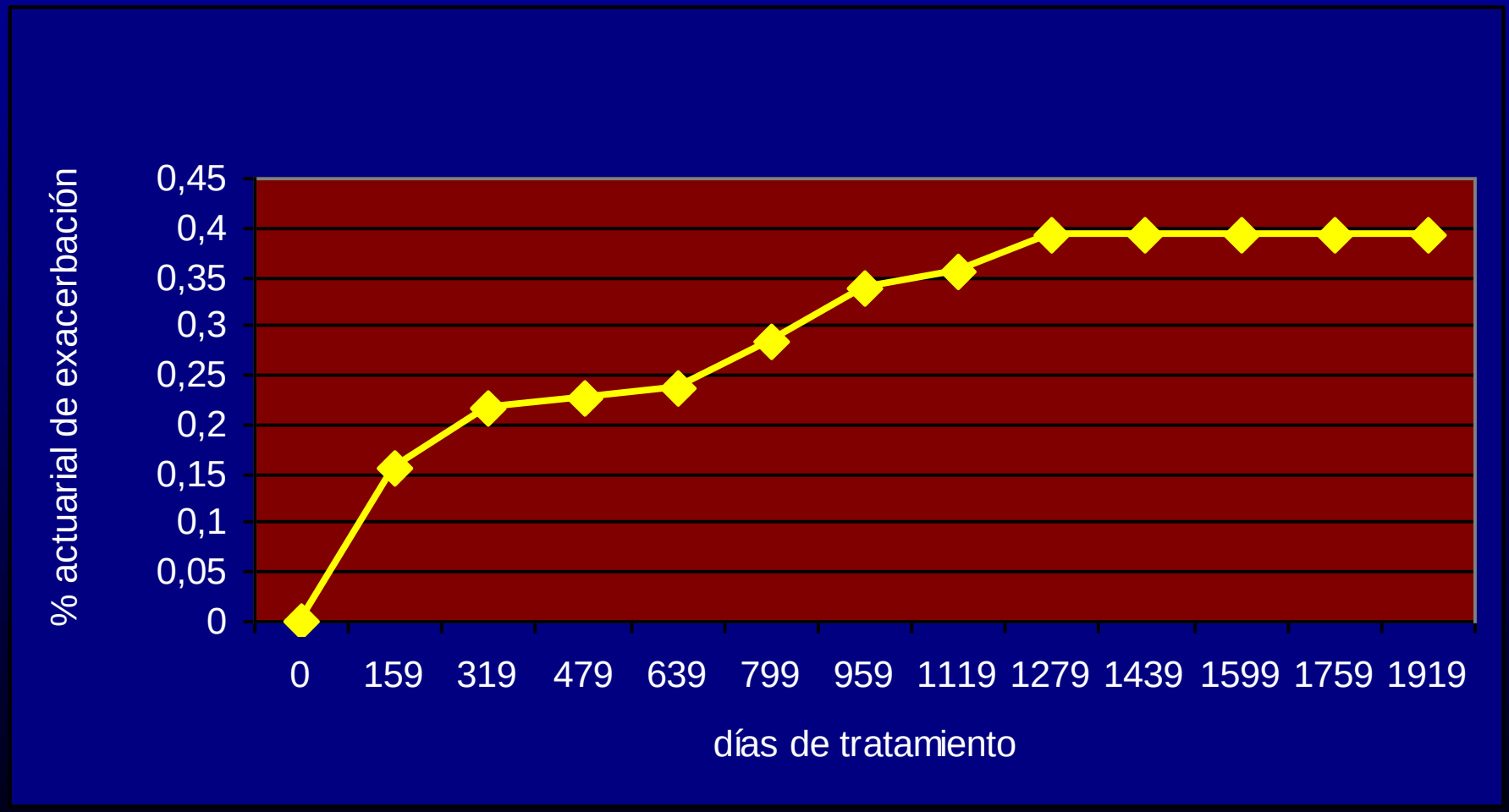
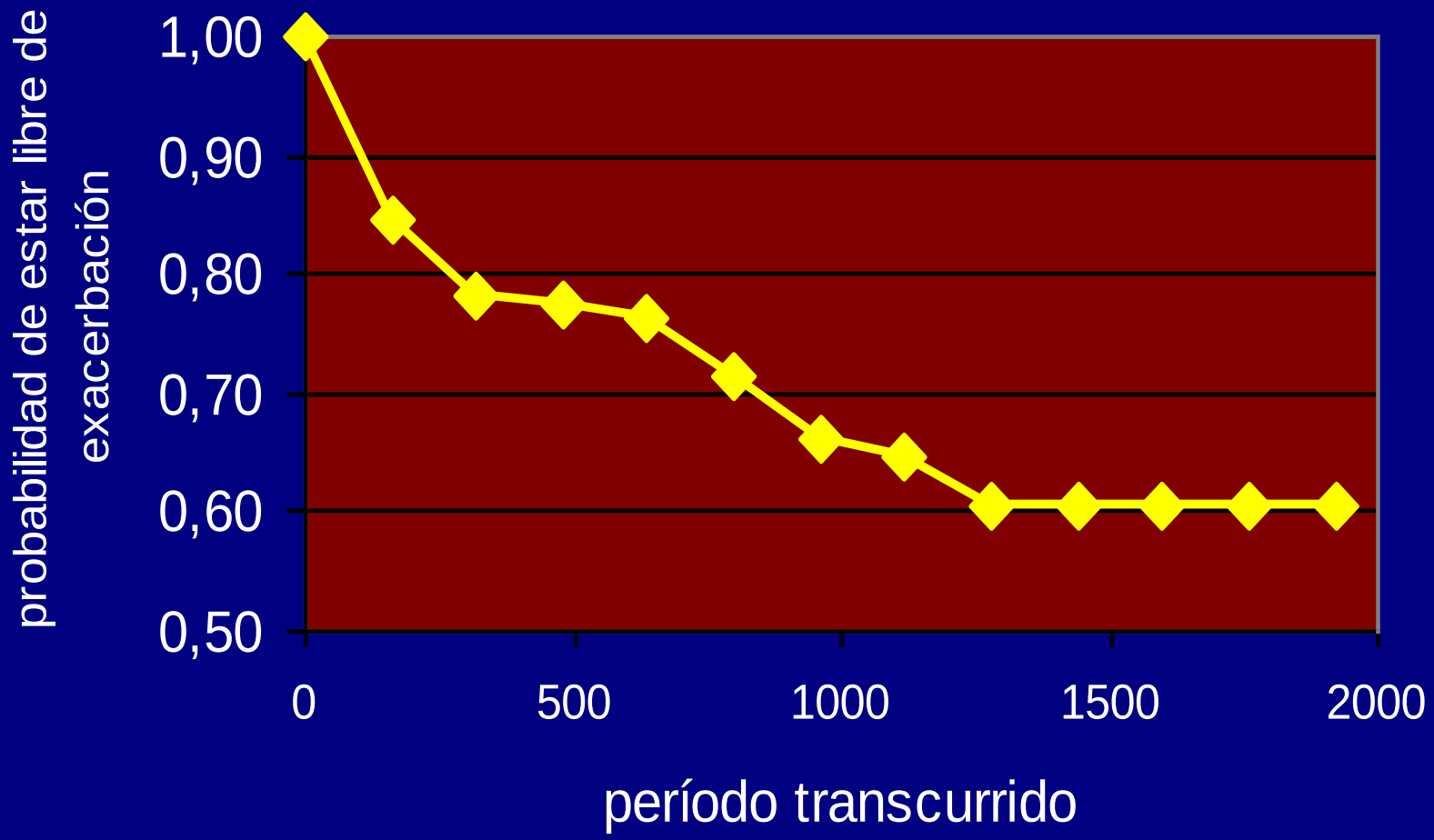
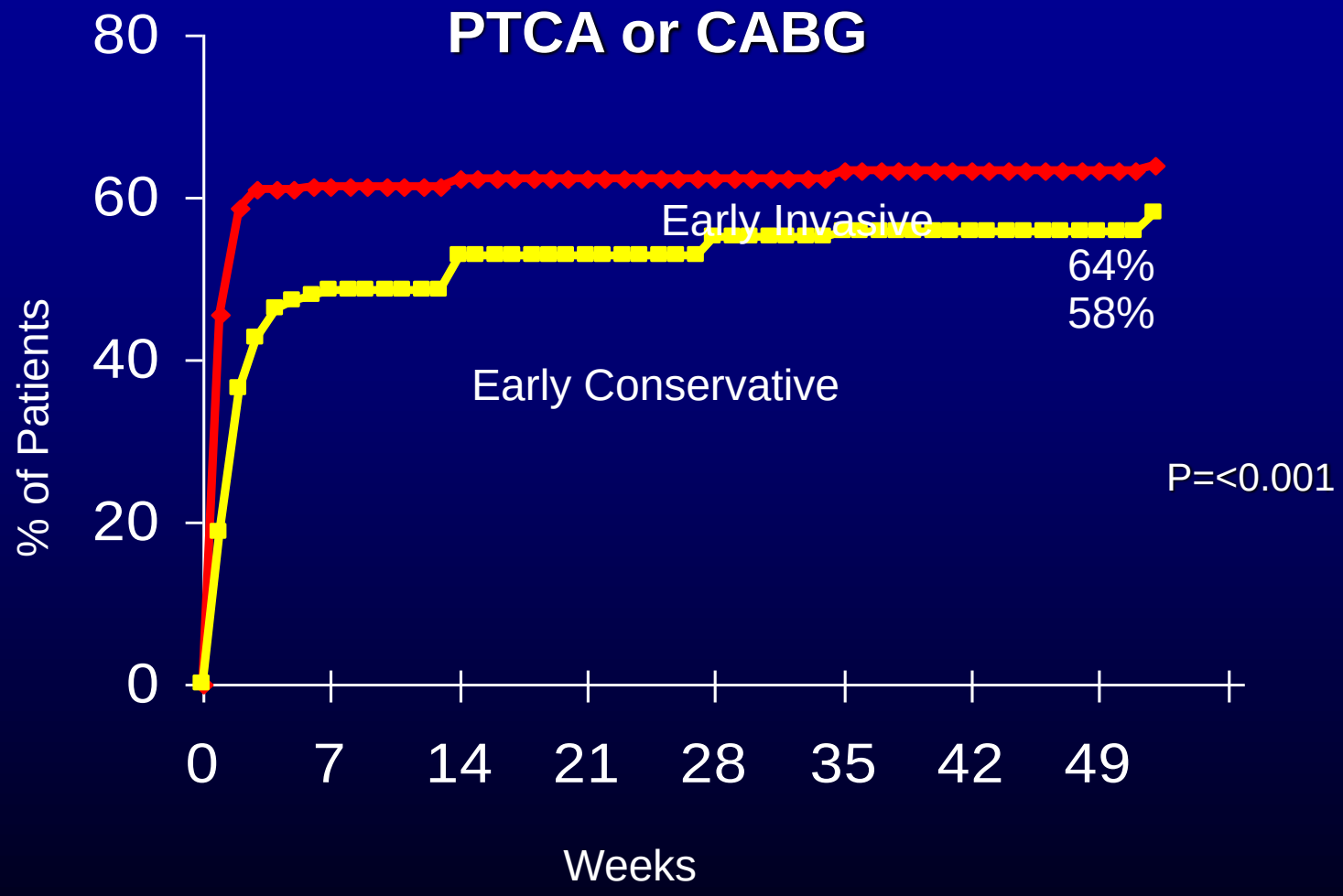
Uso de AG en la Argentina
Incidencia actuarial de exacerbaciones



Uso de AG en la Argentina
Sobrevida libre de exacerbaciones

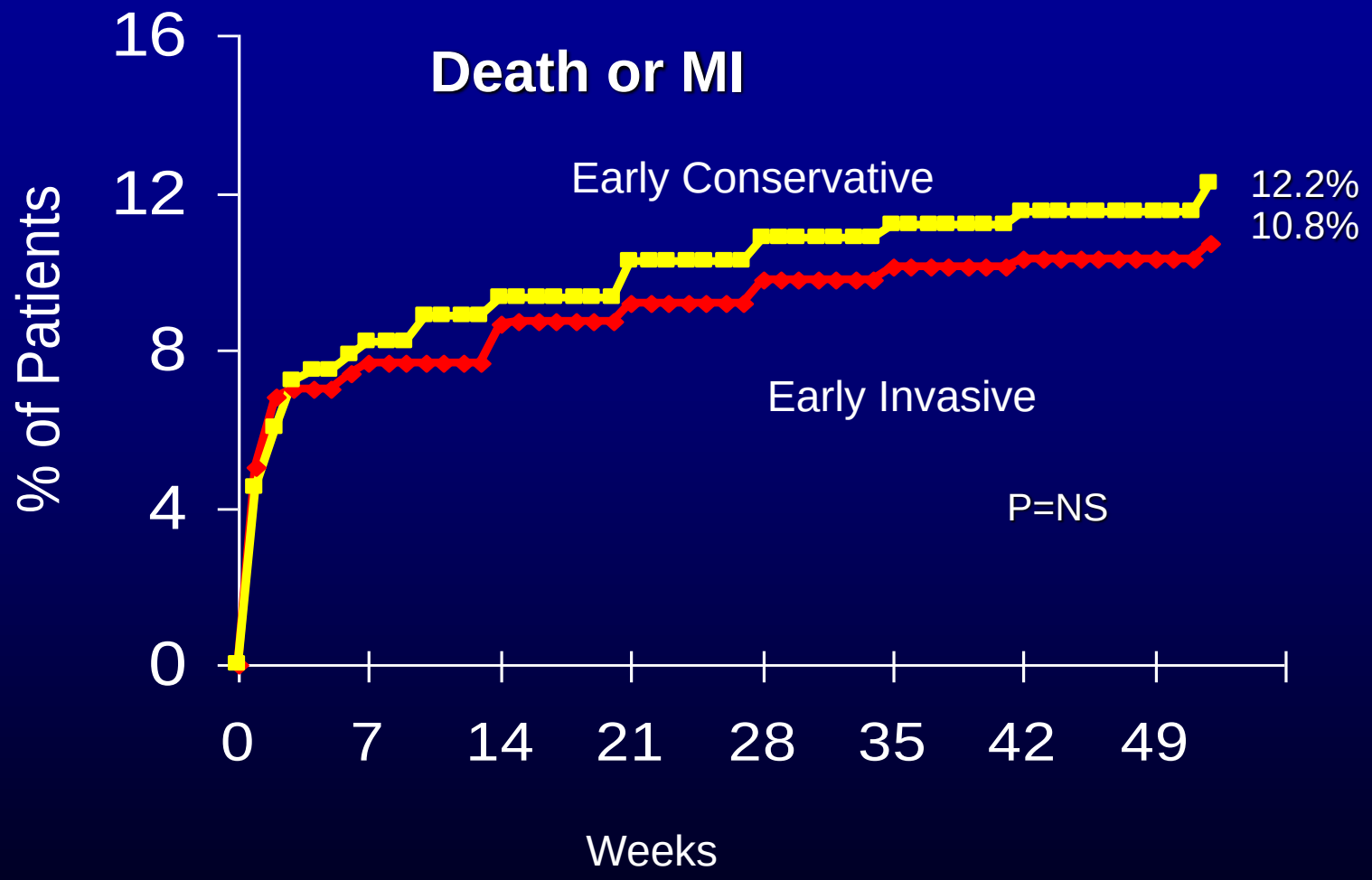


TIMI IIIB *One Year Results*



Anderson HV et al., JACC 1995;26:1643-1650.

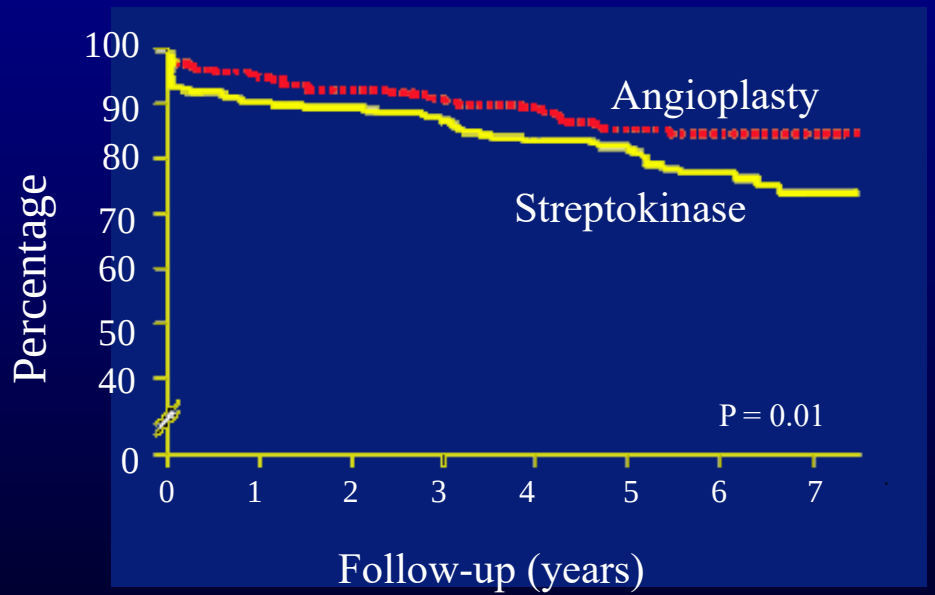
TIMI IIIB *One Year Results*



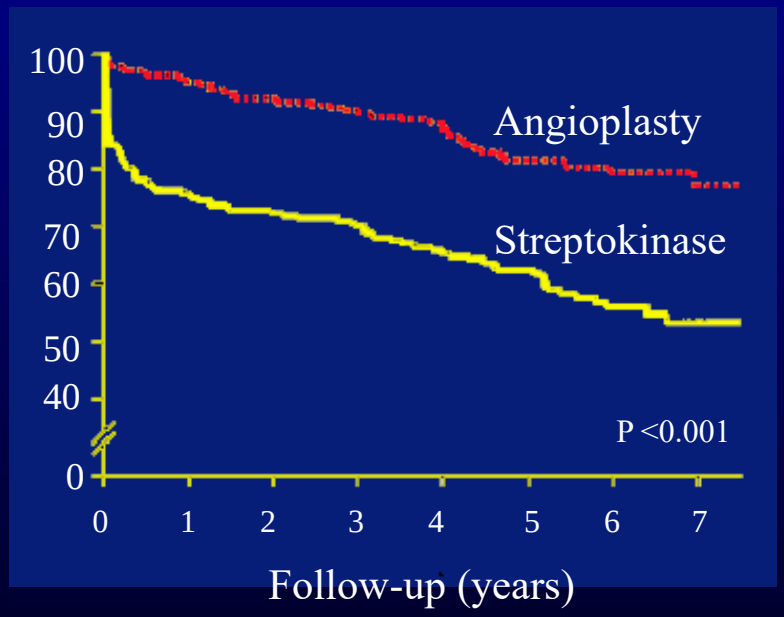
Anderson HV et al., JACC 1995;26:1643-1650.

Primary Angioplasty vs. Thrombolysis for Acute Myocardial Infarction

Long-term Survival



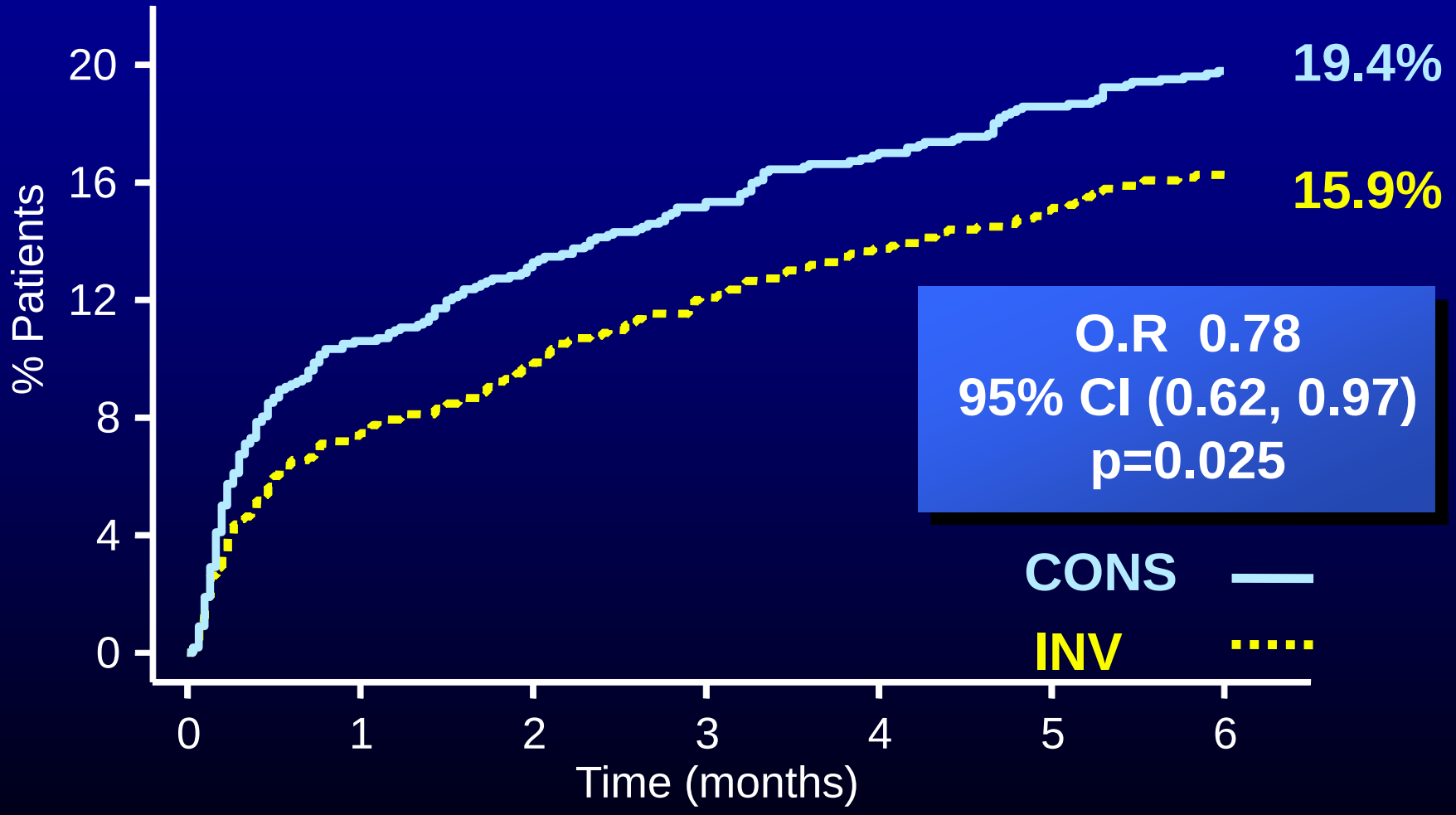
Survival Free of Reinfarction



Zijlstra F et al. N Engl J Med 1999; 341:1413-1419

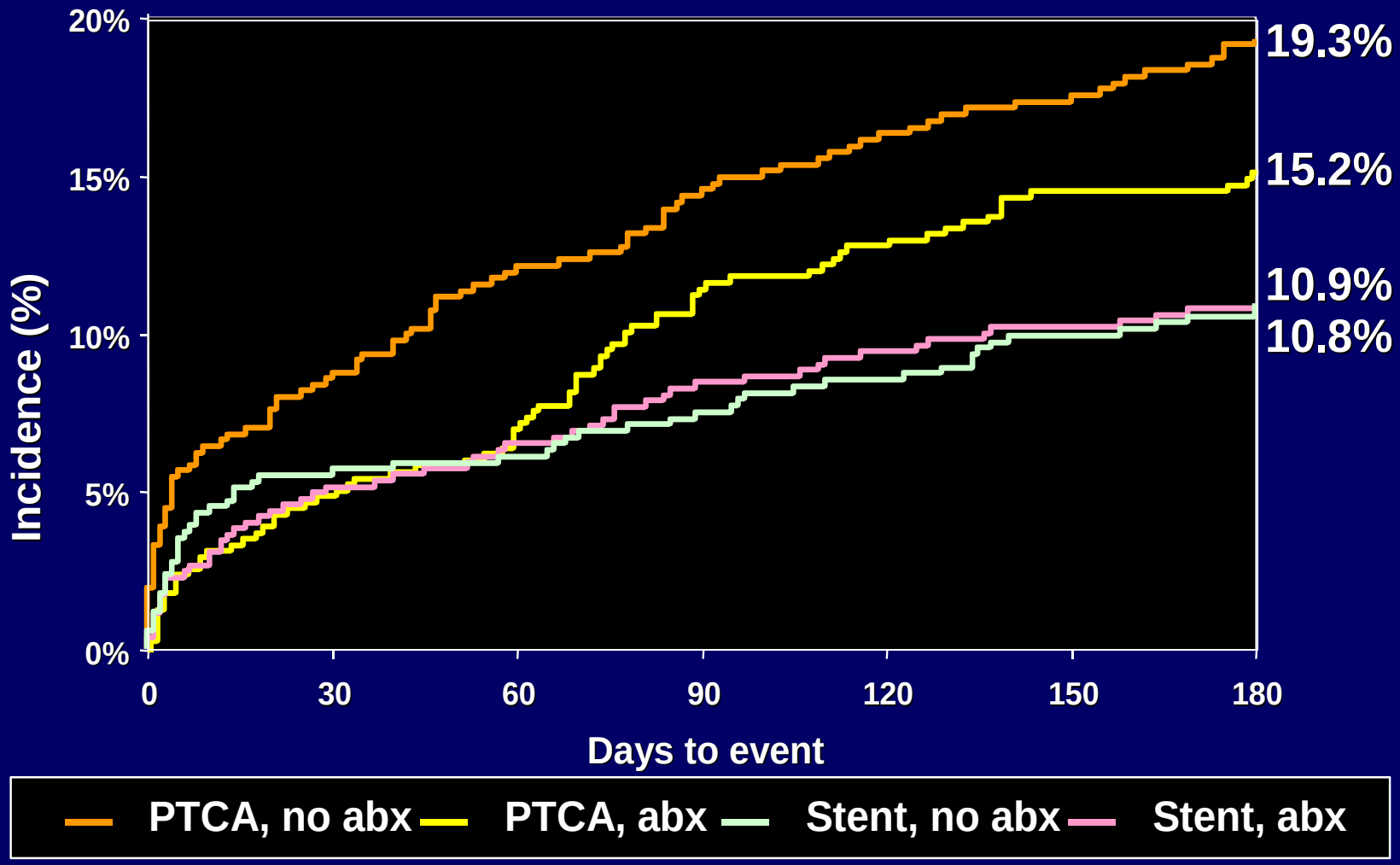
Tactics- TIMI 18
Primary Endpoint

Death, MI, Rehosp for ACS at 6 Months



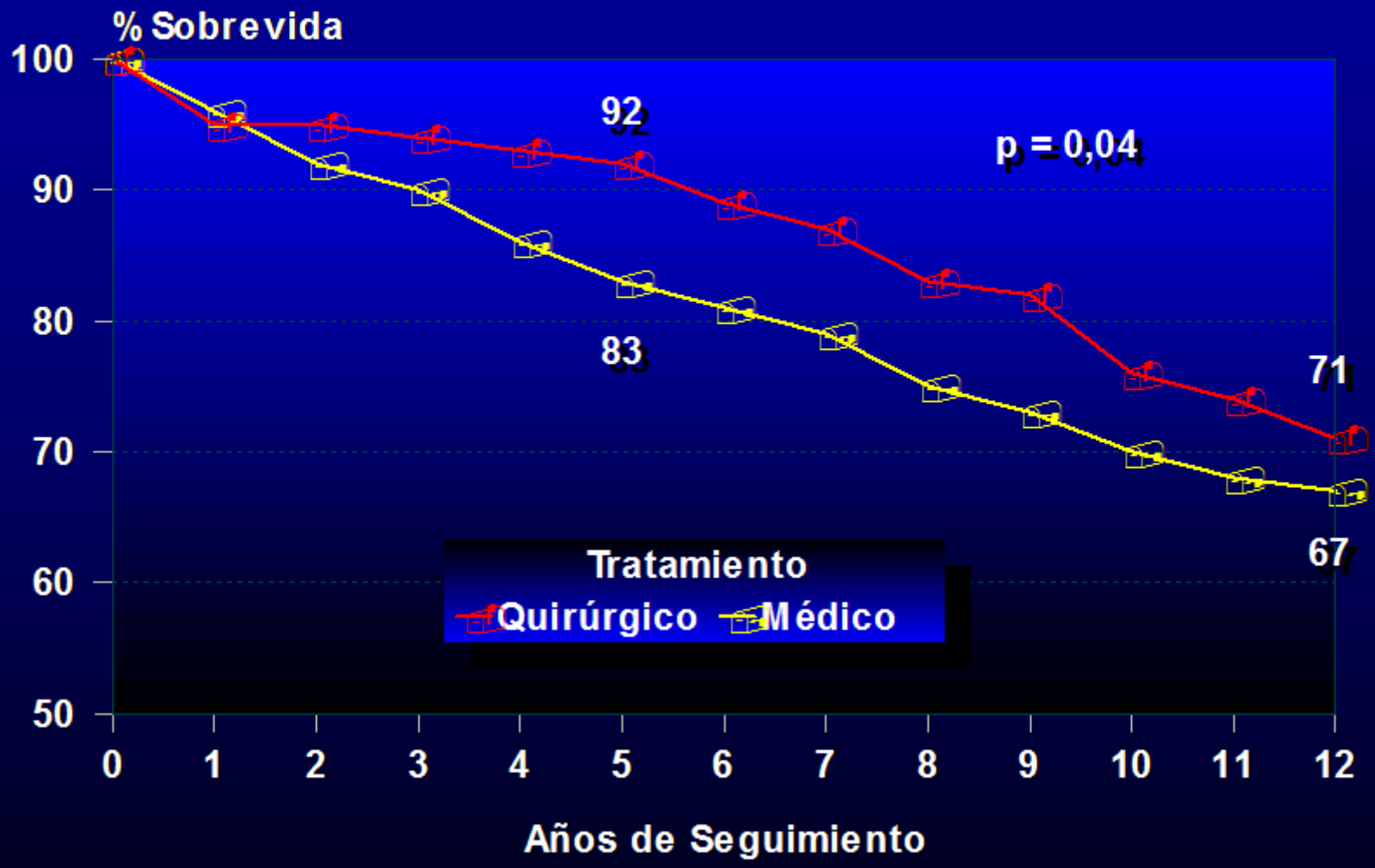
CADILLAC

Primary Endpoint - MACE at 6 Months



Stone et al. Circ 2000; 102: II-664

European Coronary Surgery Study



JAG 8/99

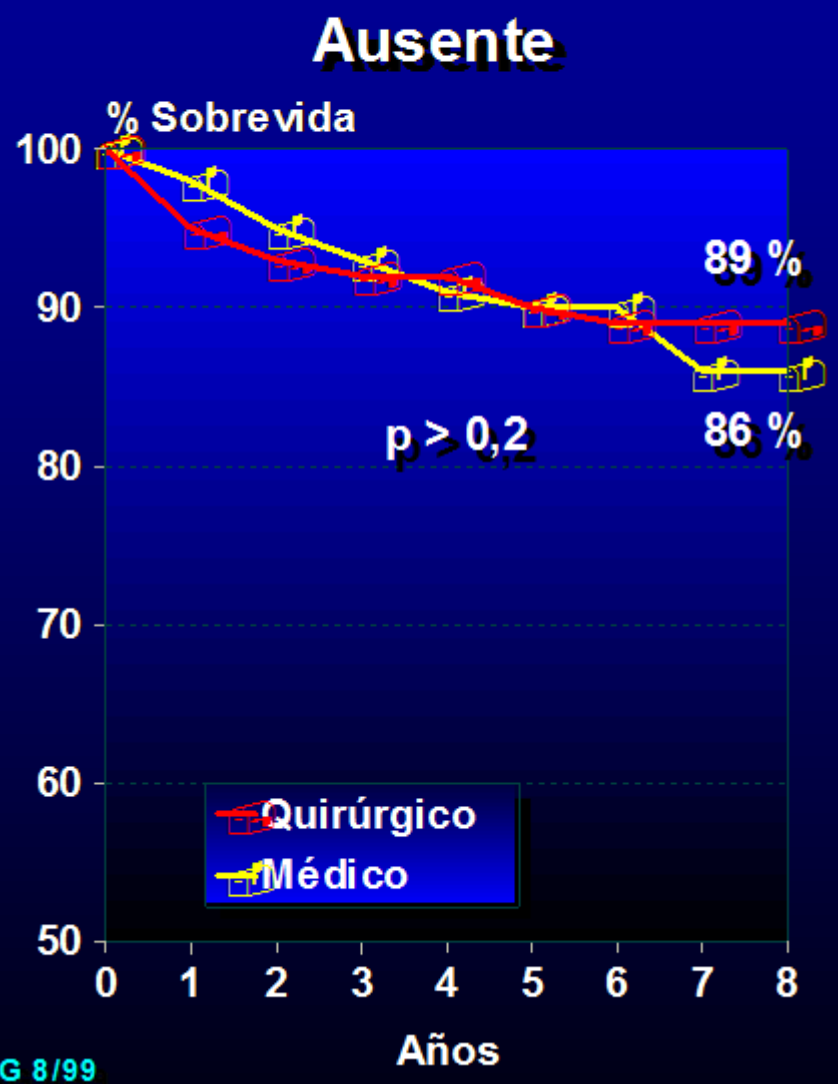
Tratamiento Médico vs Cirugía

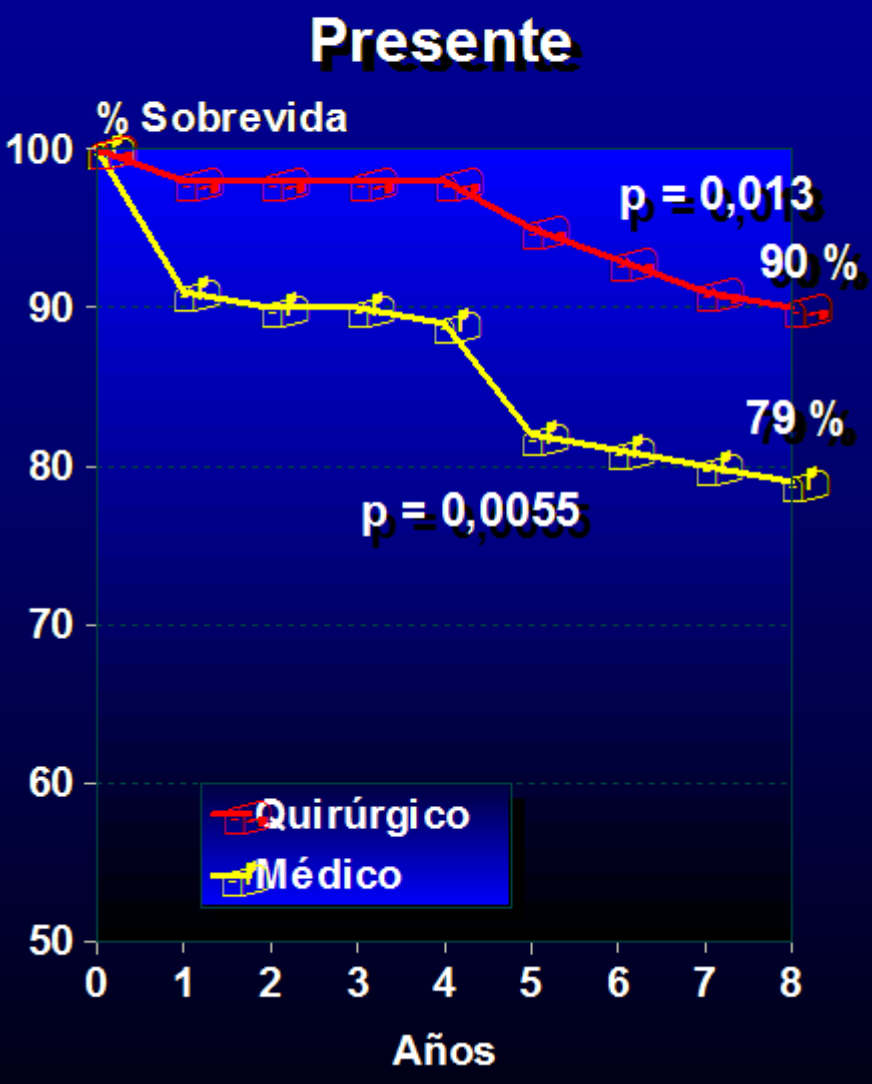
Metaanálisis

JAG 8/99

European Coronary Surgery Study

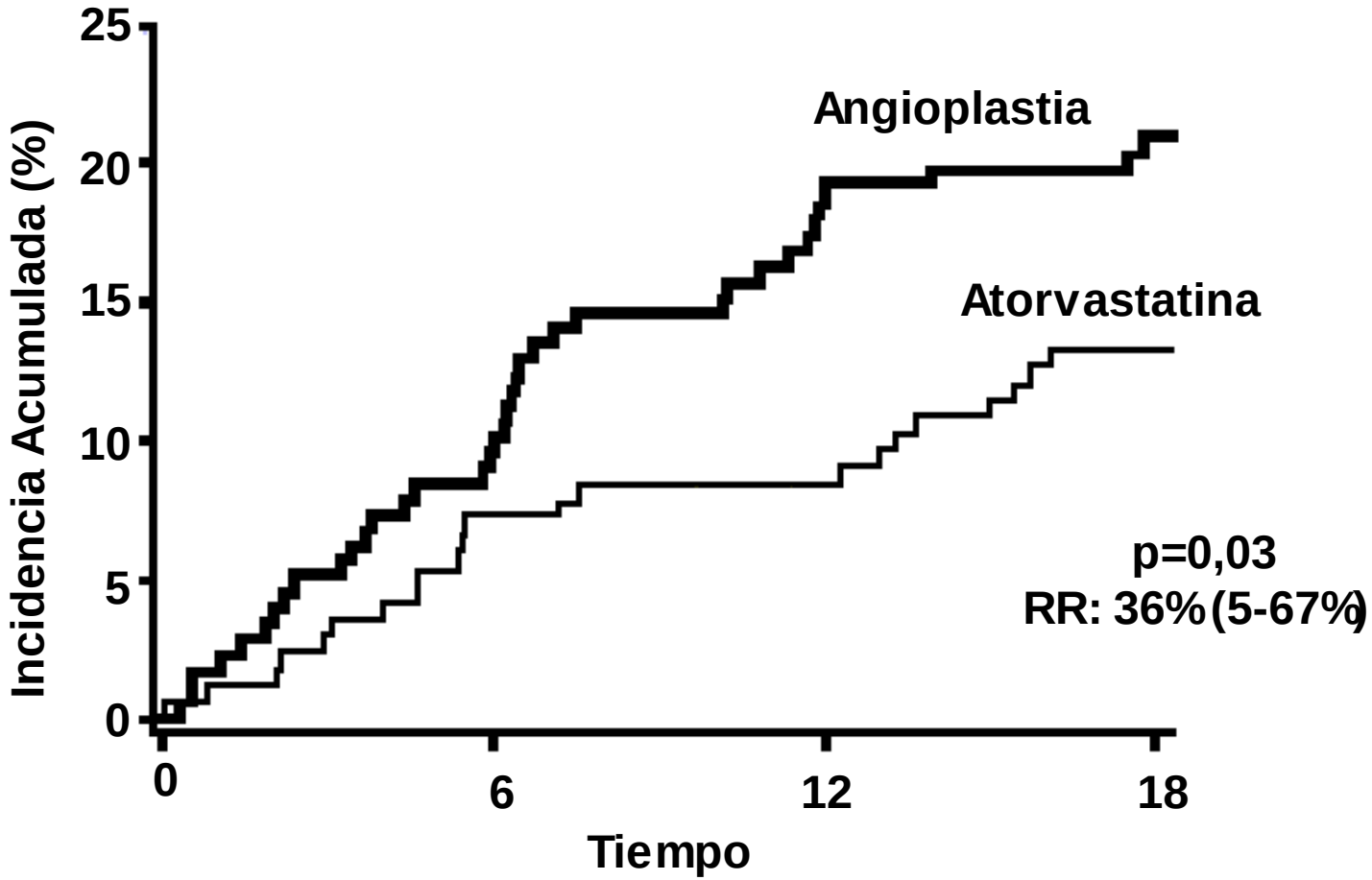
Enf. de 2 vasos con DA proximal





JAG 8/99

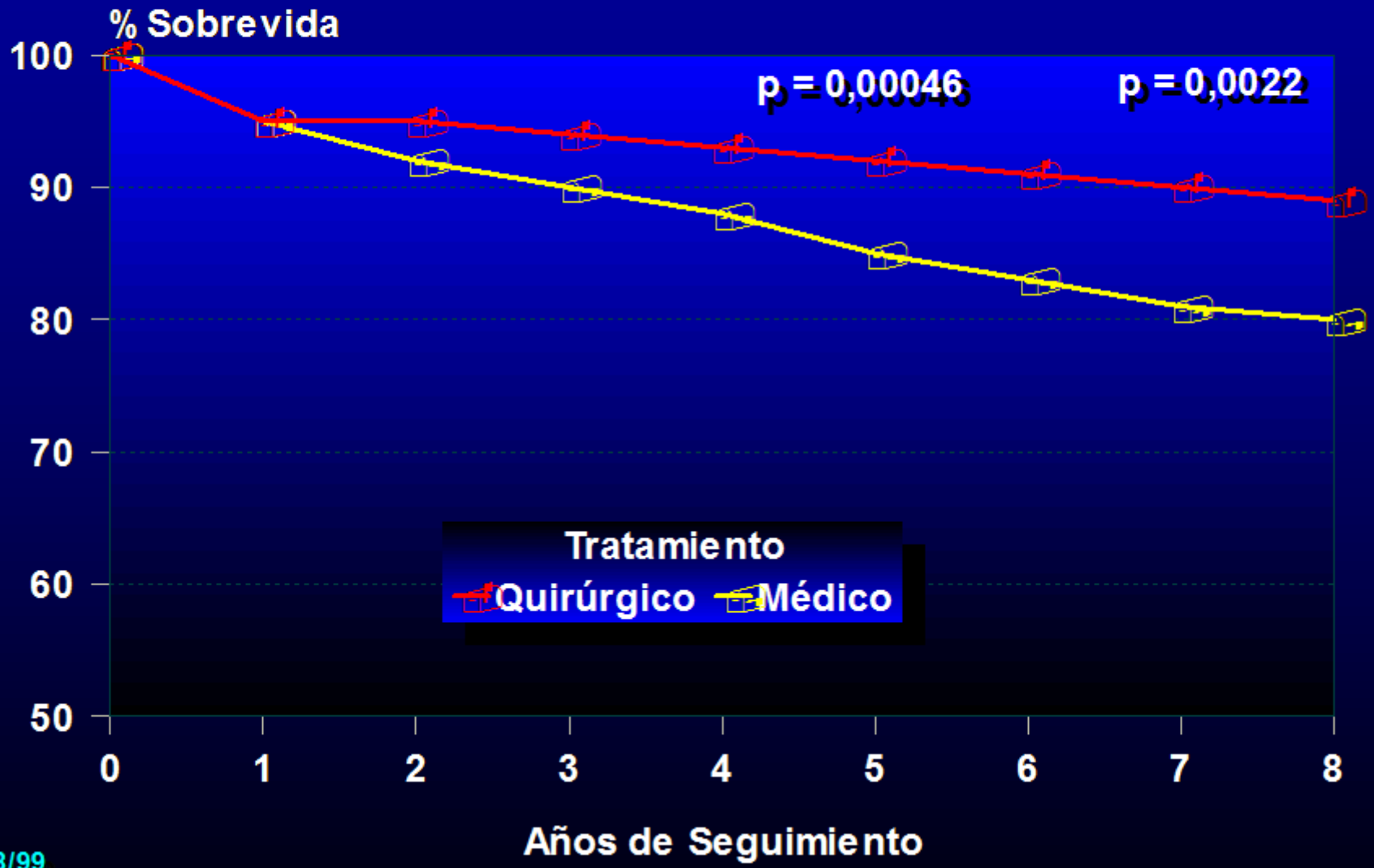
Atorvastatin vs Angioplastia
Primer evento isquemico



Pitt B. NEJM 1999;341:70-6

European Coronary Surgery Study

Sobrevida a 8 años - Global



JAG 8/99

ESTABLISHED IN 1812 NOVEMBER 8, 2012 VOL. 367 NO. 19

Trastuzumab Emtansine for HER2-Positive Advanced Breast Cancer

Sur ...u, M.D., J ... M.D., E ... Ph.D.,

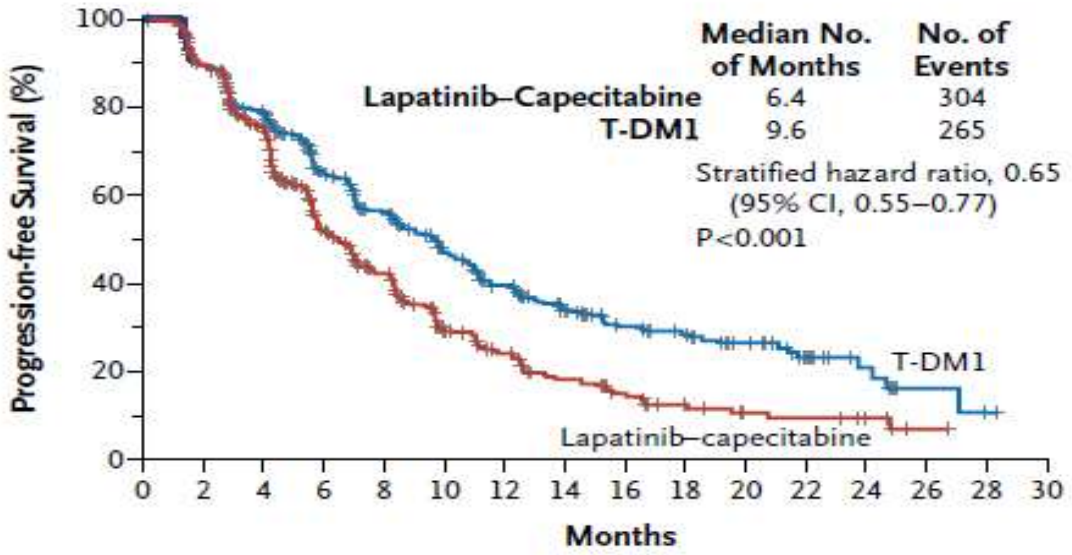


Figure 1. Progression-free Survival, as Assessed by an Independent Review Committee.

Shown are Kaplan–Meier estimates of progression-free survival in the intention-to-treat population, stratified according to world region, number of prior chemotherapy regimens (0 or 1 vs. >1), and site of disease involvement (visceral vs. nonvisceral). Median progression-free survival was 3.2 months longer in the trastuzumab emtansine (T-DM1) group than in the lapatinib–capecitabine group. CI denotes confidence interval.

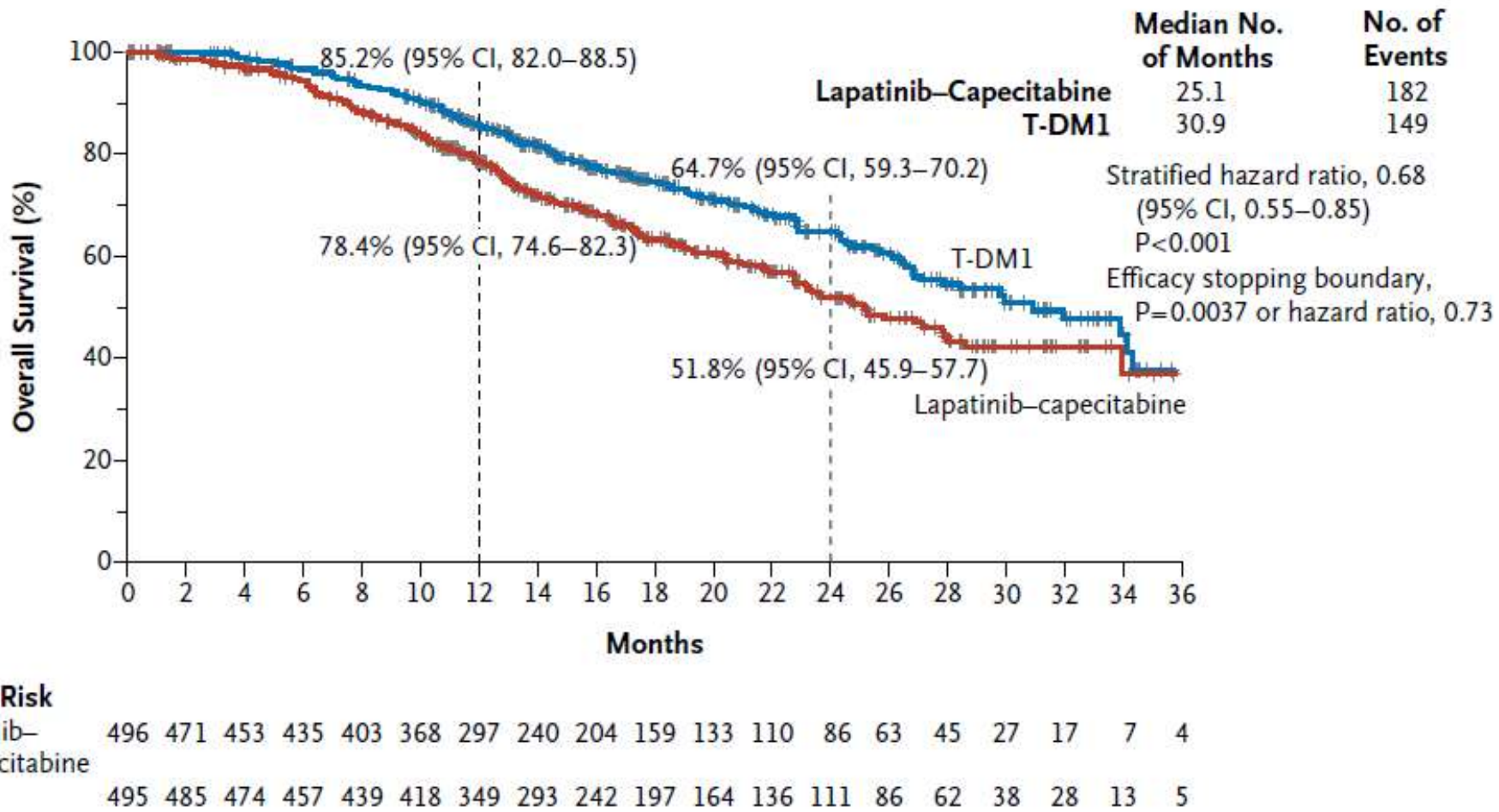
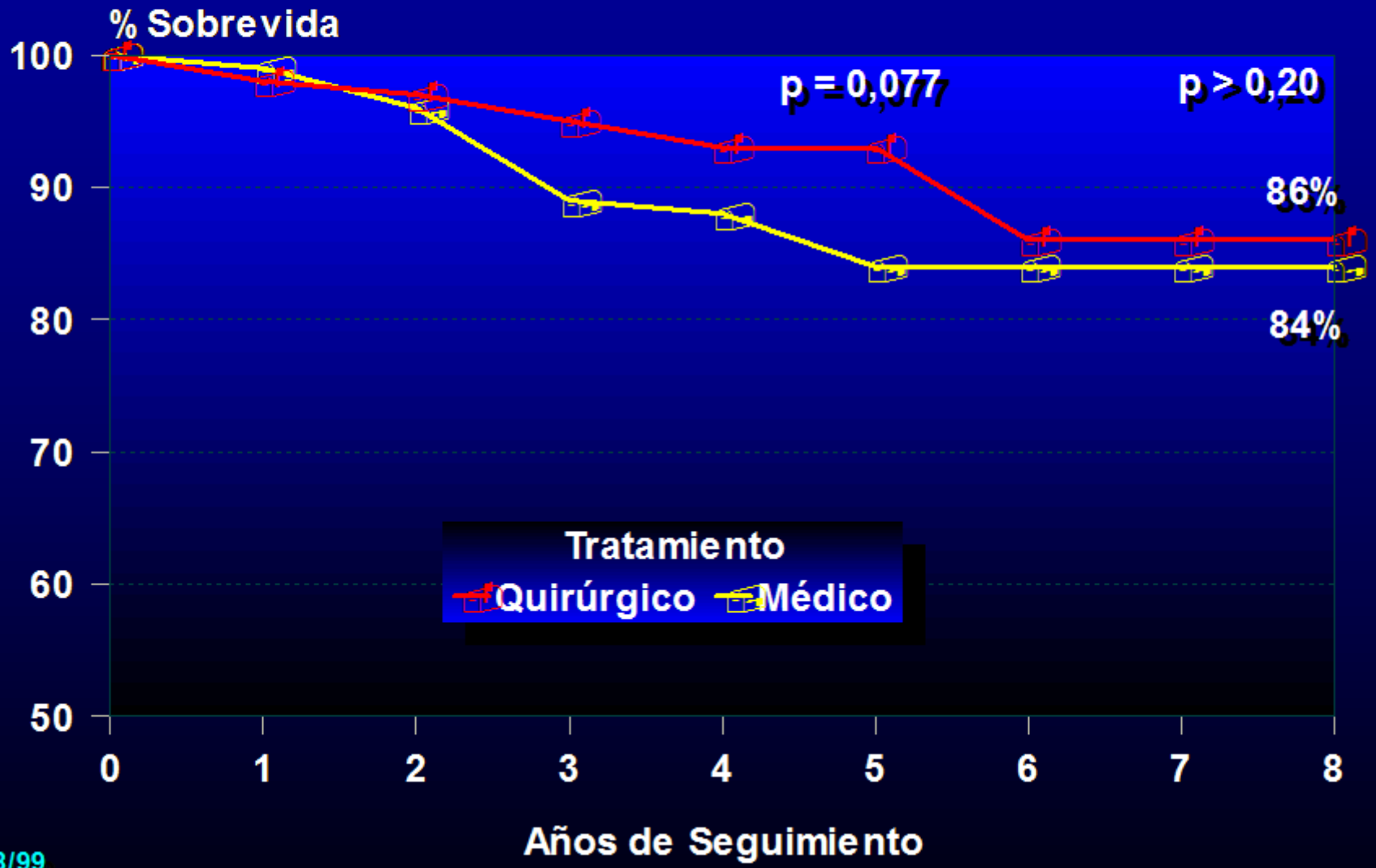


Figure 2. Second Interim Analysis of Overall Survival.

Shown are Kaplan–Meier estimates of overall survival in the intention-to-treat population, stratified according to world region, number of prior chemotherapy regimens (0 or 1 vs. >1), and site of disease involvement (visceral vs. nonvisceral). The second interim analysis was conducted on the basis of 331 deaths and met the predefined O'Brien–Fleming stopping boundary. The data-cutoff date was July 31, 2012. Median follow-up was 18.6 months (range, 0 to 41) in the lapatinib–capecitabine group and 19.1 months (range, 0 to 40) in the T-DM1 group.

European Coronary Surgery Study

Enfermedad de 1 vaso



JAG 8/99

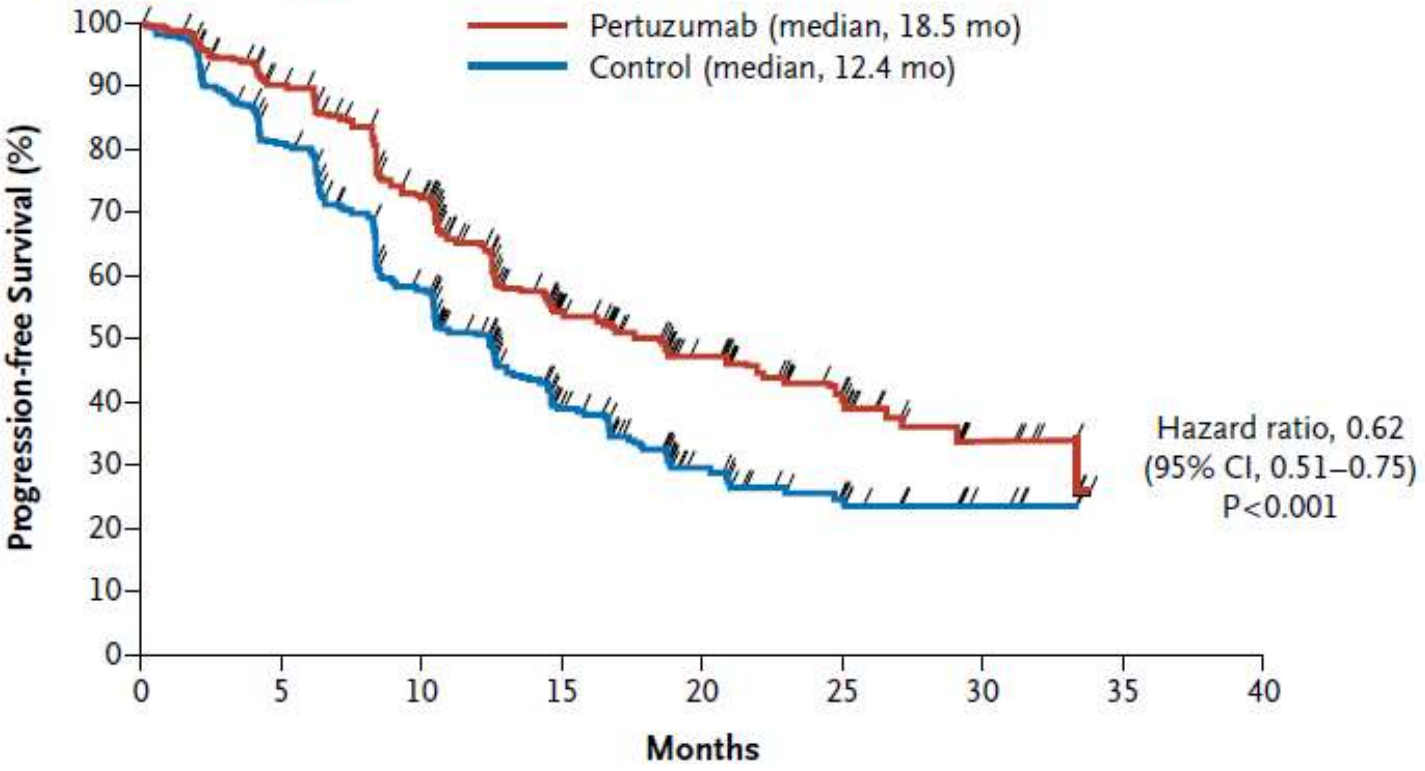
ESTABLISHED IN 1812 JANUARY 12, 2012 VOL. 366 NO. 2

Pertuzumab plus Trastuzumab plus Docetaxel for Metastatic Breast Cancer

José Baselga, M.D., Ph.D., Javier Cortés, M.D., Sung-Bae Kim, M.D., Seock-Ah Im, M.D., Roberto Hegg, M.D., Young-Hyuck Im, M.D., Laslo Roman, M.D., José Luiz Pedrini, M.D., Tadeusz Pienkowski, M.D., Adam Knott, Ph.D., Emma Clark, M.Sc., Mark C. Benyunes, M.D., Graham Ross, F.F.P.M., and Sandra M. Swain, M.D., for the CLEOPATRA Study Group*

A Independently Assessed Progression-free Survival

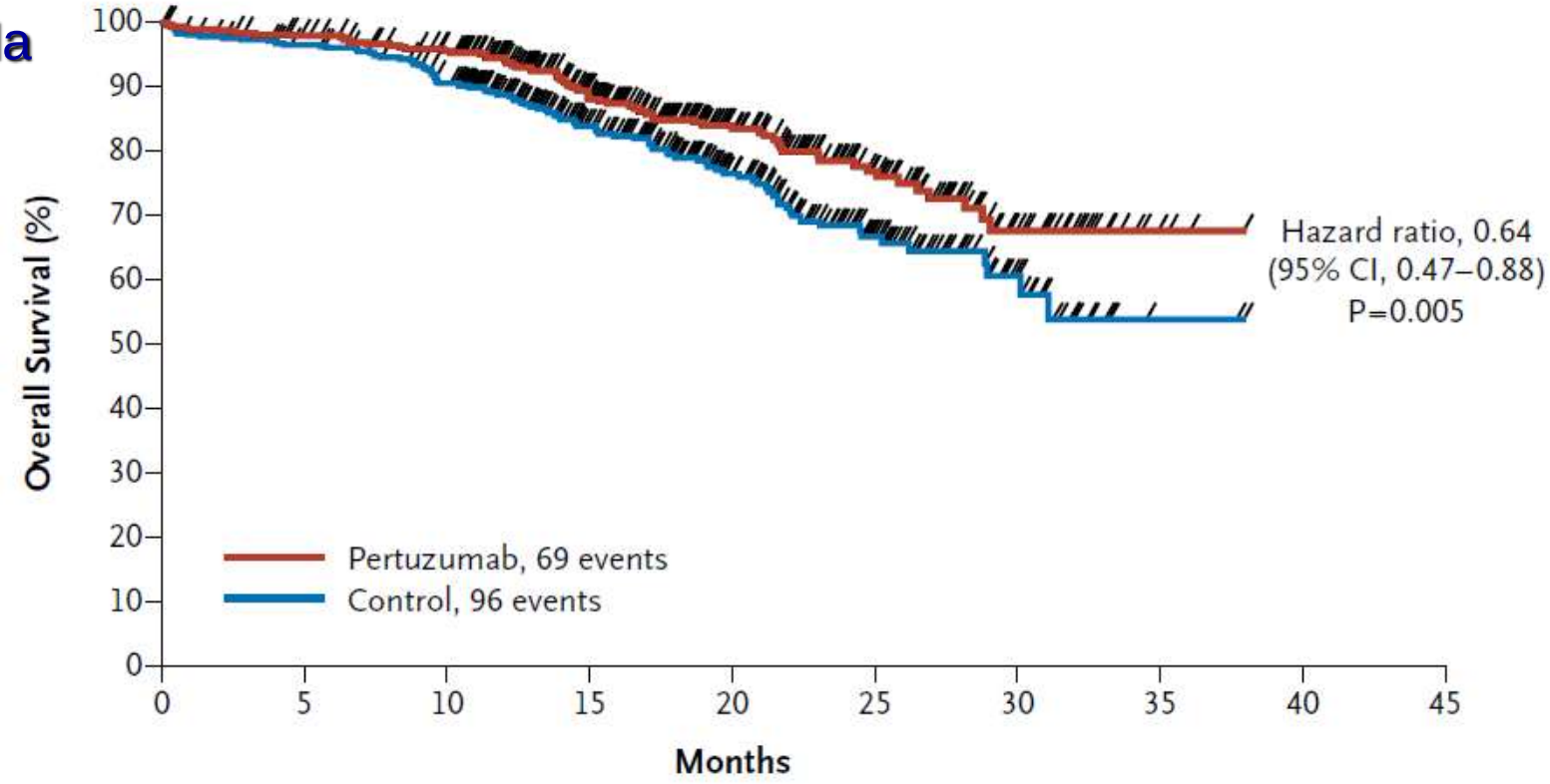
Sobrevida libre de progresión



No. at Risk									
Pertuzumab	402	345	267	139	83	32	10	0	0
Control	406	311	209	93	42	17	7	0	0

Sobrevida actuarial Estudio Cleopatra

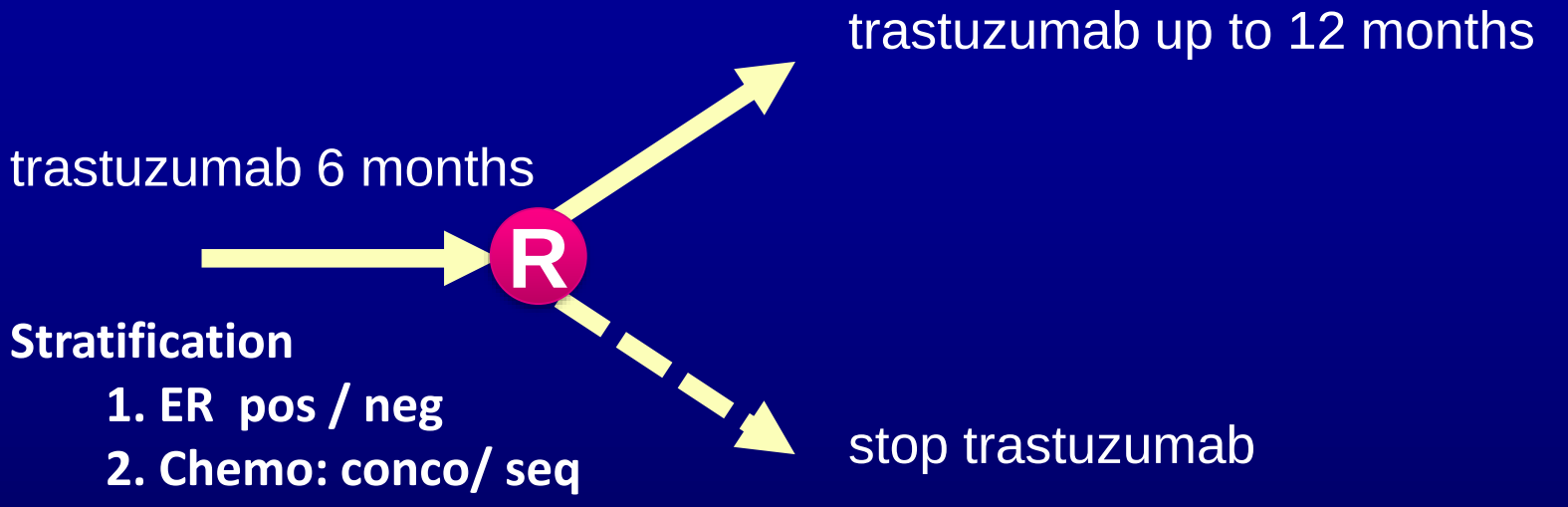
Sobrevida



No. at Risk										
Pertuzumab	402	387	367	251	161	87	31	4	0	0
Control	406	383	347	228	143	67	24	2	0	0

Study design

Protocol of Herceptin® Adjuvant with Reduced Exposure



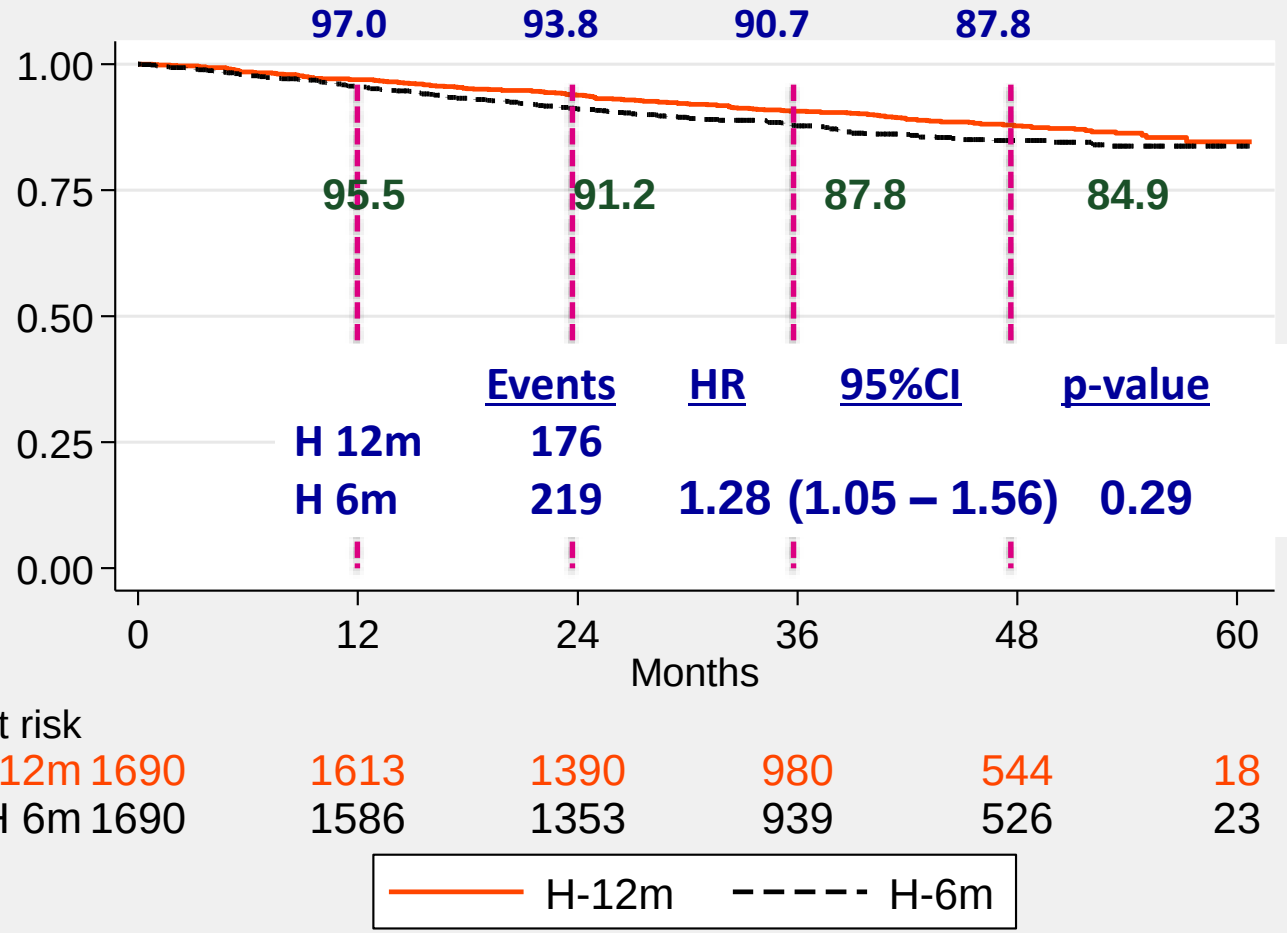
Stratification

1. **ER pos / neg**
2. **Chemo: conco/ seq**

R: Randomization after informed consent

Disease Free Survival

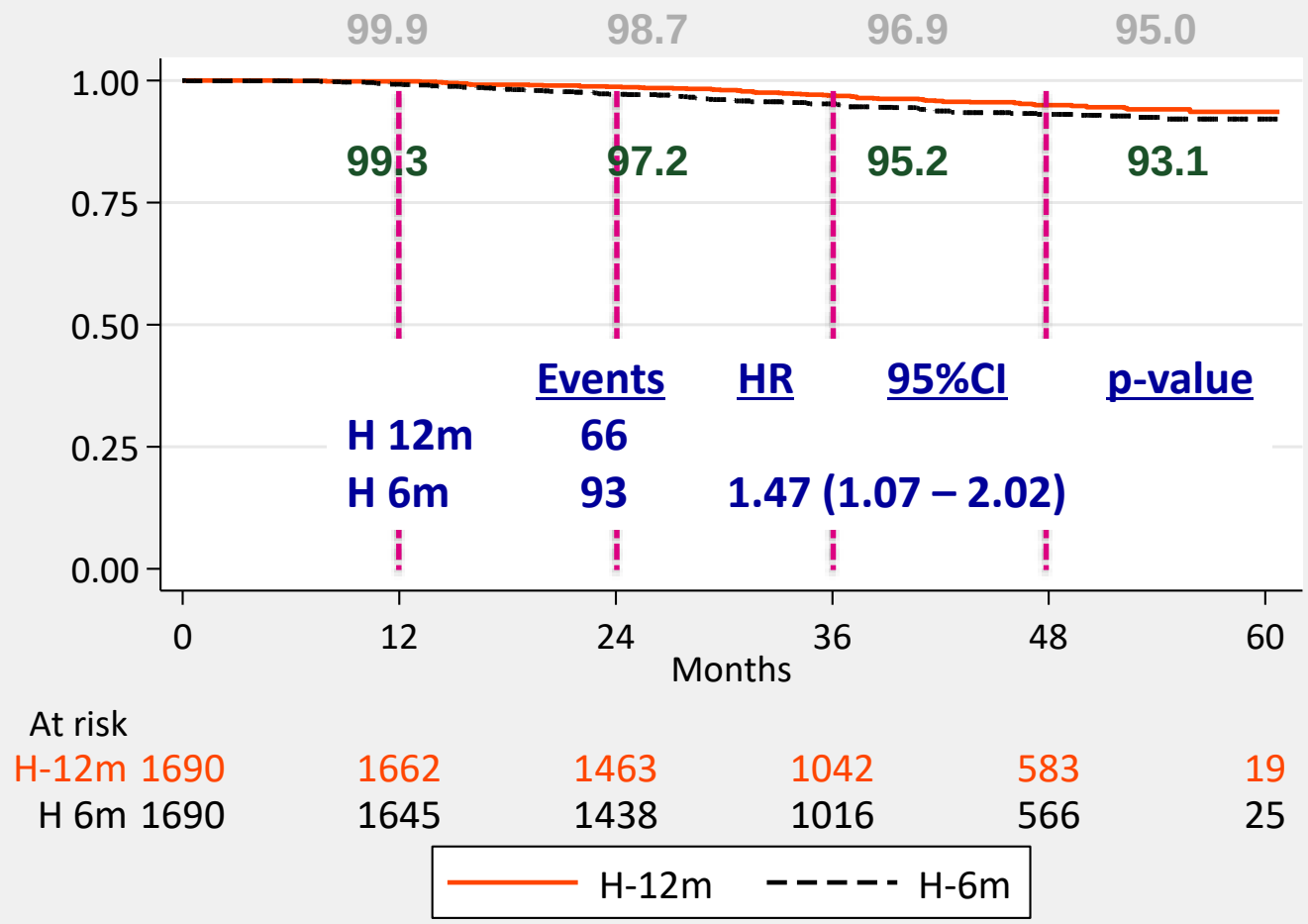
Protocol of
Herceptin®
Adjuvant with
Reduced
Exposure



* Cox model stratified by ER status and concomitant chemotherapy

Overall Survival

42.5mos. median FU



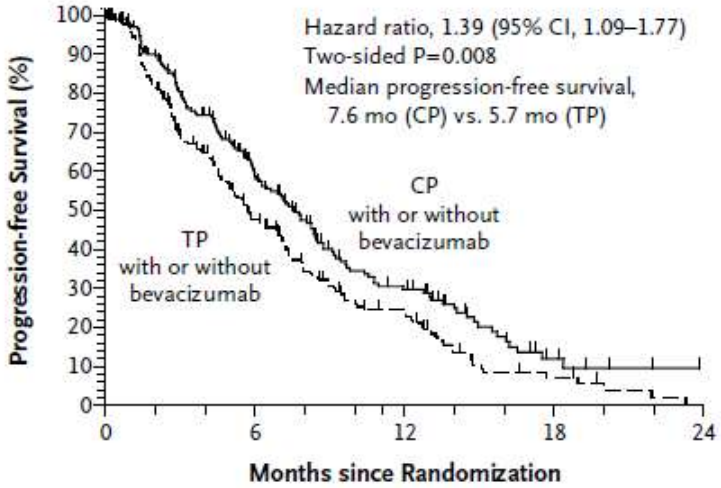
* Cox model stratified by ER status and concomitant chemotherapy

Improved Survival with Bevacizumab in Advanced Cervical Cancer

Krishnansu S. Tewari, M.D., Michael W. Sill, Ph.D., Harry J. Long III, M.D.,

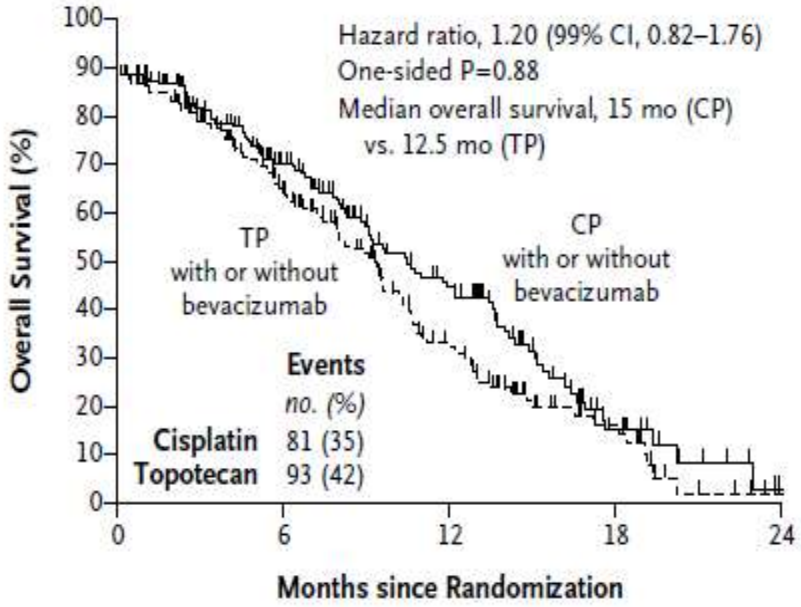
A

	No Disease Progression	Disease Progression	Total
Cisplatin	97	132	229
Topotecan	73	150	223



No. at Risk					
CP	229	95	36	6	0
TP	223	74	29	6	0

B



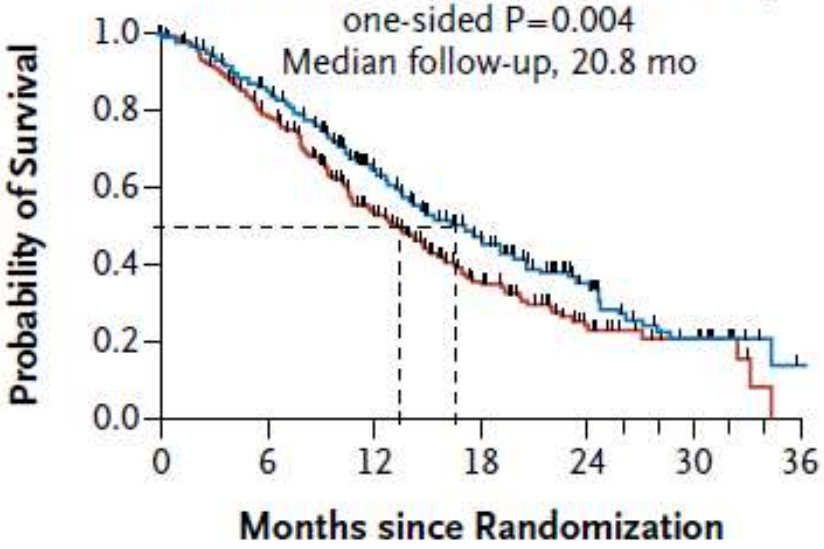
No. at Risk					
CP	229	133	71	19	3
TP	223	122	59	23	3

N Engl J Med 2014;370:734-43.

A

	Events *no. (%)*	Median Overall Survival *mo*
Chemotherapy (N=225)	140 (62)	13.3
Chemotherapy+Bev (N=227)	131 (58)	17.0

Hazard ratio, 0.71 (98% CI, 0.54–0.95);
one-sided P=0.004
Median follow-up, 20.8 mo



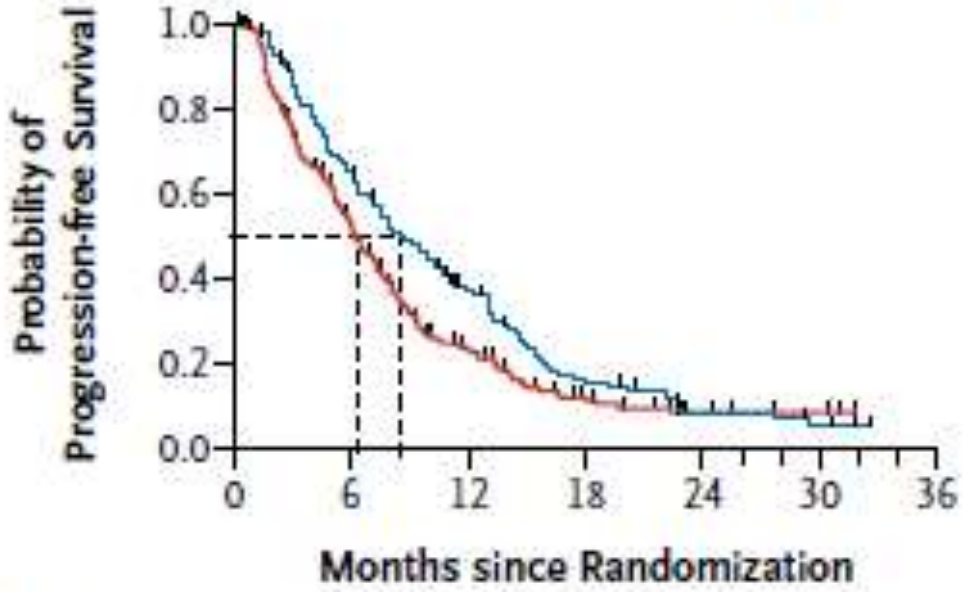
No. at Risk

Chemotherapy	225	167	94	45	17	8
Chemotherapy +bev	227	184	121	69	30	10

B

	Events no. (%)	Median Progression-free Survival mo
Chemotherapy (N=225)	184 (82)	5.9
Chemotherapy+Bev (N=227)	183 (81)	8.2

Hazard ratio, 0.67 (95% CI, 0.54–0.82); two-sided P=0.002



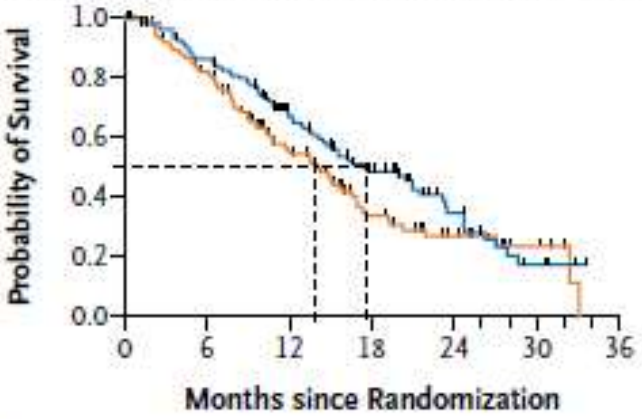
No. at Risk

Chemotherapy	225	103	40	14	6	3
Chemotherapy +bev	227	132	70	22	6	3

C

	Events *no. (%)*	Median Overall Survival *mo*
CP (N=114)	69 (61)	14.3
CP+Bev (N=115)	66 (58)	17.5

Hazard ratio, 0.68 (95% CI, 0.48–0.97); one-sided P=0.04

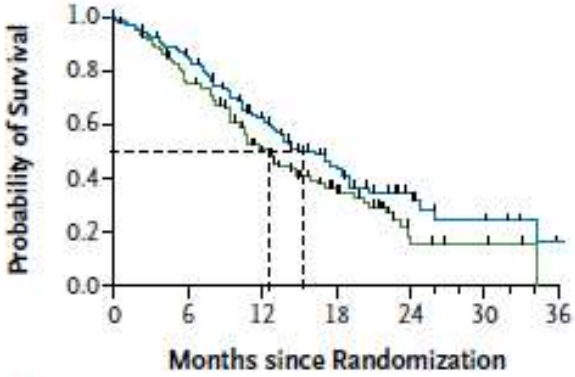


No. at Risk						
CP	114	89	50	22	12	5
CP+bev	115	94	63	37	17	5

D

	Events *no. (%)*	Median Overall Survival *mo*
TP (N=111)	71 (64)	12.7
TP+Bev (N=112)	65 (58)	16.2

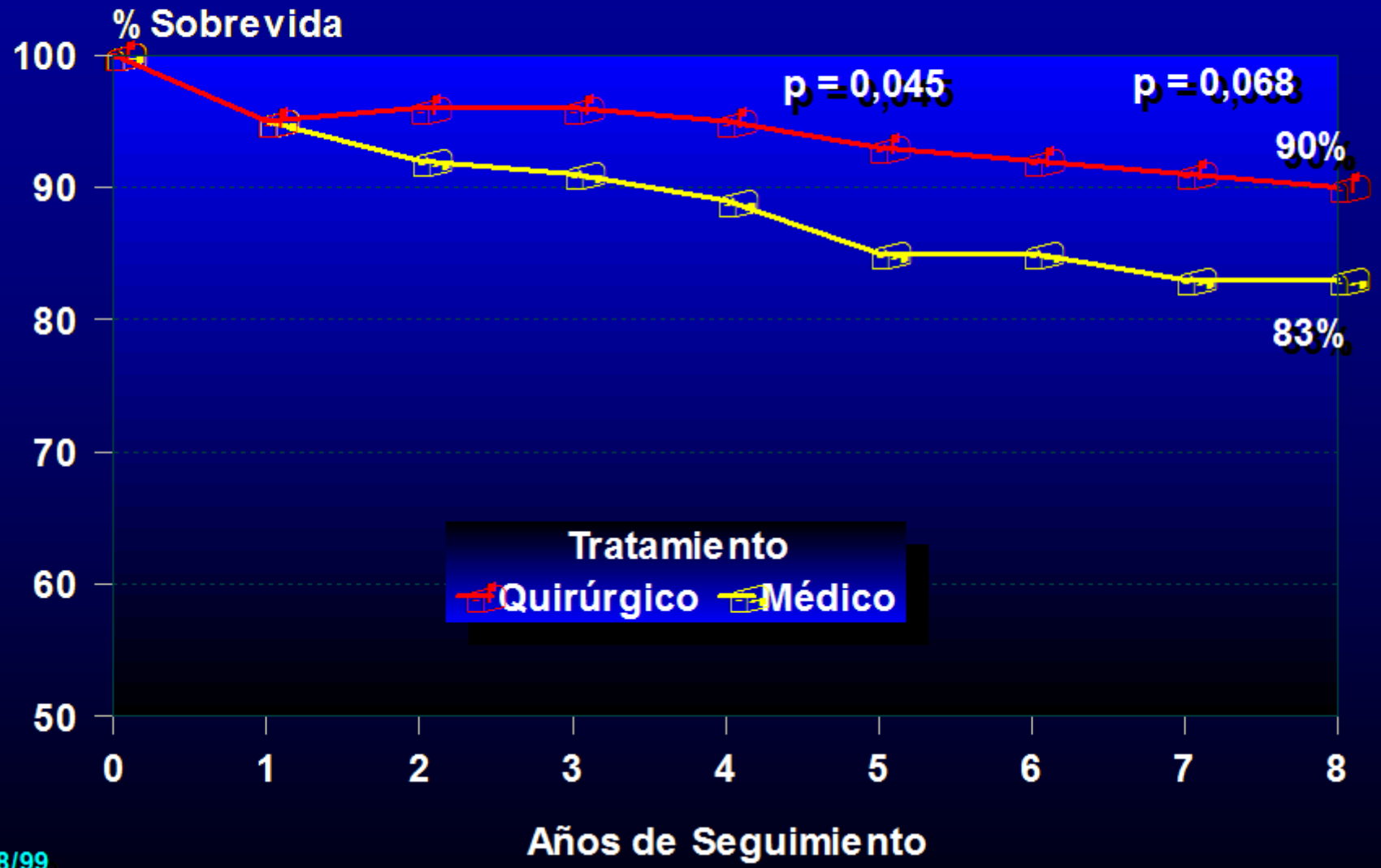
Hazard ratio, 0.74 (95% CI, 0.53–1.05); one-sided P=0.09



No. at Risk						
TP	111	78	44	23	5	3
TP+bev	115	90	58	32	13	5

European Coronary Surgery Study

Enfermedad de 2 vasos



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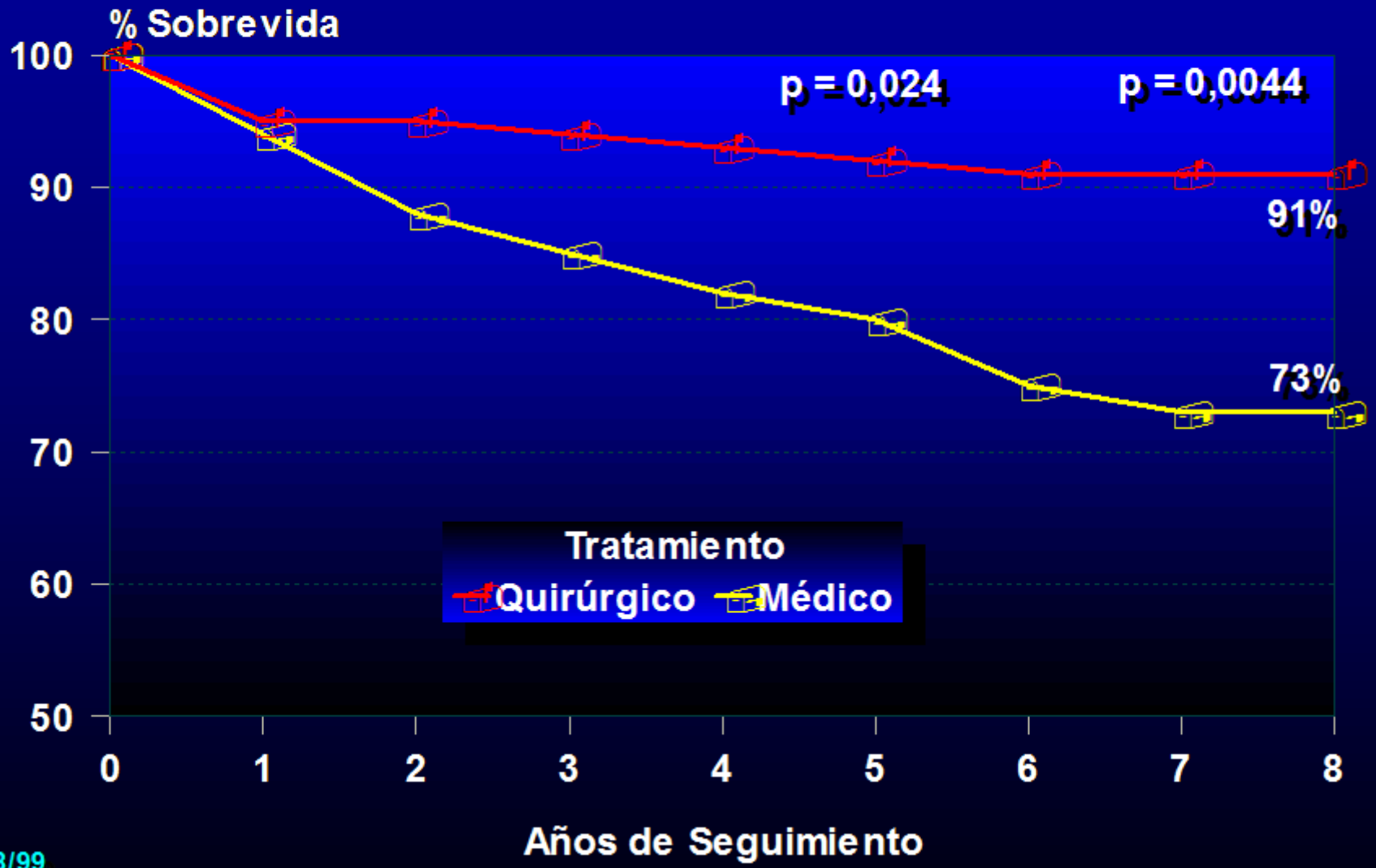
European Coronary Surgery Study

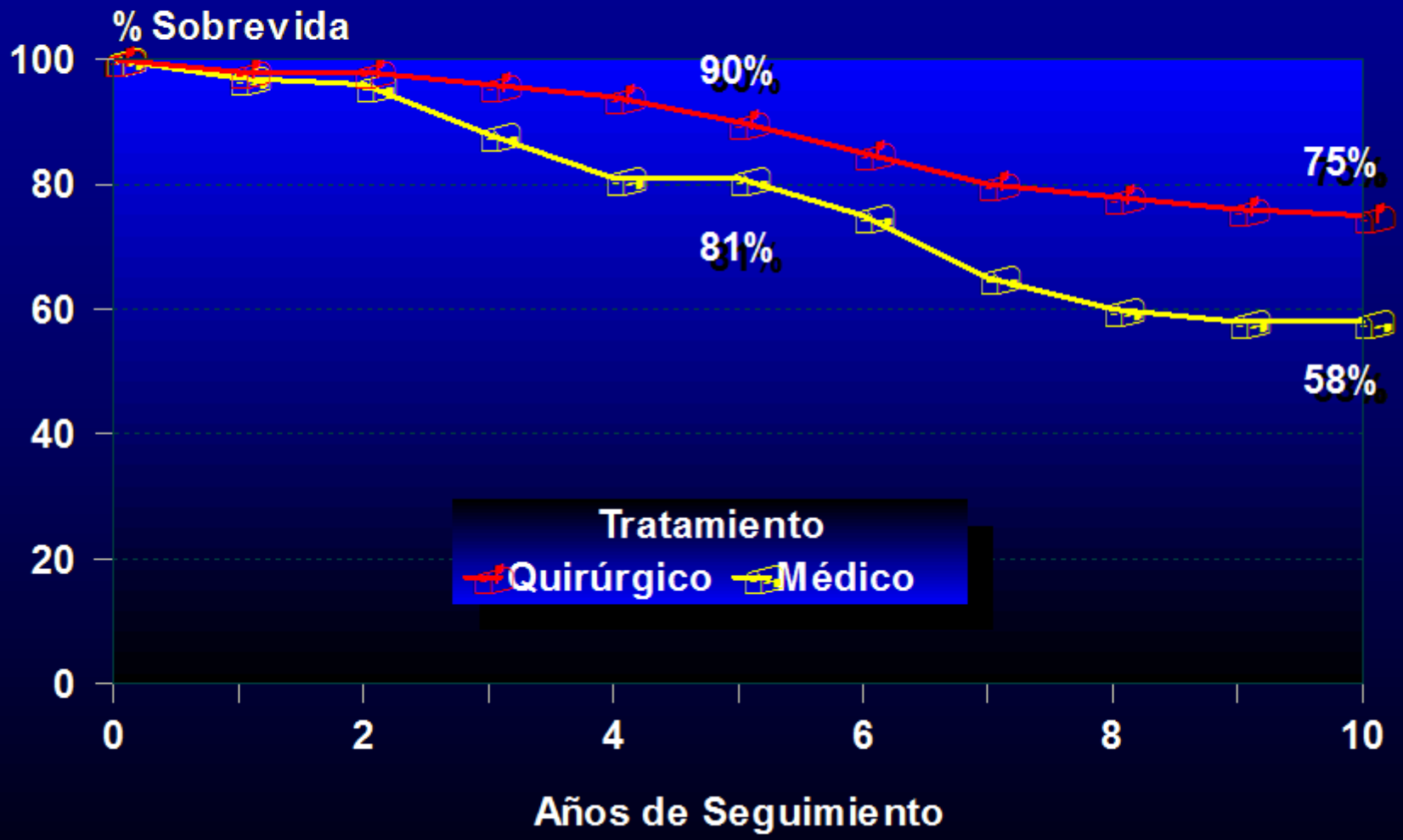
Enfermedad de 3 vasos



JAG 8/99

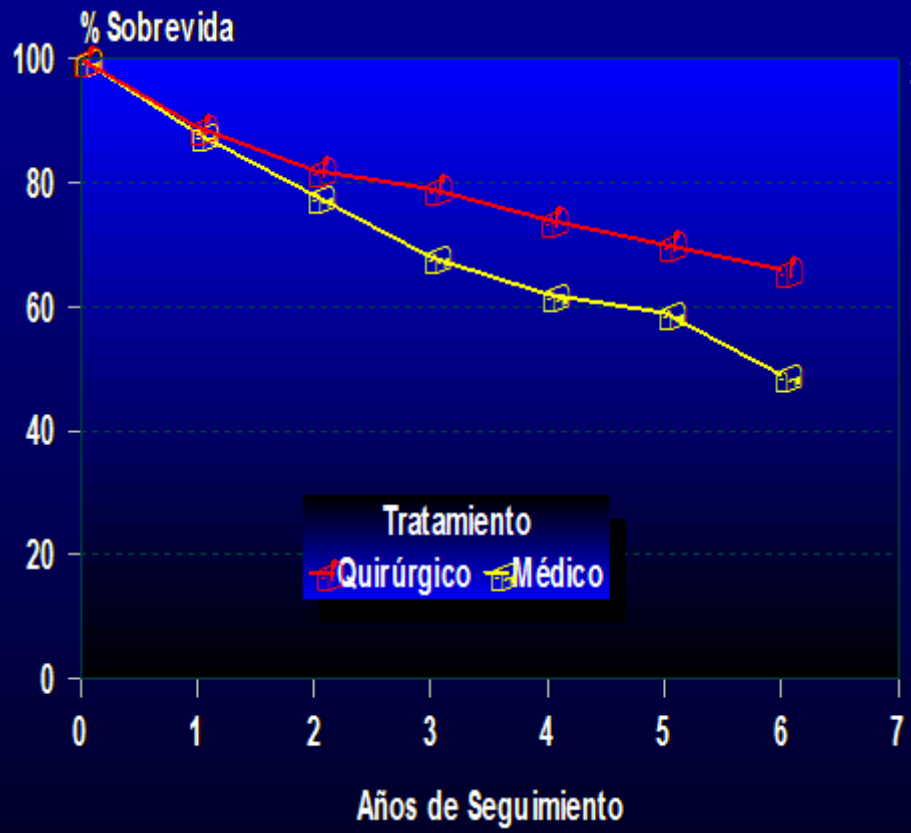
Coronary Artery Surgery Study (CASS)

Sobrevida a 10 años
Enf. 3 vasos + Disfunción Ventricular



JAG 8/99

Fracción de Eyección 26-30 %



Fracción de Eyección 3-25%