

**EXPERT CONSENSUS DOCUMENT**

# ACCF/ACG/AHA 2010 Expert Consensus Document on the Concomitant Use of Proton Pump Inhibitors and Thienopyridines: A Focused Update of the ACCF/ACG/AHA 2008 Expert Consensus Document on Reducing the Gastrointestinal Risks of Antiplatelet Therapy and NSAID Use

A Report of the American College of Cardiology Foundation Task Force on Expert Consensus Documents

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## Abbreviation List

ACS = acute coronary syndromes
ADP = adenosine diphosphate
CI = confidence interval
CV = cardiovascular
GI = gastrointestinal
HR = hazard ratio
H2RA = histamine H <sub>2</sub> receptor antagonist
MI = myocardial infarction
NNH = number-needed-to-harm
NSAID = nonsteroidal anti-inflammatory drug
OR = odds ratio
PCI = percutaneous coronary intervention
PPI = proton pump inhibitor
RCT = randomized clinical trial
RR = relative risk
VASP = vasodilator-stimulated phosphoprotein

## Preamble

This expert consensus document was developed by the American College of Cardiology Foundation (ACCF), the American College of Gastroenterology (ACG), and the American Heart Association (AHA). Expert consensus documents inform practitioners, payers, and other interested parties of the opinion of ACCF and document cosponsors concerning evolving areas of clinical practice or medical technologies. Expert consensus documents cover topics for which the evidence base, experience with technology, or clinical practice is not considered sufficiently well developed to be evaluated by the formal ACCF/AHA Practice Guidelines process. Often, the topic is the subject of considerable ongoing investigation. Thus, the reader should view the expert consensus document as the best attempt of the ACCF and document cosponsors to inform clinical practice in areas where rigorous evidence may not yet be available.

To avoid actual, potential, or perceived conflicts of interest that may arise as a result of industry relationships or personal interests among the writing committee, all members of the writing committee, as well as peer reviewers of the document, are asked to disclose all current health care-related relationships and those existing 12 months

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