynamic instability, history of bleeding, and contraindication to anticoagulants.

Interventions: Weight-based tenecteplase with anticoagulation versus anticoagulation alone.

Main Outcome Measures: Efficacy outcome measures: reduction in all-cause mortality, respiratory distress requiring MV and recurrence of PE; Safety outcome parameter: major bleeding episodes.

**Results:** There is no statistically significant difference for death from any cause (Z=0.89, pvalue0.37), however, there is a trend favoring tenecteplase group (OR0.65, CI0.26-1.66). There is also no statistically significant difference for reduction in respiratory distress requiring MV and recurrence of PE, but there is a trend favoring tenecteplase group. In terms of major bleeding, there is a statistically significant difference, favoring placebo (OR4.91, CI2.68-8.97).

**Conclusion:** There is a trend favoring tenecteplase in intermediate-risk PE in terms of all-cause mortality, respiratory distress requiring mechanical ventilation and recurrence of PE, however, with increased rate of major bleeding.

## Biography

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