

## Patient information leaflet



# Keep and Copy Series



# TAKING ASPIRIN FOR THE PREVENTION OF CARDIO- VASCULAR DISEASE

*S Afr J Diabetes Vasc Dis* 2009; **6**: 59

### WHY HAS MY DOCTOR PRESCRIBED ASPIRIN?

Your doctor has assessed your risk for heart disease and stroke and is prescribing aspirin daily to reduce the risk of these life-threatening events.

Heart attacks and ischaemic stroke (strokes) occur when blockages in the blood vessels that supply the heart or brain cut off blood supply long enough to damage parts of these organs.

Aspirin decreases the chances of a heart attack or stroke in patients who have had heart attacks or strokes, and newer evidence suggests that aspirin is also beneficial in certain people who have not had a heart attack or stroke. This is particularly true for diabetic patients.

Aspirin can cause uncommon but serious complications, such as bleeding in the digestive tract or brain. Enteric-coated aspirin can reduce the occurrence of this bleeding. The dose of aspirin for prevention should not be more than 150 mg/day and a dose of approximately 75 mg/day is as effective as higher dosages, which are associated with more bleeding complications.

Evidence shows that aspirin decreases the incidence of heart attacks in men aged 45 to 79 years and strokes in women aged 55 to 79 years, who are at increased risk for these events but have not yet had either of these problems. Aspirin also prevents more heart attacks and strokes in people with several risk factors for cardiovascular disease. However, taking aspirin does increase a person's chances of bleeding in the stomach, intestine or brain (called haemorrhagic stroke). Your doctor will have carefully looked at this benefit–risk relationship.

### SOURCE

Aspirin for the prevention of cardiovascular disease: US Preventive Services Task Force. *Ann Int Med* 2009; **150**: 396–404.



### HOW DO I KNOW WHAT MY RISK LEVELS ARE?

For men, patients and doctors should consider age, blood pressure and cholesterol level, and whether he is a smoker or a diabetic when deciding whether to use aspirin to prevent heart attacks. (A tool to calculate your risk as a man for a heart attack is available at <http://healthlink.mcw.edu/article/923521437.html>.)

For women, patients and doctors should consider age, blood pressure, whether she is a diabetic or a smoker, has abnormal heart rhythms, an enlarged heart or has a history of other cardiovascular disease. (A tool for estimating your stroke risk is available at [www.westernstroke.org/PersonalStrokeRisk1.xls](http://www.westernstroke.org/PersonalStrokeRisk1.xls).)

Men aged 45 to 79 years should take aspirin if the chances of preventing heart attack outweigh the chances of bleeding in the digestive tract. Women aged 55 to 79 years should take aspirin if the chances of reducing ischaemic stroke outweigh the chances of bleeding in the digestive tract.

Men younger than 45 years and women younger than 55 years who have not previously had a heart attack or stroke should not take aspirin for prevention. It is unclear whether the benefits of aspirin outweigh the risks for patients 80 years or older.

### WHAT ARE THE CAUTIONS TO ASPIRIN USAGE?

Always follow the advice of your doctor/nurse. Take your medication regularly as prescribed. If you are taking other medication, tell your healthcare provider. Read the package insert of the medicine carefully.