

Newsletter

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Fall 2015



Canadian Stroke Prevention
Intervention Network

Reseau Canadien pour la Prevention
des Accidents Cerebrovasculaires

EMC² Fall Webinars

The C-SPIN webinar series features monthly online lectures from new, mid-career and senior health researchers who have a wide range of scientific backgrounds. The C-SPIN webinars provide a forum to discuss the issues relating to essential topics in clinical trial research in Canada. The webinars run for one hour with an opportunity for audience questions at the end of the talk. The webinars will be recorded and posted on the C-SPIN website for later review.

Next Live Webinar

“Patient Engagement in Research”

Sandra Carroll (CSPIN member)

November 17th 1pm MST

Link to free registration: www.eventbrite.com/e/patient-engagement-in-research-tickets-18292574583



Titles and Links to Recorded C-SPIN Webinars:

“Legal and Ethical Pitfalls of Clinical Trial Participation: What Physicians Should Know”

Anna Zadunayski LLB MSc, Clinical Ethicist

September 8th 1pm MST

Link to Recorded Webinar: www.cspin.ca/tools-resources-opportunities/webinars/



“Data Collection and Management”

Michael Hill (CSPIN member)

October 8th 1 pm MST

Link to Recorded Webinar: <https://redcap.phri.ca/redcap/surveys/?s=Ps5FqGX7dB>



For more information and 2016 Webinars go to the C-SPIN Website. www.cspin.ca/tools-resources-opportunities/webinars/

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Study Updates

ARTESiA has 18 sites with 38 participants enrolled.

BRAIN-AF has 13 sites activated and is currently enrolling.

OCEAN will start site initiation in October and has received further funding

PIAAF Studies

Pharmacy completed enrollment with 1131 participants in 30 pharmacies.

Screen-AF has 24 active sites and 182 participants enrolled

PIAAF-Family Practice has 17 active sites with 1012 participants enrolled to date

ESUS is in startup with 126 sites identified in 17 countries.

LAOS III has recruited over 1206 participants from 49 sites in 17 countries.

C-CUSP-ED has 3 sites with 28 participants enrolled



Left Atrial Appendage Occlusion Study III



Patient Engagement



This Patient Engagement-Collaboration aims to realize the goals of the CIHR Strategy for Patient Oriented Research (SPOR) within the context of **C-SPIN**. Our **primary goal** is to develop and implement a focused strategy for patient engagement (PE) in research that is tailored to C-SPIN's strategic vision and sustainable throughout the course of our ongoing clinical trials. Our **secondary goals** are to *disseminate, implement, and evaluate our PE strategy* across relevant patient and healthcare provider stakeholders.

We are undertaking 2 activities internally with our Network and Patient Engagement Committee and externally through established collaborations with PE experts. This will complement work underway at C-SPIN with our stakeholder and knowledge user partners.

Activity 1. This activity has 2 phases. Phase 1 - involves distilling to C-SPIN members the benefits PE can make in terms of patients being active and informed partners in research to foster a climate that promotes the principles of PE. Phase 2 aims to build sustainable PE capacity where we will determine potential PE levels across a continuum of engagement participation opportunities.

Activity 2. Patient Recruitment and Training Procedures. The 1st training workshop will be held at PHRI on November 3, 2015. For more information please contact Dr. Sandra Carroll carroll@mcmaster.ca

Activity 3. Knowledge translation & Evaluation. C-SPIN has an established KT approach using integrated (iKT), promoting the science of KT, building capacity in KT science, and adopting end of project KT methods. This will expand to include defined roles for patients to engage and lead KT initiatives that are tailored based on patient preferences. Finally, through our collaboration with public/patient policy experts, we will implement an evaluation of our PE strategy.

PIAAF AF Screening Retreat

On June 17th of this year, 40 experts in stroke prevention and intervention from across Canada, USA, and Switzerland gathered to exchange knowledge in the field of AF Screening.

The broad themes:

- **Understanding stroke risk**

What is the best way to identify stroke risk? Through diagnosing the arrhythmia or the use of scores like CHADs? How much AF is needed to increase the risk of stroke?

- **Consensus on dysrhythmia definitions**

Seek international consensus on how dysrhythmias are defined, in particular as they are recorded on various devices.

- **Stroke etiology**

We need to better understand the mechanisms of stroke in its various forms (cardioembolic, non-cardioembolic, perioperative, etc.). the role of AF as a mechanistic factor or marker, and the role of the left atrial appendage in stroke.

- **Technology**

How can personal devices be harnessed so patients self-screen for AF, as part of a social partnership on-line, and how can the data be connected for diagnosis and research?

Identified Critical Questions that future research can answer:

1. **Can we establish the interaction between:**

- a. **AFib burden (on spectrum PAC – Perm AF)**
- b. **CHADS vascular risk factors**
- c. **Spectrum of non-hemorrhagic stroke**
- d. **Role of OAC**

2. **Burning epidemiology question:**

- a. To what extent does atrial dysrhythmia cause stroke?
- b. How much atrial dysrhythmia is required to increase stroke risk?

3. **How many "AF related" strokes are actually due to thromboembolism?**

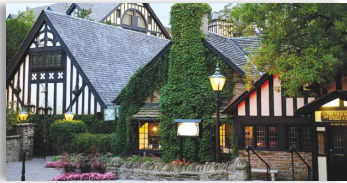
4. **Is there any way to design a study that definitively determines if stroke risk is dependent on the amount of AF?**



Clinical Trials Workshop

Please join us for the 2nd Annual Clinical Trials Workshop

Sponsored by the Canadian Stroke Prevention Intervention Network (CSPIN), a CIHR - funded initiative Jan 18, 19 2016 at The Old Mill, Toronto Ontario



This 2 day workshop will provide a unique opportunity for trainees to learn about clinical trials from leading experts in the field. Participants will work with outstanding faculty mentors to design and present research proposals. Didactic talks and small group sessions will focus on research design, presentation skills, grant-writing and career development. There will be opportunities for networking with peers and faculty at informal social events.

Who should attend?

Individuals with an interest in learning about clinical trials research from Canadian experts. The program costs are supported by *Sackett Visiting Scholarships* in the amount of \$2,500.00/trainee. Undergraduate students, postgraduate and subspecialty residents are eligible to participate.

How to apply:

Applicants will be required to develop a one-page proposal for a clinical trial. All protocols must, in some fashion, be related to the study of atrial fibrillation and/or cardioembolic events. A completed application form must be submitted along with a copy of the applicant's curriculum vitae, and letter of recommendation from the appropriate Program Director or Associate Dean. Additional information and application materials are available at www.cspin.ca or by contacting lisa.welikovitch@albertahealthservices.ca

Important deadline:

The deadline for submission of **application materials is November 23, 2015**. Ten trainees will be invited to participate. Successful applicants will be assigned a research mentor who will work with the trainee prior to, and during the retreat to offer feedback, guidance, and support.

Director's Update



Dear colleagues:

As CSPIN enters its third year, I would like to update everyone on the major accomplishments that have been made. Michael Hill (U. of Calgary) and team published the results of the ESCAPE trial in the *New England Journal of Medicine* this year, which demonstrated the benefit of mechanical reperfusion in acute stroke. The AF screening studies are well underway; including: the PIAAF pharmacy study (R. Sandhu, U. of Alberta) and ASSERT-III study (J. Healey, McMaster) which have finished enrollment; and the PIAAF family practice study (R. Quinn, U. of Calgary) and SCREEN-AF (D. Gladstone, U. of Toronto) which are actively enrolling. Our knowledge translation randomized trial (C-CUSP, R. Parkash, Dalhousie) is also actively enrolling. The other large C-SPIN randomized trials are also active, with the NAVIGATE-ESUS (R. Hart, McMaster), BRAIN-AF (L. Rivard, Montreal Heart) and ARTESiA (J. Healey, McMaster) all actively enrolling; and the OCEAN trial (A. Verma, Toronto; D. Birnie, Ottawa) about to start. Overall, we have succeeded in moving all of our challenging randomized trials from idea to action!

C-SPIN has also funded three new pilots, looking at: AF and covert stroke following non-cardiac surgery (M. Mrkrobada, Western); AF anticoagulation in the emergency room (C. Atzema, Toronto) and anticoagulant prescribing by community pharmacists (R. Sandhu, U. of Alberta).

On other fronts, we have had a series of successful meetings and webinars. Sandra Carroll has also done a great job in leading our Patient-Engagement committee, and is working to give patient-centered research a more prominent role in our studies. Finally, on the personnel development front, Bayer has agreed to fund two additional C-SPIN Bayer fellows this year; and C-SPIN will launch competitions for fellowship awards and mid-career mentoring awards.

Thanks to everyone who has contributed valuable time to make our network a success;
Jeff Healey, Principal Investigator, Scientific Director, C-SPIN