Rome wasn’t built in a day.

As the summer winds down and we prepare for the autumn equinox, many are returning from the European Society of Cardiology Congress in Rome, Italy. Rome, an ancient city with a long history of philosophical and scientific discourse, hosted this major event which explored new developments across the spectrum of cardiovascular disease.

The CVC, you as our investigative partners at our Canadian sites from coast-to-coast, and our scientific partners – Merck (Global and Canada), Bayer, DCRI and Stanford – are launching the VICTORIA trial. This trial, testing an oral soluble guanylate cyclase modulator, will enroll nearly 5000 of our volunteer patient partners that suffer from heart failure in a long term phase 3 trial. Canada is committed to playing a major role in the advancement of care and we value the time that each of you dedicate to participating in long-term trials such as this.

Key to launching a trial with all the complexity of electronic portals, regulatory documents, or ethics submissions is the training of study coordinators, principal investigators and all the personnel that make a trial of this magnitude possible. While much of the training occurs before a site is ‘activated’, there is a need to continually educate ourselves on new issues, solve problems and develop creative solutions to keep patients engaged in a longer trial. Many of you are experts at this and through sharing of best practices, others can gain from your wisdom.

Investigator meetings, often at the start of a trial or a rejuvenation meeting, serve as an opportunity to meet your colleagues, refine enrollment, share follow-up techniques and help clarify the ‘how-to’ of a trial aspect. This interaction with your colleagues should not be underestimated as these colleagues may provide a good sounding board for problems that can potentially arise during a multi-year project. As you are aware, we often ask experienced, high performing sites to actively participate and educate us all – including those deeply involved in the design or operations of a major trial. We can all learn something by interacting.

We encourage you to interact with us as we all arrive in Montreal in October. We have two additional educational offerings at the Canadian Cardiovascular Congress (CCC) that cover the spectrum of cardiovascular disease – atrial fibrillation, diabetes, coronary artery disease, and heart failure – under the Beyond2000 umbrella http://beyond2000.org (also see insert). We have a panel of national and international experts in a dynamic program on Monday morning (Acute Coronary Syndromes, and Heart Failure and Atrial Fibrillation, Room 517B) and encourage you to register and participate with us.

Justin Ezekowitz
CVC Co-director
GALILEO
All 10 sites in Canada and nearly 125 sites globally have now been activated for enrollment in GALILEO. As of September 1, 2016, over 200 patients have been randomized into this study which aims to compare a Rivaroxaban-based antithrombotic strategy to an antiplatelet-based strategy after a successful transcatheter aortic valve replacement (TAVR).

Congratulations to our first 2 enrolling sites in Canada:
1. Dr. Welsh, Norma Hogg and Suzanne Welsh (University of Alberta, Edmonton)
2. Dr. Toleva, Dolores Friesen (St. Boniface Hospital, Winnipeg)

Dr Welsh is our National Lead (and Executive Committee member) for GALILEO, and was the first site in Canada to randomize a patient. Dr. Toleva followed that up with 2 randomizations within a couple of weeks this summer. We look forward to having all sites randomize their first patients soon.

We anticipate the upcoming protocol amendment will help to boost recruitment at our sites in Canada especially where
contribution to the study enrollment.

Over 800 patients have now been randomized at approximately 60 sites. The Canadian contribution to this trial has been outstanding! We randomized our 150th patient in August.

Congratulations and many thanks to our top 5 enrolling sites:
1. Dr. Kalavrouziotis, Hugo Tremblay & Nathalie Gagne (Laval, QC): 29 patients
2. Dr. Nagpal & Stephanie Fox (London, ON): 29 patients
3. Dr. Mazer, Charmagne Crescini & Sanjay Yagnik (Toronto, ON): 18 patients
4. Dr. Teoh, Heather Hobson & Alexis Nikitopoulos (Southlake, ON): 18 patients
5. Dr. Maz, Charmagne Crescini & Sanjay Yagnik (Toronto, ON): 16 patients

We are rapidly approaching the end of enrollment and with the relatively short follow-up, this study is expected to end within a few short months thereafter. With the end of the study just around the corner, we must focus on data cleanliness. Sites are reminded to enter data and respond to queries within 5 business days. To this end, CVC will continue to email sites their query listings each week.

Thank you for all of your hard work in support of the AEGIS-I trial!

LEVO-CTS
Over 800 patients have now been randomized at approximately 60 sites. The Canadian contribution to this trial has been outstanding! We randomized our 150th patient in August.

Congratulations and many thanks to our top 5 enrolling sites:
1. Dr. Kalavrouziotis, Hugo Tremblay & Nathalie Gagne (Laval, QC): 29 patients
2. Dr. Nagpal & Stephanie Fox (London, ON): 29 patients
3. Dr. Bozinovski & Sheryl Sorensen (Victoria, BC): 22 patients
4. Dr. Teoh, Heather Hobson & Alexis Nikitopoulos (Southlake, ON): 18 patients
5. Dr. Maz, Charmagne Crescini & Sanjay Yagnik (Toronto, ON): 16 patients

Sponsored by Tenax Therapeutics, Inc., LEVO-CTS is a Double Blind, Randomized, Placebo-Controlled Study of Levosimendan in Patients with Left Ventricular Systolic Dysfunction Undergoing Cardiac Surgery Requiring Cardiopulmonary Bypass.

ClinicalTrials.gov Identifier: NCT02025621

Thank you for all of your hard work in support of the AEGIS-I trial!

For further information regarding this trial, please contact Clinical Trial Project Lead Courtney Gubbels at 1-800-707-9098 ext 2 or via email at courtney.gubbels@ualberta.ca or Kalli Belseck at 780-492-4011 or kalli@ualberta.ca.

Sponsored by CSL Behring LLC, this study is a Phase 2b, multi-center, randomized, placebo-controlled, dose-ranging study to investigate the safety and tolerability of multiple dose administration of CSL112 in subjects with acute myocardial infarction.

ClinicalTrials.gov Identifier: NCT02108262
**SYDNIUM-HF**

The SYDNIUM-HF trial currently has more than 285 subjects randomized (20-Sep-2016) at 18 active sites in Canada, Chile, Mexico and New Zealand. Thank you to all the sites for your continual hard work and efforts in identifying, enrolling and retaining study patients. We look forward to activating sites in Chile, Argentina and Australia in the coming months.

Welcome and congratulations to the following teams on your recent activation and first patient enrollment:

- Dr. Troughton, Lorraine and Catherine from Christchurch, New Zealand
- Dr. Porepa, Jeanine and Amirhossein from Newmarket, ON
- VerICiguaT GlObal Study in Subjects With Heart Failure With Reduced Ejection Fraction (HFrEF)

We would like to remind sites that the deadline for the next financial quarter is fast approaching (30-Sep-2016). Please ensure that all completed study visits and phone calls are up-to-date in REDCap. Once all the data is input, the form should be saved as "complete" (green) for each data entry with the exception of the Food Record, which can be saved as "unverified" once you have completed the site questions. The SYDNIUM Core Lab will complete these questions and update the status of the entry to "complete". Please also ensure that source worksheets are complete, legible and received by the Core Lab by the 30-Sep-2016.

All Dietitians and Study Coordinators are invited to attend the Dietitian Working Group Teleconference on Thursday 13-Oct-2016. This is a great opportunity to ask questions and interact with other study coordinators and dietitians. Additional materials will be distributed before the meetings. If you have any questions or need assistance dialing in, please do not hesitate to contact the Clinical Trial Project Lead.

If you are interested in further information about the SYDNIUM-HF trial, please contact the new Clinical Trial Project Lead Nubia Zepeda at 1-800-707-9098, ext 8 or via email at nzepeda@ualberta.ca.

**VICTORIA**

The Canadian VIGOUR Centre is pleased to share that we have received overwhelming interest from our sites regarding the VICTORIA trial!

We are well on our way towards selecting 40-50 high quality heart failure sites in Canada. With Canada’s first SIV completed in August, 2016, we anxiously await the recruitment of the first patient in the coming weeks.

Thank you to the many sites who completed initial start-up activities quickly over the summer months! Please ensure you continue to work with CVC to complete the feasibility questionnaire and schedule validation visits in a timely manner. It is crucial that these steps are completed efficiently to avoid unnecessary delays with potential site selection.

In addition, completing initial study activities in a timely manner ensures selected sites receive sufficient notice for upcoming Investigator Meetings which are key to attend.

It was a pleasure to meet some of our sites at the first investigator meeting recently in Orlando. We look forward to meeting our other sites at the upcoming investigator meeting in Dallas.

Additional meetings or training opportunities may be scheduled for sites that are not available to attend the first two meetings or those who are selected to participate in the trial at a later date.

**ODYSSEY OUTCOMES**

This past summer was a very busy one for our ODYSSEY Outcomes sites! Thank you for all of your hard work in completing all patient study visits within the required timeframe, as well as entering all your visit data in a timely fashion.

As we continue to reach the remainder of the second interim analysis targets and deadlines, your continued responsiveness will be greatly appreciated! As a reminder, Memo 31 and the Investigator Booklet clearly outline all upcoming goals.

This summer saw the release of a new protocol Amendment. Please ensure that all site staff that are actively working on the study have completed their training and that this training is sent to CVC. In addition, please submit the protocol related regulatory documents and your site specific ICF or addendum to consent to CVC for approval.

Remember that your REB approved ICFs should not be used until you are notified by CVC that you may implement the amendment at your site.

As you all know, we have had a very important modification to the eCRF Serious Adverse Events (SAE) reporting page. Each time an SAE is entered in the eCRF, a page will automatically appear within the site that the PI must complete. In order for the PI to log onto the eCRF, he must have completed his eCRF training. If this page is not completed by the PI, you will begin to receive automatic notifications from the eCRF indicating that PI review is required. With that in mind, please ensure that the PI has access to eCRF and has completed his/her training. If any assistance is required, please reach out to your CVC Project Lead.

We continue to keep a close eye on patient retention! Please use the resource provided to you earlier this year: the ‘site patient retention brochure’. It has excellent information to help you with any patients that may be more difficult to keep on study drug.

We appreciate all your efforts to keep patients on study drug, and to re-challenge them as their circumstances change. Once you receive REB approval, you may also distribute the ‘patient retention brochure’ to your patients to thank them for their continued participation in the trial, and to remind them of the importance of their commitment.

We look forward to the work ahead over the coming months!

For further information regarding this trial, please contact Clinical Trial Project Lead Jodi Parrotta at 1-800-707-9098 ext 3 or via email at jodi.parrotta@ualberta.ca or Paula Priest, ext 9 or paula.priest@ualberta.ca.

**ClinicalTrials.gov Identifier:** NCT01663402

**Sponsored by Sanofi-aventis Recherche & Developpement**this is a randomized, double-blind, placebo-controlled, parallel-group study to evaluate the effect of Alirocumab on the occurrence of cardiovascular events in patients who have recently experienced an Acute Coronary Syndrome.

**ClinicalTrials.gov Identifier:** NCT02091217
As always, we would like to remind you that it is never too late to bring your patients back on study drug – every patient counts.

Thank you to all sites who attended the EXSCEL Close-Out Meeting in Denver, CO this past June. This allowed us another great opportunity to connect with one another, receive feedback and to bring your patients back on study drug – every patient counts.

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AEGIS-I Thank-You

AEGIS-I monitoring team would like to thank all the blinded and unblinded study coordinators for accommodating us for all the visits.

AEGIS-I Thank-You

Kate joined the Clinical Operations team as a Regulatory Specialist in August. As a recent University of Alberta graduate, she is happy to be back on campus in a new role. Kate’s research background is rooted in social and cultural psychology so she is very excited for this opportunity to learn more about cardiovascular research and clinical trials. Her administrative experience and passion for research will make her a great fit at the CVC.

Kate Dawson

CVC NEWS


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EXSCEL

Thank you to all sites that attended the EXSCEL Close-Out Meeting in Denver, CO this past June. This allowed us another great opportunity to connect with one another, receive important trial status updates and learn about key close-out timelines and objectives for the remainder of the trial.

We would like to extend our thanks for your continued success in keeping patients active in the trial! We are pleased with the low number of lost to follow up patients across all Canadian sites and that no Canadian patients have withdrawn their consent to participate.

We look forward to working with you in this final phase of the trial. We are almost there, keep up the great work!

As a graduate from the University of Alberta, Nubia Zapeda has obtained her Bachelor’s degree in Science with Specialization in Pharmacology and her Master’s degree in Science with Specialization in Experimental Oncology. After graduating, she interned at the Charité Hospital in Berlin, Germany in the Clinical Trials Unit. During the past two years, she has worked with the Department of Surgery at the University of Alberta and the Surgery Strategic Clinical Network with Alberta Health Services as a Research Coordinator and Project Manager, respectively. Nubia will be working closely with Dr. Justin Ezekowitz on the SODIUM-HF and HILO Projects.

CVC NEWS

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Publications Continued


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Publications Continued

This newsletter is published periodically as a service to Canadian investigational sites. The purpose is to provide information of interest to individuals involved in cardiovascular clinical trials managed by the Canadian VIGOUR Centre, University of Alberta in Edmonton, Alberta, Canada.

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