

April 2017

**IMPORTANT
UPDATES**

**Sample Size
Goal for 2017**

ISCHEMIA:
5000 participants
ISCHEMIA-CKD:
700 participants

Timelines

Last enrollment:
December 31, 2017

Minimum follow-up
duration for random-
ized participants will
be approximately 12-
18 months.

Congratulations to the top randomizing sites this Winter!

Dr. Gilbert Gosselin

Anna Proietti, Patricia Blaise
Montreal Heart Institute
6 Randomizations (71 total)

Dr. Denis Phaneuf

Christine Shelley, Christine Bergeron,
Katia Drouin
**CSSS du Sud de Lanaudiere-
Hopital Pierre-Le Gardeur**
4 Randomizations (34 total)

Dr. Ben Chow

Ermina Moga
**University of Ottawa Heart
Institute**
4 Randomizations (23 total)

Dr. Ariel Diaz

Isabelle Roy
**Centre Hospitalier de
Regional Trios-Rivieres**
2 Randomizations (56 total)

Dr. Asim Cheema

Mohammed Hussain, Khrystyna
Kushniriuk, Ishba Syed
**St. Michael's Hospital
Dixie Medical Group**
2 Randomizations (33 total)

Dr. Paul Galiwango

Bev Bozek, Lori-Ann
Larmand
**Scarborough Cardiology
Research**
1 Rand(8 total)

Dr. Amar Uxa

Suzana Tavares, Nadia
Asif
**University Health
Network**
1 Rand(11 total)

**Dr. Graham
Wong**

Andrew Starovoytov
**Vancouver General
Hospital**
1 Rand (13 total)

Dr. Jacob A. Udell

Susan Webber, Maria Aprile,
Sara Karlsson
**Women's College
Hospital**
1 (5 total)

**ISCHEMIA
WORLD CUP
NEWS**

Canada was knocked
out in the finals,
losing to India. It was
a big feat to have
gotten so far and
Canada is a
Champion in our
eyes!

Thank you very much
for all your support
during the competi-
tion.

Visit [https://
ischemiatrial.org/
world-cup](https://ischemiatrial.org/world-cup)
for updates!

Thanks for all of your efforts in the ISCHEMIA trial; together our 20 Canadian activated sites have randomized 359 patients into the main trial and 18 into the CKD companion trial! This places our country enrolment behind only the United States, India, and United Kingdom, out of 4,055 participants randomized to date.

However, WE NEED YOUR HELP. Enrolment will end as of this calendar year (December 31, 2017) so it is *critical* that we double our efforts over the next 9 months to achieve a *minimum* of 5,000 patients for the main trial.

Please review your current monthly randomization rate and commit to *doubling* this over the next year (current Canadian avg. rate is 0.4). In most cases this means simply enrolling 1 patient per month for the next 9 months. This will require reaching out to your colleagues. A few letters, emails, and phone calls will remind your referring physicians to send patients with stable coronary artery disease and at least moderate ischemia on any form of stress testing they routinely have patients undergo.

Trial Status

as of March 30th 2017

Global

Total: 4055
CIAO:140
CKD: 516

Canada

Total: 359
CIAO:3
CKD: 18

**The 400th ISCHEMIA Trial
participant has been randomized!**

Congratulations!!

As of March 19, 2017, the ISCHEMIA-CKD Trial has
RANDOMIZED 500 PARTICIPANTS!!!

Drug Program

Canadian patients in the ISCHEMIA trial will have access to the PCSK9 inhibitor evolocumab (Repatha™) free of charge for patients not at LDL-cholesterol target.

We will gladly address any questions or concerns you have regarding obtaining evolocumab for currently randomized ISCHEMIA participants who have not achieved the ISCHEMIA trial LDL goal of <1.8 mmol/L on maximum tolerated dose of high-intensity statin.

Canadian patients in the ISCHEMIA trial also have access to free rosuvastatin (Crestor™), ticagrelor (Brilinta™), and nitrolingual spray.

Country Leaders: Drs. Gilbert Gosselin, Vlad Dzavik, and Shaun Goodman (goodmans@chrc.net; cell 416-390-6849)

ISCHEMIA-CKD Country Lead Cardiologists: Drs. Akshay Bagai and Kevin Bainey

ISCHEMIA-CKD Country Lead Nephrologist : Dr. Ron Wald

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