



Dear Swiss-AF Team

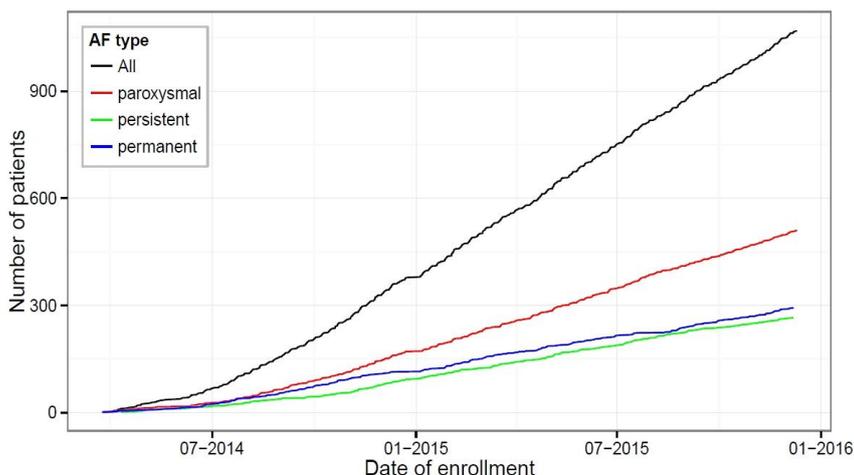
18 months after the start of Swiss-AF we have recently reached some key milestones. Most importantly, the Swiss National Science Foundation (SNSF) just prolonged the Swiss-AF grant for another two years until March 2018. The SNSF was satisfied with the overall progress of the study and acknowledged the high quality of the data collected so far. I would like to thank all the Swiss-AF investigators and study team members for their efforts that helped to achieve this major step.

However, the slower than expected recruitment rate was obviously a concern during the evaluation process and the expert panel stressed the importance of increasing the recruitment rate in order to complete the Swiss-AF enrolment as soon as possible. Therefore, and although we just celebrated our 1000th Swiss-AF patient, it will be key to follow this advice and try to improve one more time the recruitment process.

Please contact the study team in Basel if you have any questions or requests. Thank you.

Best regards


David



Follow-Up 1:

336 FU-1 visits have been completed (due 1 year \pm 4 weeks after baseline).

The recruitment goal for patients <65 years has been reached. Please do not forget to complete a work absenteeism questionnaire for these patients at all follow-up visits (for details see Study Manual, p. 7).

By now, please enroll only AF patients aged 65 years or older in Swiss-AF.

As of today, 1084 patients are included in Swiss-AF.

Medication Adherence Scale (MMAS-8)

An important new subproject has been added to Swiss-AF. Please complete the **medication adherence form** in all patients at all visits.

The form is available in German, French and Italian. So all patients in all centers are welcome to participate.

Each completed questionnaire will be reimbursed with CHF 50.--. The next deadline for compensation of study costs is **31 Dec., 2015**.

Ongoing Recruitment

Recruitment will be continued until 2017.

Female patients are still underrepresented (26%). Thus, stronger recruitment of women is needed!

To recruit more patients from **general practitioners**, a procedure has been implemented in collaboration with Daiichi-Sankyo.

If patients in your region are interested to participate, we will send you their data and ECG documentation for inclusion.

Swiss-AF Team Profile

In each newsletter we introduce a team of one of our actively participating sites. Here, it is our pleasure to introduce the study team at the **CardiocentroTicino in Lugano**, which is also responsible for our **ECG Core Lab**.



“We are delighted to act as the ECG-core lab and to give support to the Swiss-AF trial. The goal of our daily activity is to collect and verify all 16-lead ECGs recorded at baseline and during the follow-up visits and to give support to all participating centers in any case of technical problems in the data flow management. As far as now we are glad to announce no missing ECGs or incomplete recordings in our server.

Thanks to the efforts of all centers in correctly sending data to our core-lab, we have obtained and analyzed all enrolled patients' 5-minutes ECGs.

Now, we are ready to start with further advanced ECG analysis. We will do our best to continue in the same direction for the next 1000 patients.”

(A. Auricchio, G. Conte, C. Camporini, CardiocentroTicino, Lugano – Dec 2015)



Important Notes

- **Chronic conditions** that are already indicated in eCRF do not have to be indicated again at FU visits. For example, new-onset diabetes in the 2nd year has to be documented. The same patient can't have another new-onset diabetes, so please click “No” for diabetes at later FU visits (Study Manual V6, p. 37).
- **Acute events** need to be indicated each time that they occur. If a patient has a stroke in the 1st year and another stroke in the 3rd year, both events need to be documented.
- **Major events** require careful documentation. The local documents will be collected from the centres later.
- **180 patient diaries** assessing detailed health economics information have been handed out (goal: 200). A new version has to be distributed to these patients at each visit.

- **Incorrect eCRF entries** should be deleted by local staff. Radio button entries (like „Yes“/„No“) can be deleted by double-clicking the button.

- **Please check your eCRF data regularly.**

For this, click on the following links in secuTrial:

1. `Reports` (at the Welcome page)
2. `Validation information`

Then click directly on the items that are indicated for correction or completion, if any. It is very important that you do this **regularly**, such that we can maintain the excellent data quality.

Thank you!

*Merry Christmas and A Happy New Year
to All of You!*

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