

Understanding NICE guidance

Information for people who use NHS services

Clopidogrel and modified-release dipyridamole for preventing occlusive vascular events

NICE 'technology appraisal guidance' advises on when and how drugs and other treatments should be used in the NHS.

This leaflet is about when **clopidogrel** and modified-release **dipyridamole** should be used to treat people who have had an occlusive vascular event or have peripheral arterial disease in the NHS in England and Wales. It does not cover people who have had, or are at risk of having, a stroke caused by a type of irregular heartbeat called atrial fibrillation, or who need treatment after surgical procedures to unblock blood vessels in the heart or neck. It explains guidance (advice) from NICE (the National Institute for Health and Clinical Excellence). It is written for people who have had an occlusive vascular event or have peripheral arterial disease but it may also be useful for their families or carers or for anyone with an interest in these conditions.

It does not describe occlusive vascular events, peripheral arterial disease or the treatments in detail – a member of your healthcare team should discuss these with you. You can get more information from the organisations listed on the back page.

These may not be the only possible treatments for preventing occlusive vascular events. Your healthcare team should talk to you about whether they are suitable for you and about other treatment options available.

What has NICE said?

NICE recommends clopidogrel and modified-release dipyridamole (sometimes with aspirin) as possible treatments for some people who are at risk of having occlusive vascular events.

Who can have clopidogrel?

You should be able to have clopidogrel if:

- you have had an ischaemic stroke or have peripheral arterial disease or multivascular disease **or**
- you have had a myocardial infarction (a heart attack) and you can't take aspirin for medical reasons or it causes side effects.

Who can have modified-release dipyridamole with aspirin?

You should be able to have modified-release dipyridamole with aspirin if:

- you have had a transient ischaemic attack **or**
- you have had an ischaemic stroke and you can't take clopidogrel for medical reasons or it causes side effects.

Who can have modified-release dipyridamole without aspirin?

You should be able to have modified-release dipyridamole without aspirin if:

- you have had an ischaemic stroke and you can't take either clopidogrel or aspirin for medical reasons or they cause side effects **or**
- you have had a transient ischaemic attack and you can't take aspirin for medical reasons or it causes side effects.

Why has NICE said this?

NICE looks at how well treatments work, and also at how well they work in relation to how much they cost the NHS. NICE recommended clopidogrel and modified-release dipyridamole in these circumstances because they have been shown to work well to prevent occlusive vascular events in relation to their cost.

Occlusive vascular events

An occlusive vascular event can happen when a person has a build-up of fatty deposits on the walls of their arteries. The arteries become narrow and blood cannot flow properly – this is called vascular disease.

If a narrowed part of an artery is damaged, a blood clot can form. This blood clot can block the artery, or travel through the blood vessels to another part of the body and block the blood flow there. When an artery is blocked in this way it is known as an occlusive vascular event.

There are different types of occlusive vascular event depending on where the blockage occurs. If it is in the heart it is called a myocardial infarction (or heart attack). If the blockage is in the brain it is called an ischaemic stroke. If the blood supply is blocked for only a short time, this is called a transient ischaemic attack. If blockage or narrowing occurs in the arteries in the arms or legs it is called peripheral arterial disease. If it happens in more than one place in the body it is known as multivascular disease.

Clopidogrel and modified-release dipyridamole

Clopidogrel and modified-release dipyridamole are drugs that help to prevent blood clots from forming in arteries (known as antiplatelet drugs).

Modified-release dipyridamole stays in the body longer than normal dipyridamole so you don't have to take it as often. It is sometimes prescribed in a combined pill with aspirin to help it work better.

What does this mean for me?

When NICE recommends a treatment, the NHS must make sure it is available to those people it could help, normally within 3 months of the guidance being issued.

So, if you have had an occlusive vascular event or have peripheral arterial disease, and you and your doctor think that clopidogrel or modified-release dipyridamole is the right treatment for you (see 'What has NICE said?' on page 2), you should be able to have the treatment on the NHS. Please see www.nice.org.uk/aboutguidance if you think you are eligible for the treatment but it is not available.

If you are already taking clopidogrel or modified-release dipyridamole but you do not meet the criteria listed in 'What has NICE said?' on page 2, you should be able to continue taking it until you and your doctor decide it is the right time to stop.

More information

The organisations below can provide more information and support for people who have had an occlusive vascular event or have peripheral arterial disease. NICE is not responsible for the quality or accuracy of any information or advice provided by these organisations.

- AntiCoagulation Europe, 0208 289 6875
www.anticoagulationeurope.org
- Insulin Dependent Diabetes Trust, 01604 622837
www.iddtinternational.org
- The Stroke Association, 0303 3033 100
www.stroke.org.uk

NHS Choices (www.nhs.uk) may be a good place to find out more. Your local patient advice and liaison service (usually known as 'PALS') may be able to give you more information and support. If you live in Wales you should speak to NHS Direct Wales for information on who to contact.

About NICE

NICE produces guidance (advice) for the NHS about preventing, diagnosing and treating medical conditions. The guidance is written by independent experts, including healthcare professionals and people representing patients and carers. They consider the evidence on the disease and treatments, the views of patients and carers and the experiences of doctors, nurses and other healthcare professionals, and consider the costs involved. Staff working in the NHS are expected to follow this guidance.

To find out more about NICE, its work and how it reaches decisions, see www.nice.org.uk/aboutguidance

This leaflet and other versions of the guidance aimed at healthcare professionals are available at www.nice.org.uk/guidance/TA210

*You can order printed copies of this leaflet from NICE publications (phone 0845 003 7783 or email publications@nice.org.uk and quote reference N2395). The NICE website has a screen reader service called *Browsealoud*, which allows you to listen to our guidance. Click on the *Browsealoud* logo on the NICE website to use this service.*

We encourage NHS and voluntary organisations to use text from this leaflet in their own information about occlusive vascular events and peripheral arterial disease.