Heparins reduce the number of heart attacks after acute coronary syndromes

Clinical question	How effective are heparins in the treatment of patients with acute coronary syndromes (ACS)?
Bottom line	Compared to placebo, heparins reduce the number of heart attacks (NNT* 33) but cause more minor bleeding (NNH* 17) after ACS. The risks of mortality, revascularisation, recurrent angina, major bleeding and thrombocytopenia were similar in both groups. *NNT = number needed to treat to benefit one individual. *NNH = number needed to treat to cause harm in one individual.
Caveat	Parenteral unfractionated heparin (UFH) or low molecular weight heparin (LMWH) was given in addition to standard therapy with aspirin.
Context	Acute coronary syndromes include unstable angina and non-ST segment myocardial infarction. The use of UFH and LMWH heparin were evaluated in these trials, and were given within 24 to 72 hours of the onset of symptoms for a 2 to 8 day period.
Cochrane Systematic Review	Magee KD et al. Heparin versus placebo for acute coronary syndromes. Cochrane Reviews 2008, Issue 1. Art. No.: CD003462. DOI:10.1002/14651858.CD003462.pub2. This review contains 8 studies involving 3,118 participants.
Pearls No. 89, July 2008, written by Brian R McAvoy	