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## Low-dose aspirin for the prevention and treatment of preeclampsia

Low-dose aspirin (60-150 mg/d) is a widely used and well-tolerated antiplatelet treatment. This mode of therapy has the effect of irreversibly inhibiting almost all platelet cyclo-oxygenase activity, thereby blocking synthesis of the vasoconstrictor and platelet-aggregating agent thromboxane.

In preeclampsia, aspirin helps to rectify the intravascular imbalance between thromboxane and prostacyclin.

In this multicenter study, 9364 women were randomly given 60 mg of aspirin daily or matching placebo. Seventy-four percent were entered for prophylaxis of preeclampsia; 12%, for prophylaxis of intrauterine growth retardation (IUGR); 12%, for treatment of preeclampsia; and 3%, for treatment of IUGR.

Overall, the use of aspirin reduced the incidence of proteinuric preeclampsia by only 12%, which was not significant. Also, aspirin use did not have any significant effect on the incidence of IUGR or of stillbirth and neonatal death. Aspirin did, however, significantly reduce the likelihood of preterm delivery. There was a significant trend toward progressively greater reductions in proteinuric preeclampsia the more preterm the delivery.

Aspirin was not associated with a significant increase in placental hemorrhages or in bleeding during preparation for epidural anesthesia, but there was a slight increase in the use of blood transfusion after delivery. Low-dose aspirin was generally safe for the fetus and newborn infant, with no evidence of an increased likelihood of bleeding.

The study findings do not support routine prophylactic or therapeutic administration of antiplatelet therapy in pregnancy to all women at increased risk of preeclampsia or IUGR. Low-dose aspirin may be justified in women judged to be especially liable to early-onset preeclampsia severe enough to need very preterm delivery. In such women, it seems appropriate to start low-dose aspirin prophylactically early in the second trimester.

CLASP (Collaborative Low-dose Aspirin Study in Pregnancy) Collaborative Group: CLASP: A randomised trial of low-dose aspirin for the prevention and treatment of pre-eclampsia among 9364 pregnant women. *Lancet* 1994;343:619-629.

## Effect of cranberry juice intake on bacteriuria and pyuria

To determine the effect of regular intake of cranberry juice on bacteriuria and pyuria in elderly women, the researchers conducted a trial with 153 elderly women (mean age, 78.5 years).

The subjects were randomly assigned to consume 300 mL/d of a commercially available standard cranberry beverage or of a specially prepared synthetic placebo drink that was indistinguishable in taste, appearance, and vitamin C content but lacked cranberry content.

A baseline urine sample and six clean-voided study urine sam-