

中文題目：低劑量阿斯匹靈在心血管疾病、腦血管疾病及癌症的初級預防上所扮演的腳色：
全國性研究

英文題目：The Role of Low-dose Aspirin in Primary Prevention of Cardiovascular Disease,
Cerebrovascular disease and Cancer: A Nationwide Study

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BACKGROUND: The long-term net risk-benefit effect of occasional vs. regular low-dose aspirin (≤ 100 mg per day) for cancer, heart disease, and stroke was calculated with a real-world dataset from Taiwan's nationwide population-based insurance.

METHODS: We used the database of 1,000,000 patients, who were randomly selected from 22.6 million of Taiwan's National Health Insurance enrollees in 1997-2000 (NHI 2000). The potential study subjects were those aged 30-95 years, were found not to have been prescribed aspirin before 1 January 2000, but to have first been prescribed low-dose aspirin (≤ 100 mg per day) after that date, and were followed up to 31 December 2009. Participants prescribed low-dose aspirin $< 20\%$ during the study period were considered occasional users and those prescribed $\geq 80\%$ regular users. Rate differences of hemorrhage, ischemia, and cancer between these users were calculated their net clinical risk after the propensity-score matching.

RESULTS: A total of 1,720 pairs were analyzed. Hemorrhage and ischemia occurred in 25 (1.45%) and 67 participants (3.90%) in occasional users and 69 (4.01%) and 100 participants (5.81%) in regular users, whereas cancer occurred in 32 participants (1.86%) in occasional users and 26 participants (1.51%) in regular users during the study period. The crude and adjusted net clinical risks of low-dose aspirin use between the two frequency of users ($\geq 80\%$ vs. $< 20\%$) were 4.12% (95% CI = 2.19%, 6.07%; $P < 0.001$) and 3.93% (95% CI = 2.01%, 5.84%; $P < 0.001$).

CONCLUSIONS: A long-time regular use of low-dose aspirin might not convey more beneficial effect of primary prevention for major vascular diseases and cancer than occasional use.