

**Table 3. Indications and Complications of Antiplatelets and Thrombolytics**

DRUG	MECHANISM	INDICATIONS	MAJOR COMPLICATIONS
<b><i>Antiplatelet</i></b>			
Aspirin*	Thromboxane, cyclooxygenase	ACS, CVA/TIA	Hemorrhage, gastrointestinal
NSAIDs	Thromboxane, cyclooxygenase		Hemorrhage, liver
Dipyridamole*	cAMP	CVA/TIA	Hemorrhage, bronchospasm
Clopidogrel	ADP	ACS, PCI, CVA	Hemorrhage, platelet, TTP
Ticlopidine	ADP	CVA, PCI (post stent)	Hemorrhage, platelet, TTP
Abciximab	GPIIb/IIIa receptor	ACS PCI	Hemorrhage, platelet
Tirofiban	GPIIb/IIIa receptor	ACS PCI	Hemorrhage, platelet
Eptifibatide	GPIIb/IIIa receptor	ACS PCI	Hemorrhage, platelet
<b><i>Thrombolytic</i></b>			
Streptokinase	Plasmin	AMI, CVA, VTE	Hemorrhage
Anistreplase	Plasmin	AMI	Hemorrhage
Urokinase	Plasmin	PE	Hemorrhage
Alteplase	Plasmin	AMI, CVA, VTE	Hemorrhage
Reteplase	Plasmin	AMI	Hemorrhage
Tenecteplase	Plasmin	AMI	Hemorrhage

\* A combination of aspirin and extended release dipyridamole is commercially available (Aggrenox), platelet = thrombocytopenia