

Newsletter

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Canadian Stroke Prevention Intervention Network | Réseau Canadien pour la Prévention des Accidents Cerebrovasculaires

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Pilot Grant Competition

Ten proposals out of a total of nineteen submitted for this competition have been selected to move forward to the full application submission stage with a deadline of February 22, 2015.

Final results are expected to be announced at the C-SPIN Annual General Assembly on April 23, 2015.



2nd Annual General Assembly



The 2nd C-SPIN AGA will be held on April 23rd 2015. The event will be hosted by the Population Health Research

Institute of Hamilton at The David Braley Cardiac Vascular and Stroke Research Institute. We are pleased to announce as our guest speaker Dr. Christine Albert MD from Boston. The welcome dinner will take place on April 22nd.

Reminder: Online registration for this event will be closing soon. Please register at www.cspin.ca. For further information please contact us by e-mail: cspin@phri.ca

1st Annual Clinical Trials Workshop a Great Success



The 1st Annual Clinical Trials Workshop took place at the Fairmont Hotel in Ottawa Jan 21-23 2015. The objective of this educational program was two-fold: to engage

trainees in the process of developing and presenting proposals for clinical trials, and also to encourage the establishment of mentoring relationships with senior colleagues. Applications were received from trainees at university centres across the country and ultimately 11 individuals were invited to attend.

Prior to their arrival in Ottawa, trainees were required to develop a research proposal with input and guidance from an assigned mentor. The workshop began with a wonderful key-note address by Dr. George Wells who chronicled a career in clinical trials work. This was followed by a series of didactic talks by faculty members covering a broad range of

subjects related to clinical research. Small group sessions focused on career development, abstract writing and presentation skills. The faculty and trainees also enjoyed the opportunity to socialize in a relaxed setting during dinners at various restaurants in Ottawa.

The highlight of the program was the presentations by the trainees. Each talk was followed by feedback and discussion by faculty and students: a very valuable educational experience. All trainees received CSPIN Sackett Scholarships to attend this workshop. Two individuals were also recognized for their excellent presentations.

Dr. Cameron Gilbert, (Cardiology trainee at the University of Toronto) and Dr. William McIntyre (Cardiology trainee at the University of Manitoba) received awards for "best presentations" as determined by Drs. Michael Hill and George Wyse.

Planning is already underway for the 2nd workshop to take place in 2016. Please visit this website or contact Dr. Welikovitch (Lisa.Welikovitch@albertahealthservices.ca) for updates on planning this exciting educational event.

ESCAPE Trial Paper Published

Randomized Assessment of Rapid Endovascular Treatment of Ischemic Stroke

Background

Among patients with a proximal vessel occlusion in the anterior circulation, 60 to 80% of patients die within 90 days after stroke onset or do not regain functional independence despite alteplase treatment. We evaluated rapid endovascular treatment in addition to standard care in patients with acute ischemic stroke with a small infarct core, a proximal intracranial arterial occlusion, and moderate-to-good collateral circulation.

Methods

We randomly assigned participants to receive standard care (control group) or standard care plus endovascular treatment with the use of available thrombectomy devices (intervention group). Patients with a proximal intracranial occlusion in the anterior circulation were included up to 12 hours after symptom onset. Patients with a large infarct core or poor collateral circulation on computed tomography (CT) and CT angiography were excluded. Workflow times were measured against predetermined targets. The primary outcome was the score on the modified Rankin scale (range, 0 [no symptoms] to 6 [death]) at 90 days. A proportional odds model was used to calculate the common odds ratio as a measure of the likelihood that the intervention would lead to lower scores on the modified Rankin scale than would control care (shift analysis).

Results

The trial was stopped early because of efficacy. At 22 centers worldwide, 316 participants were enrolled, of whom 238 received intravenous alteplase (120 in the intervention group and 118 in the control group). In the intervention group, the median time from study CT of the head to first reperfusion was 84 minutes. The rate of functional independence (90-day modified Rankin score of 0 to 2) was increased with the intervention (53.0%, vs. 29.3% in the control group; $P < 0.001$). The primary outcome favored the intervention (common odds ratio, 2.6; 95% confidence interval, 1.7 to 3.8; $P < 0.001$), and the intervention was associated with reduced mortality (10.4%, vs. 19.0% in the control group; $P = 0.04$). Symptomatic intracerebral hemorrhage occurred in 3.6% of participants in intervention group and 2.7% of participants in control group ($P = 0.75$).

Conclusions

Among patients with acute ischemic stroke with a proximal vessel occlusion, a small infarct core, and moderate-to-good collateral circulation, rapid endovascular treatment improved functional outcomes and reduced mortality. (Funded by Covidien and others; ESCAPE ClinicalTrials.gov number, NCT01778335.) [Visit the C-SPIN Website for full text.](#) To learn more about imaging go www.escapetrial.org.

Introducing New C-SPIN Program Manager

On behalf of the CSPIN executive committee, I would like to extend a warm welcome to Kimberly Begley, who has now assumed the role Project Manager for the CSPIN network. Kimberly comes to us with global experience in networks and information technology. I invite everyone to get to know Kimberly over the next few months and most will have a chance to meet her in person at our Annual General Meeting on April 23rd.

Jeff Healey

C-SPIN Executive Committee

Dr. J. Healey	McMaster University
Dr. R. Sheldon	University of Calgary
Dr. D. Birnie	University of Ottawa
Dr. S. Carroll	McMaster University
Dr. S. Connolly	McMaster University
Dr. P. Dorian	University of Toronto
Dr. I. Graham	University of Ottawa
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Dr. M. Hill	University of Calgary
Dr. M. Sharma	McMaster University
Dr. M. Talajic	University of Montreal
Dr. A. Tang	Western University
Dr. L. Welikovich	University of Calgary Institute
K. Begley	C-SPIN Program Manager



Canadian Stroke Prevention Intervention Network

The Coordination Office

Location:

The Population Health Research Institute
David Braley Research Institute;
20 Copeland St,
Hamilton, Ontario

Mailing Address:

C-SPIN
Hamilton General Hospital
PHRI, David Braley Research Institute
237 Barton Street East,
Hamilton, Ontario L8L 2X2

Email: cspin@phri.ca URL: www.cspin.ca

Note: Individual studies may be coordinated at different institutions.