

## Product      Generic name      Dosing

### Oral antiplatelet therapy

Aspirin®	ASA	oral dose of 150-325 mg or IV dose of 250-500 mg
Plavix®	clopidogrel	loading dose of 300 mg (600 mg) followed by 75 mg/day

### GP IIb/IIIa inhibitor

Reopro®	abciximab	0.25 mg/kg IV bolus followed by infusion of 0.125 µg/kg/min
Aggrastat®	tirofiban	0.4 mg/kg/min for 30 min followed by an infusion of 0.1 µg/kg/min Half infusion dose if GFR < 30 ml/min
Integrelin®	eptifibatide	180 µg/kg IV bolus (2 <sup>nd</sup> bolus after 10 min for PCI) followed by infusion of 2.0 µg/kg/min Half infusion dose if GFR 30-60 ml/min, contra-indication if GFR < 30 ml/min

### Anticoagulants

Heparin	Unfract.Heparin	60-70 U/kg followed by 12-15 U/kg/h (aPTT 1.5-2.5x control)
Clexane®	enoxaparin	1 mg/kg SC every 12h, if GFR < 30 ml/min: 1 mg/kg/24h SC <u>In case of fibrinolysis:</u> < 75 years                           ≥ 75 years 30 mg IV bolus                       no bolus, + 1 mg/kg/12h SC                   0.75 mg/kg/12h SC  If GFR < 30 ml/min 30 mg IV bolus                       no bolus, + 1 mg/kg/24h SC                   1 mg/kg/24h SC
Arixtra®	fondaparinux	2.5 mg SC/day. In case of PCI, add 50 U/kg heparin to prevent catheter thrombosis
Angiox®	bivalirudin	0.1 mg/kg IV bolus followed by infusion of 0.25 mg/kg/h <u>in case of PCI:</u> 0.75 mg/kg IV bolus followed by infusion of 1.75 mg/kg/h Reduction of infusion rate to 1.0 mg/kg/h if GFR < 30 ml/min

### Fibrinolytic agents

Actilyse®	alteplase	1) 15 mg bolus 2) 0.75 mg/kg over 30 min (max 50 mg) 3) 0.50 mg/kg over 60 min (max 35 mg)
Rapilysin®	reteplase	2 x 10 IU IV bolus with an interval of 30 min
Metalysé®	tenecteplase	single IV bolus: < 60kg: 30 mg; 60-70 kg: 35 mg; 70-80 kg: 40 mg 80-90 kg: 45 mg; > 90 kg: 50 mg

### Anti-angina agents

Cedocard®	isosorbidedinitraat	0.5-2 µg/kg/min
Corvaton®	molsidomine	0.5-2 µg/kg/min

### Opioids

Morphine HCL	morphine	4-8 mg IV bolus
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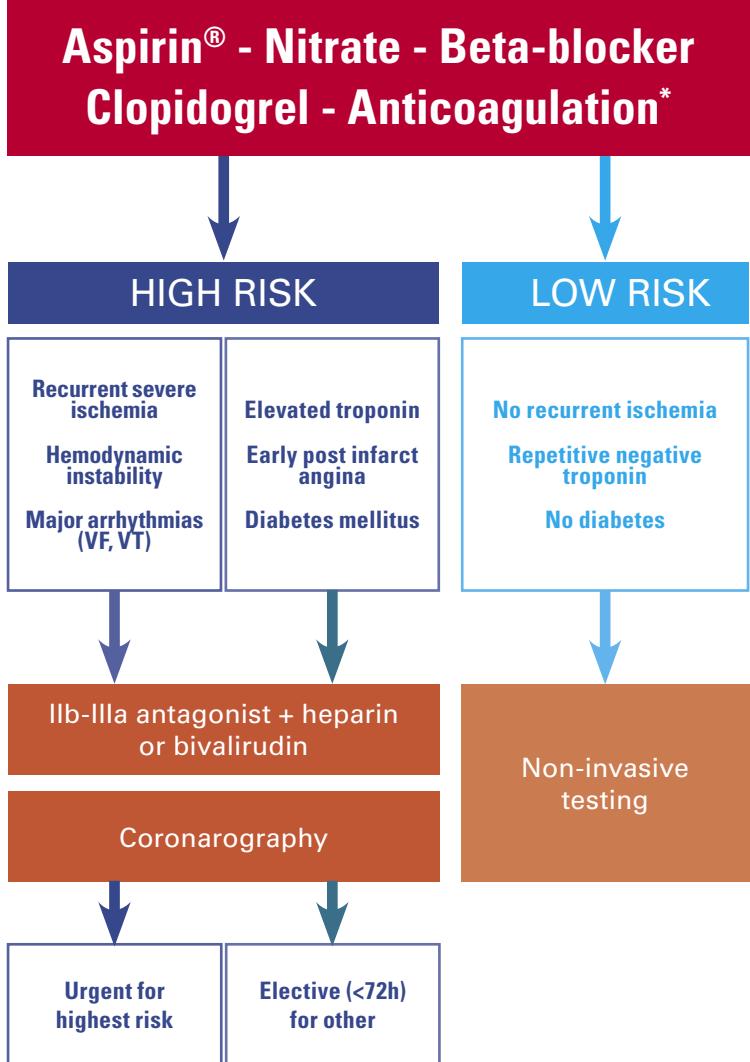
# Management of Acute Coronary Syndromes

Recommendations of the  
Belgian Interdisciplinary  
Working Group  
on Acute Cardiology



[www.biwac.be](http://www.biwac.be)

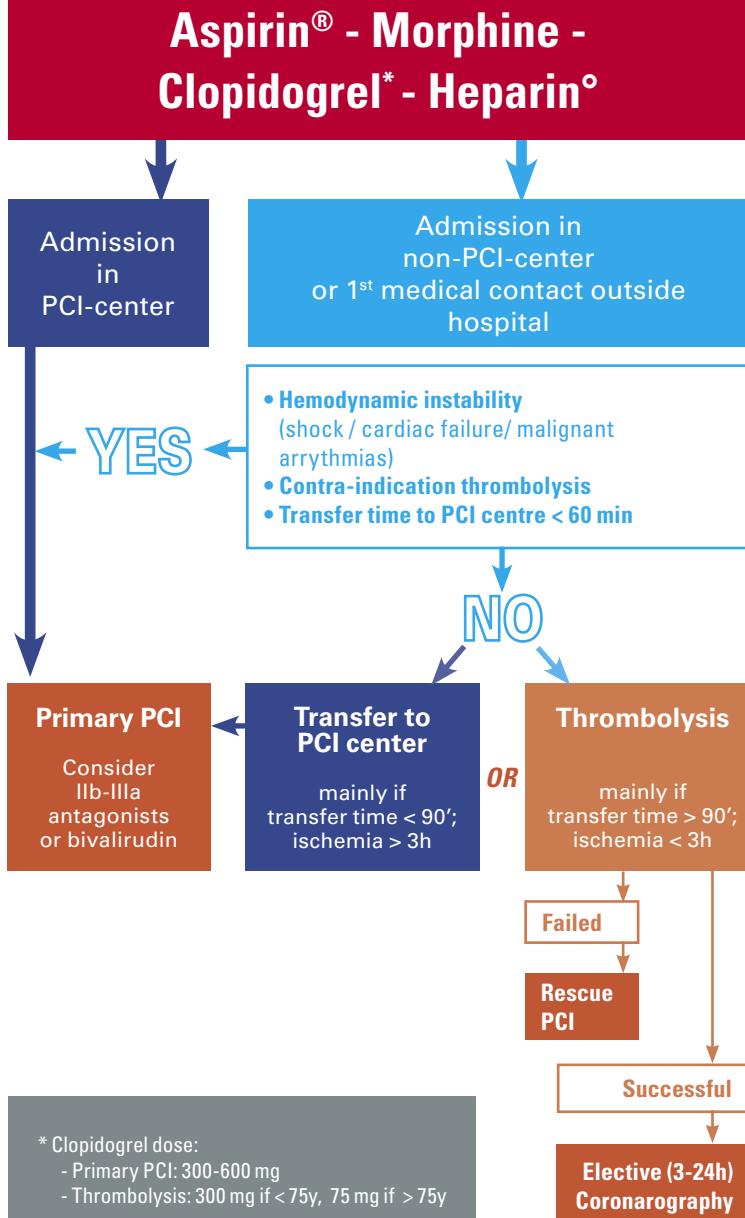
# Acute coronary syndrome without ST elevation



\*Anticoagulation:

- Low molecular weight heparin: Enoxaparin
- Factor-Xa inhibition: Fondaparinux
  - mainly for patients with high bleeding risk (e.g. elderly women, GFR < 60 ml/min)
- Unfractionated heparin:
  - mainly for urgent invasive procedures

# ST elevation MI (<12 h after onset of pain)



\* Clopidogrel dose:

- Primary PCI: 300-600 mg
- Thrombolysis: 300 mg if < 75y, 75 mg if > 75y

° UHF for primary PCI,  
Enoxaparin for thrombolysis