The ADAPTABLE Aspirin Study

pcornet® The National Patient-Centered Clinical Research Network

THE QUESTION

Clinicians often prescribe aspirin to prevent strokes and heart attacks in people living with heart disease. Research has yet to determine the best dose to use, since aspirin can cause serious side effects – like bleeding – in some people.

THE PROBLEM

Heart disease is the No. 1 killer in the U.S.

611,000
people in 2013, one death in 4; accounting for 1 in every 6 healthcare dollars.

Cardiovascular disease (heart attack and stroke) is the most common form of heart disease.

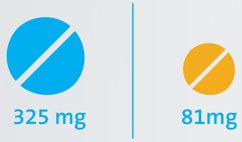
Heart disease strikes someone in the U.S. about once every
43 seconds.

Aspirin is widely prescribed to prevent heart attacks and strokes in people living with heart disease.

60%
of patients with heart disease take a 325 milligram dose each day while 36% take 81 milligrams (or baby aspirin).

THE STUDY

The ADAPTABLE trial will compare two common aspirin dosages.



The study will be large and will involve patients across the U.S.

15,000
patients living with heart disease will use a daily aspirin dose of either 81 mg or 325 mg.

ADAPTABLE will use PCORnet to conduct the study and disseminate results. Patients will be partners at every stage of the trial, which will collect data using tools with state-of-the-art security.

ANSWERS FOR BETTER CARE

Results of this study will help patients and their caregivers answer questions like:

- How much aspirin should I take each day to reduce my risk of another heart attack or stroke?
- Do the benefits of taking aspirin every day differ based on the dose?
- Do the risks differ based on the dose?
- Based on my health, age, and other circumstances, what's the best dose to protect my health?

This study will use the power of PCORnet to seek answers to these questions and improve patient care and outcomes.

Identifying the aspirin dose that works best could prevent as many as **88,800** deaths per year worldwide

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PCORnet is an initiative of the Patient-Centered Outcomes Research Institute.