

**Long-term clinical follow-Up of low dose aspirin in coronary artery spasm**

**Background:** Aspirin has been known to cause aggravate of coronary artery spasm (CAS) regardless administration dose (100-325mg/daily). However, it is unclear whether low-dose aspirin (LDA; 100 mg) has deleterious impact on long-term clinical in CAS patients. Thus, we sought to evaluate the impact of LDA on long-term clinical outcomes of CAS patients.

**Methods:** A total of 5,697 consecutive pts without significant coronary artery disease who underwent acetylcholine (ACH) provocation test from Nov 2004 to May 2014 were enrolled. Of total, 3,072 CAS patients were enrolled for the study and divided into two groups based on whether or not they take LDA: The LDA group (n=338) and non-LDA group (n=2,734). All CAS patients were appositely prescribed with anti-anginal medication. To adjust for any potential confounders that could cause a bias, a propensity score matching (PSM) analysis was performed using a logistic regression model.

**Results:** After PSM analysis, two propensity-matched groups (524 pairs, n=1048 patients, C-statistic=0.827) were generated and the baseline characteristics of the two groups were balanced. In clinical outcomes, the two groups were undifferentiated regarding any follow-up events such as major adverse cardiac events, and recurrent angina.

**Conclusions:** In the present study, the main findings is that the use of LDA did not affect cardiovascular event up to 5-year in CAS patients. Therefore, prescription of low dose aspirin in these patients should be individualized by considering patients' clinical status.