

Table 1. Largest* RCTs [45-59] concerning DAPT Shortening published in the last 5 years.						
Name	Publication Year	No. of Patients	Objective	Primary Endpoint	Primary Endpoint met?	Follow up
General Population						
ONE MONTH DAPT	2021	3020	1-month DAPT followed by aspirin monotherapy after PF-DCS implantation vs 6 to 12 months of DAPT after BP-DES implantation	Cardiac death, nonfatal myocardial infarction, target vessel revascularization, stroke, major bleeding	yes	1 Year
SMART CHOICE	2019	2993	3-month DAPT vs 12 months DAPT in patients undergoing PCI	MACEs and cerebrovascular events at 12 months	Yes	1 Year
TWILIGHT	2019	9006	3-month Ticagrelor based DAPT vs 12-month in high ischemic or high bleeding risk patients	BARC type 2, 3, or 5 bleeding	yes	1 Year
HOST-IDEA	2023	2013	3- to 6-month or 12-month DAPT after PCI	NACEs at 12 months	Yes	1 Year
SHARE	2024	1452	3 months or 12 months DAPT post PCI	Major bleeding and MACEs between 3 and 12 months after the index PCI	Yes	1 Year
High Ischemic Risk Patients						
STOP DAPT-2 ACS	2022	4169	Clopidogrel monotherapy after 1-2 months of DAPT vs 12-month DAPT in patients with ACS	cardiovascular or bleeding events at 12 months	No	1 Year
IDEAL - LM	2022	818	long-term clinical outcomes after implantation of a BP-PtCr-EES followed by 4-months DAPT compared to a DP-CoCr-EES followed by 12 months DAPT in patients undergoing PCI of unprotected LMCA	MACEs: all-cause death, myocardial infarction, or ischemia-driven target vessel revascularization at 2 years.	Yes	2 Years
TWILLIGHT-ACS	2020	7119	3-month Ticagrelor based DAPT vs 12-month DAPT in NSTEMI-ACS patients undergoing PCI with DES	BARC type 2, 3, or 5 bleeding	Yes	1 Year
TICO	2020	3056	ticagrelor monotherapy after 3-month DAPT vs ticagrelor-based 12-month DAPT in patients with ACS treated with DES	major bleeding, MACEs and cerebrovascular events	yes	1 Year
REDUCE	2019	1496	3-month vs 12-month DAPT in ACS patients undergoing new-generation DES implantation	all-cause mortality, myocardial infarction, stent thrombosis, stroke, target vessel revascularization	yes	1 Year
High Bleeding Risk						
MASTER DAPT	2021	4434	1-month vs 3-month DAPT post PCI with a BP-SES at HBR patients	NACEs (death from any cause, myocardial infarction, stroke, or major bleeding)	yes	11 months
TWILLIGHT-HBR	2021	1064	3-month Ticagrelor based DAPT vs 12-month DAPT post PCI in HBR	BARC type 2, 3, or 5 bleeding	Yes	1 Year
XIENCE Short DAPT	2021	3652	1-month vs 6-month and 3-month vs 12-month DAPT on HBR patients after PCI with CoCr-EES	all-cause death or myocardial infarction	Yes	1 Year
GLASSY	2019	7585	1-month DAPT followed by 23-month ticagrelor monotherapy or conventional 12-month DAPT followed by 12-month aspirin in HBR patients	all-cause death, nonfatal MI, nonfatal stroke, or urgent target vessel revascularization and superior in preventing BARC 3 or 5 bleeding at 2 years	No	2 years

DES: drug-eluting stent, BP-DES: biodegradable-polymer, BP-SES: biodegradable-polymer sirolimus eluting stent, PF-DCS: polymer-free drug-coated stent, NACE: net adverse clinical events, BARC: Bleeding Academic Research Consortium, MACE: major adverse cardiovascular events, BP-PtCr-EES: biodegradable polymer platinum-chromium everolimus-eluting stent, DP-CoCr-EES: durable polymer cobalt-chromium everolimus-eluting stent, LMCA: left main coronary artery, SCAD: Stable Coronary Artery Disease, NSTEMI-ACS: Non-ST elevation Acute Myocardial Infarction, HBR: High Bleeding Risk, PCI: Percutaneous Coronary Intervention, DAPT: Dual Antiplatelet Therapy, CoCr-EES: cobalt-chromium everolimus-eluting stents

*Including more than 500 patients