

From my perspective, considering to be ' the patient ' having to use either clopidogrel or dipyridamole retard, I would not use the latter choice at all.

The impact of the mentioned possible side effects by dipyridamole on me is that much more dangerous almost that I would refuse having it.

Storage restriction to being the least of my problem.

However, indicated to arise problems when suffering with severe coronary disease which I might not be aware of, same with angina pectoris, already suffering with ongoing pulmonary embolism: who is assuring me that my heart is in safe waters now ? Further aortic stenosis may occur without noticing, heart failure as a possible consequence as well are worrisome contra-indications.

Hypotension might not worry me, neither myasthenia gravis as I would signal those in time with myself. Learning that with blood clotting disorder I should not use it, is a very good reasoning for refusing treatment as I live with that condition indeed.

My most aggressive reason for refusing the drug, and most probably the best one for me, is the fact that angioedema may occur. I suffer from that out-of-control phenomenon, have to carry two big volumed packages of adrenaline injectables on me continuously to save my life. Last year alone, I was in hospital acutely four times with out-of-control angioedema episodes, choking, lips as thick as tractor tyres, and a swollen throat which left me with fear of suffocation. I landed on the operation table in theatre, being cut all open inside my mouth looking for a possible hidden reason there, in gums or soft tissue. Having a drug which might trigger that side-effect on me ? No. It would be criminal.

Clopidogrel as a pro-drug, seems to me to being a much better choice. The kinetic pattern is less aggressive, and still be a powerful instrument in fighting my problem irreversibly once metabolized.

There will be plentiful possibilities of side-effects here, but not that serious indeed. I may face pain in my abdomen, diarrhoea, indigestion, bleeding, likewise as with dipyridamole. Constipation solves the problem itself in 9 out of 10 episodes, thus no worries. As with headache and dizziness and loss of balance. As long as manageable.

Sensitivity problems for both drugs are similar and enough reason to stop using asap.

When it comes to comparing price: Dipyridamole is 40% more expensive. Acceptable ? Yes, in severe cases where the other product is not aggressive enough. But no reason at all for a widespread prescription pattern.

Compared with the aboves, warfarin is absolutely cheap at £1.20 the 28 pack for the highest dosage. And warfarin has it' s side-effects certainly, but noway that serious.

I do know through my work at University Hospital Birmingham that most probably in September 2010, the European Medicines Agency in London will approve of two new brands to operate on the European market. Very specifically pointed at identical indications as these two, clopidogrel and dipyridamole. It is almost ironic that NICE is deciding now on clopidogrel and/ or dipyridamole, with the prospect of possibly much better variants with less serious side-effects..

Nobody can look into the future yet, or should we ?

Kind regards, XXXXXXXXXX