

TRACER

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Sponsor:

Schering-Plough Research Institute, a Division of Schering Corporation

Study Purpose:

A Multicenter, Randomized, Double-Blind, Placebo-Controlled Study to Evaluate the Safety and Efficacy of SCH 530348 in Addition to Standard of Care in Subjects With Acute Coronary Syndrome: **Thrombin Receptor Antagonist for Clinical Event Reduction in Acute Coronary Syndrome (TRA•CER)**

Objective:

To evaluate the hypothesis that SCH 530348 added to standard of care will reduce the incidence of atherothrombotic ischemic events relative to standard of care alone, as measured by the composite of cardiovascular death, myocardial infarction (MI), stroke, recurrent ischemia with rehospitalization, and urgent coronary revascularization.

Inclusion:

1. Subject must be 18 years of age or older, and may be of either sex and of any race.
2. Subject must have a current clinical manifestation of NSTEMI according to the following three criteria:
 - a. history of cardiac-ischemia-related symptoms of at least 10 minutes duration ≤ 24 hours prior to randomized treatment assignment **AND**
 - b. concurrent biomarker evidence – elevated troponin I or troponin T greater than the stated upper limit of normal (ULN) at the study site, **OR** creatine kinase-myocardial band (CK-MB) greater than the ULN at the study site **AND**
 - c. any one (or more) of the following five criteria
 - i. age ≥ 55 years.

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- ii. documented prior history of MI or coronary revascularization (percutaneous coronary intervention [PCI] or coronary artery bypass grafting [CABG])
 - iii. diabetes (documented use of insulin or oral hypoglycemic[s])
 - iv. concurrent electrocardiographic evidence – electrocardiogram (ECG) changes comprising new or presumably new ST-segment depression ≥ 0.1 mV (≥ 1 mm), or transient (< 30 minutes) ST-segment elevation ≥ 0.1 mV (≥ 1 mm) in at least two contiguous leads
 - v. peripheral arterial disease (PAD) as indicated by a history of intermittent claudication and either
 - (a) an ankle/brachial index (ABI) of < 0.85 , or
 - (b) amputation, peripheral bypass, or peripheral angioplasty of the extremities secondary to ischemia
3. Subject must be willing and able to give informed consent.
 4. A woman of child-bearing potential who is currently sexually active must agree to use a medically accepted method of contraception prior to screening, while receiving protocol-specified medication, and for 2 months after stopping the medication.
 5. A woman of child-bearing potential who is not currently sexually active must agree to use a medically accepted method of contraception should she become sexually active while participating in the study

Exclusion:

- Concurrent or anticipated treatment with warfarin (or derivatives, eg, phenprocoumon [but see notes in text for exceptions]), oral factor Xa inhibitor, or oral direct thrombin inhibitor after enrollment
- Concurrent or anticipated treatment with a potent inducer (eg, rifampin) or potent inhibitor (eg, ketoconazole, erythromycin) of CYP3A4 isoenzymes (but see note in text for exceptions)
- History of a bleeding diathesis, or evidence of active abnormal bleeding within 30 days before enrollment
- History at any time of intracranial hemorrhage, intracranial or spinal cord surgery, or a central nervous system tumor or aneurysm
- Documented sustained severe hypertension (systolic blood pressure > 200 mmHg or diastolic blood pressure > 110 mmHg) at enrollment or within the previous 10 days
- Severe valvular heart disease
- History within 2 weeks prior to enrollment of major surgery other than mentioned above or of ischemic (presumed thrombotic) stroke
- Known platelet count $< 100,000/\text{mm}^3$ at time of enrollment or within 24 hours prior to enrollment
- Current active hepatobiliary disease, or known unexplained persistent increase in serum alanine aminotransferase (ALT) or aspartate aminotransferase (AST) activity to two times or more the upper limit of

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- the reference range (upper limit of "normal" [$\geq 2 \times \text{ULN}$]) within 30 days before enrollment
- Any serious illness or any condition that the investigator feels would (a) pose a significant hazard to the subject if investigational therapy were initiated, or (b) would limit the prognosis of the subject, regardless of investigational therapy
 - Any serious medical comorbidity (eg, active malignancy) such that the subject's life expectancy is <24 months
 - Previous participation in the current study
 - Current participation in any other study of investigational therapy, or participation in such a study within the last 30 days
 - Known hypersensitivity to any component of the current investigational product
 - Subject is a woman who is breast-feeding, pregnant, or who intends to become pregnant
 - Subject is part of the staff personnel directly involved with this study, or is a family member of the investigational staff

Status:

Follow-up ONLY!

If you have any questions, please feel free to contact the coordinators, and they will be happy to answer any questions you have regarding this study.