Addendum to the Supplement to the Guidelines for the Management of Transient Ischemic Attacks
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In the November 1999 issue of Stroke, an ad hoc committee of the Stroke Council of the American Heart Association published a supplement to the guidelines for the management of transient ischemic attacks. In this update, we failed to comment on a potentially important subgroup analysis of the Ticlopidine Aspirin Stroke Study (TASS) and neglected to mention a National Institutes of Health–sponsored stroke prevention study evaluating ticlopidine in African Americans.

The beneficial effects of ticlopidine relative to aspirin were more pronounced in nonwhite, predominantly African American patients. Furthermore, the incidence of adverse effects among the nonwhite population was 10% lower, and there were no reports of severe neutropenia. The African American Antiplatelet Stroke Prevention Study (AAASPS) is currently enrolling 1800 African Americans into a multicenter, randomized, double-blind clinical trial. This trial is testing ticlopidine (500 mg/d) versus aspirin (650 mg/d) for the prevention of recurrent stroke, vascular death, and myocardial infarction among middle-aged and elderly African American patients with noncardioembolic ischemic stroke.

References

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