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Effect of Carvedilol on Outcome After Myocardial Infarction in Patients with Left Ventricular Dysfunction: The CAPRICORN Randomized Trial

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- Study Design: CAPRICORN - Carvedilol Post-Infarct Survival
- multicenter (17 countries) Control in LV Dysfunction
 - randomized
 - placebo-controlled
 - n = 1959 → 975 Carvedilol group
984 Placebo group
 - followed for mean ~ 1.3 yrs.

Study Population:

- 18 yrs. or older
- stable, definite MI w/in 3-21 days before randomization
- EF $\leq 40\%$ by echo or radionuclide or contrast ventriculogram or wall-motion score index ≤ 1.3
- actual average EF $\sim 32.8\%$
- concurrent ACEI's $\times 48$ hrs. and stable dose $\times 24$ hrs. unless proven ACEI intolerance
- included appropriately tx'd HF failure during the acute phase
- Exclusions:
 - ① IV Diuretics / Inotropes for HF failure
 - ② uncontrolled HF failure
 - ③ unstable Angina
 - ④ Hypotension (SBP < 90)
 - ⑤ Uncontrolled HTN
 - ⑥ Bradycardia (HR < 60)
 - ⑦ Unstable IDDM
 - ⑧ Continuing Indication For β -blockers other than HF failure
 - ⑨ Inhaled β -2-Agonists or steroids

Study Protocol:

- initial dose : 6.25 BID
- returned @ 3-10 days for reassessment
- IF HR 750 and SBP 780 → dose ↑'d to goal 25 BID
- Maintenance Period:
 - @ 3 Months during year 1 then @ 4 Months
- all patients → minimum 3 months of f/u
- 74% of patients reached 25 BID
- 11% of patients reached 12.5 BID
- 7% of patients reached 6.25 BID

Outcomes: 633 primary outcomes

A) Primary Outcomes:

Absolute RR
@ 1-year
2.3%
NNT = 43

- ① All-Cause Mortality - Better in Carvedilol group
- ↓ 23% RR reduction ($p = 0.031$)
- ② All-Cause Mortality or CV-Cause Hospital Admission

- significant difference

B) Secondary Outcomes:

- ① Sudden Death : significant difference
- ② HF failure Hospital Admissions: significant difference
- ③ Death Due To HF failure : significant difference
- ④ CV-Cause Mortality - Better in Carvedilol group
- ↓ 25% RR reduction ($p = 0.024$)
- ⑤ Non-Fatal MI - Better in Carvedilol group
- ↓ 41% RR reduction ($p = 0.014$)
- ⑥ All-Cause Mortality or Non-Fatal MI - Better in Carvedilol group
- ↓ 29% RR reduction ($p = 0.002$)

All-Cause Mortality

(Primary Outcome: p = 0.031)

		<u>Outcome</u>	<u>No Outcome</u>		<u>Risk of Outcome</u>	<u>Risk of Outcome</u>
Treatment (Y)		116	859		0.11897	=a/(a+b)
Control (X)		151	833		0.15346	=c/(c+d)

RR (Relative Risk) or Hazard Ratio: 0.77530
 RR = (a/a+b)/(c/c+d)

RRR (Relative Risk Reduction): 22.46969%
 RRR = 1-RR x100 (%)

ARR (Absolute Risk Reduction): 3.44809%
 ARR = (X Risk - Y Risk) x100 (%)

NNT (Number Needed to Treat): 29
 NNT = 1/ARR

Cardiovascular-Cause Mortality

(Secondary Outcome: p = 0.024)

		<u>Outcome</u>	<u>No Outcome</u>		<u>Risk of Outcome</u>	<u>Risk of Outcome</u>
Treatment (Y)		104	871		0.10667	=a/(a+b)
Control (X)		139	845		0.14126	=c/(c+d)

RR (Relative Risk) or Hazard Ratio: 0.75511
 RR = (a/a+b)/(c/c+d)

RRR (Relative Risk Reduction): 24.48921%
 RRR = 1-RR x100 (%)

ARR (Absolute Risk Reduction): 3.45935%
 ARR = (X Risk - Y Risk) x100 (%)

NNT (Number Needed to Treat): 29
 NNT = 1/ARR

Non-Fatal MI

(Secondary Outcome: p = 0.014)

		<u>Outcome</u>	<u>No Outcome</u>		<u>Risk of Outcome</u>	<u>Risk of Outcome</u>
Treatment (Y)		34	941		0.03487	=a/(a+b)
Control (X)		57	977		0.05513	=c/(c+d)

RR (Relative Risk) or Hazard Ratio: 0.63259
 RR = (a/a+b)/(c/c+d)

RRR (Relative Risk Reduction): 36.74134%
 RRR = 1-RR x100 (%)

ARR (Absolute Risk Reduction): 2.02539%
 ARR = (X Risk - Y Risk) x100 (%)

NNT (Number Needed to Treat): 49
 NNT = 1/ARR

All-Cause Mortality or Non-Fatal MI

(Secondary Outcome: p = 0.002)

		<u>Outcome</u>	<u>No Outcome</u>		<u>Risk of Outcome</u>	<u>Risk of Outcome</u>
Treatment (Y)		139	836		0.14256	=a/(a+b)
Control (X)		192	792		0.19512	=c/(c+d)

RR (Relative Risk) or Hazard Ratio: 0.73064
 RR = (a/a+b)/(c/c+d)

RRR (Relative Risk Reduction): 26.93590%
 RRR = 1-RR x100 (%)

ARR (Absolute Risk Reduction): 5.25578%
 ARR = (X Risk - Y Risk) x100 (%)

NNT (Number Needed to Treat): 19
 NNT = 1/ARR