

ASPIRIN IN THE NEWS

March 2016

In the Spotlight

For Consumers

Regular Aspirin Use Could Halve Chance of Prostate Cancer

March 7, 2016. Men with prostate cancer could have more reasons to consider regular aspirin use aside from the cardiovascular benefits: A recent study showed that men who took aspirin on a regular basis had a substantially lower chance of getting prostate cancer than those who did not.

For Health Care Providers

Population-wide Impact of Long-term Use of Aspirin and the Risk for Cancer

March 3, 2016. Based upon data from two large US prospective cohort studies (Nurses' Health Study and Health Professionals Follow-up Study), regular aspirin use was associated with an overall lower risk for cancer, particularly for gastrointestinal tract cancers and colorectal cancers. These results suggest that regular aspirin use, along with screening, could lead to the prevention of a large proportion of colorectal cancers.

Consumer News

Regular Aspirin Use Found to Protect Against Overall Cancer Risk

March 3, 2016. An analysis of two long-term studies found that about five years of continuous low-dose aspirin use was associated with a reduction in the overall risk of gastrointestinal and colorectal cancers. This suggests that using aspirin could be a powerful addition to other cancer prevention methods.

Preconception Low-Dose Aspirin Well Tolerated in Women, Fetuses

March 22, 2016. New studies show that taking low doses of aspirin pre-conception to prevent preeclampsia does not appear to cause serious issues in women or their fetuses.

Longer Time to Follow Up With Patients After Heart Attack Associated with Worse Medication Adherence

March 23, 2016. Checking in with patients after a heart attack is linked to more consistent use of preventative medications such as aspirin and statins, says a study published in JAMA Cardiology – and the sooner the follow up, the better.

How Aspirin Does More than Kill Pain

March 30, 2016. Chronic inflammation may play a key role in many cancers, but whether anti-inflammatories such as aspirin should be taken to prevent cancer is controversial. Clinical trials currently underway will hopefully provide a better picture of the people who could really benefit from low-dose aspirin therapy.



Health Care Provider News

Aspirin for Thromboprophylaxis After Primary Lower Limb Arthroplasty

February 26, 2016. This study presented data on patients who underwent total hip, total knee, or unicompartmental knee arthroplasty, with aspirin as the primary agent for pharmacological thromboprophylaxis. Use of aspirin as the main thromboprophylactic agent following primary lower limb arthroplasty is safe, and is not associated with an increased incidence of deep vein thrombosis, pulmonary embolism, or death.

Low Dose Aspirin for Prevention of Cardiovascular Disease in Patients on Hemodialysis: A 5-year Prospective Cohort Study

March 1, 2016. In patients with chronic kidney disease undergoing hemodialysis, regular use of low-dose aspirin was not associated with a significantly higher cumulative survival rate compared to patients not taking aspirin. Overall, aspirin was not associated with a significant decrease in risk for all-cause mortality, cardiovascular disease, or stroke in this patient population.

The Impact of Aspirin Primary Prevention Treatment Guidelines, 2007-2015: Aspirin Use Stratified by Cardiovascular Disease Risk

March 1, 2016. This study assessed the impact of the 2009 United States Preventive Services Task Force (USPSTF) aspirin primary prevention (PP) guidelines on PP aspirin use in primary care clinics, stratified by patient risk for a primary ischemic event. Results showed that the 2009 USPSTF recommendations were not associated with improved aspirin use across risk categories. PP aspirin use for patients in the highest risk categories is similar to the rate of aspirin use for secondary prevention, and gaps in PP aspirin use remain among medium and low risk groups.

Proton-Pump Inhibitors Reduce Gastrointestinal Events Regardless of Aspirin Dose in Patients Requiring Dual Antiplatelet Therapy

March 21, 2016. Post-hoc analysis of the COGENT Trial (Clopidogrel and the Optimization of Gastrointestinal Events Trial) indicates that the proton pump inhibitor (PPI) omeprazole protects patients taking dual antiplatelet therapy against gastrointestinal events, and confers this protection whether the patients are on a low-dose or high-dose aspirin regimen. Authors suggest use of PPIs for gastroprotection in appropriately selected patients, even if they are on a low-dose aspirin regimen.

Treatment Effect of Clopidogrel Plus Aspirin Within 12 Hours of Acute Minor Stroke or Transient Ischemic Attack

March 21, 2016. Subanalysis of the CHANCE (Clopidogrel in High-Risk Patients with Acute Nondisabling Cerebrovascular Events) Trial indicates that treatment of minor stroke or transient ischemic attack patients within 12 hours with a combination of clopidogrel and aspirin was more effective compared to aspirin alone in reducing the risk of recurrent ischemic stroke during the 90-day follow-up period.

