



NEWSLETTER

Welcome

We welcome you to the fifth issue of the SCTNI Newsletter, and wish you all a healthy and successful 2020.

In this first issue for 2020, we update you on what was a busy and productive end to the calendar year for the SCTNI and its members. Items covered in this issue include the SCTNI Conference, a Spotlight on...the SCTNI Recovery Operating Group, a range of new publications from members and of general interest (incl. the new Cochrane Handbook for Systematic Reviews), and some upcoming funding, events and other opportunities.

We are keen to hear about your work, announcements, events, or anything that you think can be shared with SCTNI members. Please forward information to us [by email](#) and we will ensure it is included in a future issue.

Best wishes,

SCTNI Team

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SCTNI News

SCTNI Conference 2019

The 3rd SCTNI Conference took place on the 22nd November 2019. Participation at the conference was the highest to date, doubling the number of attendees from 2018. Opening proceedings, Prof Peter Kelly noted how research, such as that conducted through clinical trials, has been a driver of better treatment and has significantly contributed to improving stroke mortality and outcomes in Ireland. Structured to address new advances in stroke treatment, cognition and recovery, and stroke prevention, our twelve invited speakers delivered high quality presentations on a range of subjects, from updating on endovascular therapy to emergency

treatment of 'minor' stroke. There was also a lot of interest in the excellent cases presented during the poster session. The conference was exciting, energetic and informative, and we are especially grateful to the speakers and audience who ensured this. It raises the bar for us for 2020, but it's a challenge we are happy to take on! While many presentations cannot be made publicly available due to the inclusion of unpublished or sensitive data, a small number of presentations have been approved for circulation. They can be [accessed here](#).



Spotlight on...

The SCTNI Recovery & Rehabilitation Operating Group

The SCTNI Recovery Operating Group (ROG) oversees current and proposed network stroke rehabilitation recovery trials. It is Chaired by **Prof Frances Horgan**, RCSI School of Physiotherapy. The vision of the SCTNI ROG is to raise the *profile and reputation* of stroke rehabilitation research nationally and internationally.

The SCTNI ROG welcomes applications for the inclusion of trials within the SCTNI that fit the capacity and resources of participating hospitals (see [the SCTNI Strategy here](#) for details on including new trials within the SCTNI). The SCTNI ROG are currently liaising with the research team for AVERT-DOSE to identify Irish sites who will take part in this international stroke trial on early mobilisation after stroke. If you would like more details please email Prof Horgan (fhorgan@rcsi.ie).

At the recent SCTNI Conference in Beaumont Hospital on November 22nd 2019, Prof Horgan and members of the SCTNI ROG extended a call to broaden the membership and to do some work around agreeing research priorities for stroke recovery and rehabilitation research in Ireland, including a needs analysis to understand how we can facilitate national stroke rehabilitation and recovery research. If you would like to receive more details please email us at isctn@ucd.ie.



CONVINCE Update

The CONVINCe Trial continues to make significant progress towards meeting its recruitment targets. In November 2019, 74 patients were randomised, surpassing the previous monthly record of 68 patients. Dr Manuel Gomez-Choco and the team from Hospital Moises Broggi, Comprehensive Health Consortium, Spain randomised the 1250th patient to CONVINCe on the 25th Nov. Four sites randomised the first patients in November: Croydon University Hospital (UK); Medway Maritime Hospital (UK); Hospital Nicholas Copernicus, Gdansk (Poland); Lithuanian University Hospital of Health Sciences Kaunos Klinikos (Lithuania). Further updates on CONVINCe can be viewed in the December Newsletter, which can be [accessed here](#). The December issue also includes information on the COLCOT trial, and a profile of the CONVINCe Data Management Team at the HRB Clinical Research Facility Galway, National University of Ireland, Galway.



Upcoming Events, Training and Opportunities

Workshop: Measuring outcomes in randomised trials

Organised by the HRB-TMRN, this one day workshop will focus on developing, appraising and using core outcome sets. Taking place on the 31st January in NUI Galway, this course is aimed at those interested in both developing core outcome sets in trials, as well as those who want to use available core outcome sets effectively. This one day course will explore: i) Why and where do we need core outcome sets? ii) What is COMET, what is COMET doing to help, and how can you join in? iii) How should core



outcome sets be developed? iv) Finding and appraising a core outcome set for your research v) Do core outcome sets work? The course is free to attend, but [registration is required](#).

Webinar: A random walk through outcomes based research for healthcare

Randomised controlled trials and systematic reviews of trials examine evidence of safety, efficacy and cost effectiveness of interventions to provide guidance and recommendations to support decisions about treatment. Such evidence-based decisions rely on an unbiased summary of the study results. However, research has shown that there are a series of biases that



may affect the validity of the medical literature. Also organised by HRB-TMRN, an upcoming webinar with Prof Jamie Kirkham (Uni Manchester) will take the audience on a journey through some of these issues. Scheduled for 18th February at 1pm, Jamie will be the guide on a random walk through the evidence,

will explore some of the empirical evidence of the biases that exist, and the potential statistical and non-statistical solutions to these problems. The talk will also include ongoing research into global health outcomes in low- and middle-income (LMiC) settings. You can [register for the webinar by clicking here](#).

Funding: HRB-TMRN Study Within a Trial (SWAT) Award

To date, the HRB-TMRN has funded eight SWATs investing €110,000 in developing this initiative nationally. In 2020 the network will provide further funding for one SWAT award. This award is worth up to €25,000 (to include 25% institutional overheads of direct project costs), up to one year duration, and will provide for the implementation of a self-contained methodological research study in a planned or an existing randomised trial. This funding is available to research teams in University College Cork, NUI Galway, Trinity College Dublin and University College



Dublin. There are no eligibility restrictions for the lead applicant (e.g. previous grant holder) and early stage career researchers are welcome to

apply, provided that the trial Principal Investigator supports the application and appropriate mentoring arrangements are in place. The closing date for the application is March 6th 2020.

[Further details here](#).

Training: SPHeRE PhD Programme

The application process for the SPHeRE PhD Programme will open soon for i) individuals applying for funded and self-funded positions; ii) Supervisors/Principal Investigators with an alternative funded Scholar who wish to apply for



inclusion of their candidate on the Programme free of charge. The SPHeRE PhD Programme in Population Health and Health-services Research (PHHSR) aspires to cultivate world-class researchers through a four-year structured PhD Programme. This can also be undertaken over a longer time period on a part-time, self-funded basis. The Programme welcomes applicants with

an interest in carrying out research on population health and/or health services in the Irish context and from a wide range of academic and clinical disciplines. SPHeRE HRB funded scholars benefit from i) 8-week specialist placement in Irish health related agencies in the first year; ii) placement with a prestigious overseas agency to further PhD project development in the second or third years; iii) professional skills training allowance; iv) travel funds for training and international conferences; v) an annual stipend of €18,000, a laptop computer, and PhD fees. The deadline for individual applications is 17th April 2020, while applications from Supervisors/ Principal Investigators are being accepted on an ongoing basis. Further details can be [accessed here](#).

Training: Stroke-related Collaborative Doctoral Awards Announced



The HRB recently announced that, under its Collaborative Doctoral Programme, it will invest €4.5 million to train health practitioners and academics to PhD level doing research that will improve care for stroke patients, target chronic disease and tackle diabetic foot disease. Three collaborative doctoral awards were announced in this round, two of which will be of particular interest to SCTNI members. Led by **Prof David Williams** (RCSI) and **Prof Frances Horgan** (RCSI), iPASTAR (improving Pathways for Acute STroke And Rehabilitation) is a collaboration between RCSI and UCD. The specific focus of this CDA programme is to train four PhD trainees from different disciplines and professions, (medicine, physiotherapy or occupational therapy, nursing, health economics or health services research) who will focus on delivery of stroke care for patients, from the hospital, to rehabilitation in the community, then living well after

stroke. The programme is built on feedback from stroke survivors who explained the challenges they, and their families, face following stroke. The Collaborative Doctoral Programme in Chronic Disease Prevention (CDP-CDP) is a collaboration between NUI Galway, UCC, UCD and the Health Service Executive, and also includes stroke as a major focus. Recruiting up to five PhDs, the CDP-CDP aims to improve patient care by developing and delivering a doctoral training programme in evidence-based chronic disease prevention. Full details of the CDAs are [available here on the HRB website](#). Details of the PhD application process will become available in due course, and will also be detailed on the application section of the SPHeRE website noted above.

1st European Stroke Rehabilitation Workshop

The 1st European Stroke Rehabilitation Workshop will take place on 12th May 2020 before the joint ESO-WSO Conference in Vienna, Austria. This workshop focuses on cutting edge clinical and research aspects of stroke, inviting renowned stroke rehabilitation specialists as well as early career colleagues, and is organised under the auspices of the ESO and its Neurorehabilitation Committee. During the workshop, European stroke rehabilitation specialists will share their knowledge with stroke physicians, therapists and nursing professionals. Participants will discuss the most recent research and innovative technologies for the rehabilitative treatment of stroke with a faculty of experienced European speakers and have the opportunity to



familiarise themselves with standardised outcome assessments. Further information, including the application form, can be [accessed here](#).



Publications & Resources

The relationship between plaque morphology, cerebral micro-embolic signals (MES) and platelet biomarkers in carotid stenosis patients

Published in the Journal of Cerebral Blood Flow & Metabolism, Dr Stephen Murphy (AMNCH/TUH) and several **colleagues from the SCTNI based in the AMNCH/TUH and St Vincent's Hospital** describe a study that combined data from two prospective, observational studies to assess carotid plaque morphology and relationship with cerebral MES and platelet biomarkers in patients with recently symptomatic (≤ 4 weeks of transient ischaemic attack (TIA)/ischaemic stroke) versus asymptomatic carotid stenosis. Data from 42 recently symptomatic carotid stenosis patients were compared with those from 36 asymptomatic patients. Findings show no differences in median Grey-Scale Median (GSM) scores between symptomatic and asymptomatic patients or between MES+ve vs. MES-ve symptomatic patients. Symptomatic patients with GSM-echodense plaques had higher platelet counts, neutrophil-platelet, monocyte-platelet and lymphocyte-platelet complexes than asymptomatic patients with GSM-echodense plaques. The authors conclude that symptomatic carotid stenosis patients with 'GSM-echodense plaques' have enhanced platelet production/secretion/activation compared with their asymptomatic counterparts. Simultaneous assessment with neurovascular imaging and platelet biomarkers may aid risk-stratification in carotid stenosis. The article is [available here](#).

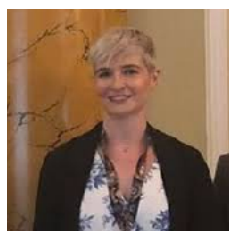


Identifying Patients at High Risk of Coronary Events After Stroke



Despite high rates of treatment with modern preventive medications, about 25% to 30% of ischaemic stroke survivors will experience a recurrent stroke or coronary event by 5 years after their initial stroke. In their editorial for the journal Stroke, **Prof Peter Kelly** and Dr Chris Price describe how despite the high risk and serious consequences of coronary events, no randomised trials exists of coronary screening strategies in asymptomatic patients after stroke. The authors go on to describe how guidelines for coronary screening during routine care vary, with some not giving explicit guidance on the issue of routine screening and others providing mainly opinion-based recommendations, which have not been recently renewed. Presenting a range of existing studies, the authors identify gaps where future studies could focus, including refining the Essen score, improving cardiac risk stratification, and targeting new antiatherosclerotic therapies toward selected high-risk patients. The [Editorial is available here](#).

Cognitive impairment and medication adherence post-stroke



Control of vascular risk factors is essential for secondary stroke prevention. A recently published article in PLOS One explores prospective associations between cognitive impairment and medication non-adherence post-stroke. Led by Dr Daniela Rohde (RCSI), and involving SCTNI members **Prof David Williams** and **Prof Anne Hickey**, the article details a five-year follow-up of 108 stroke survivors from the Action on Secondary Prevention Interventions and Rehabilitation in Stroke (ASPIRE-S) prospective observational cohort study. Findings show that the prevalence of cognitive impairment at five years was 35.6%. There were no statistically significant associations between medication non-adherence in the first year post-stroke and cognitive impairment at 5 years, nor between cognitive impairment at 6 months and non-adherence at 5 years. Stroke survivors with cognitive impairment were significantly more likely to report receiving help with taking medications. Findings highlight the role of family members and caregivers in assisting stroke survivors with medication administration, particularly in the context of deficits in cognitive function. The article is [available here](#).

Assessment of 'high on-treatment platelet reactivity' (HTPR)

Led by Dr Stephen Murphy (AMNCH/TUH) - and stemming from research conducted by **Prof Dominick McCabe**'s team on the HEIST study and in collaboration with other SCTNI members - a recently published article in the Journal of Neurology examines the relationship between 'on-treatment platelet reactivity', shear stress, and micro-embolic signals in asymptomatic and symptomatic carotid stenosis. This prospective, multi-centre study assessed antiplatelet-HTPR status and its relationship with micro-emboli signals (MES) in asymptomatic vs. symptomatic ≥ 50 –99% carotid stenosis. Findings highlight how recently symptomatic moderate – severe carotid stenosis patients had a lower prevalence of aspirin-HTPR than their asymptomatic counterparts on the PFA-100®, likely related to higher aspirin doses. Furthermore, the prevalence of antiplatelet-HTPR was positively influenced by higher shear stress levels, but not MES status. The [paper can be accessed here](#).



Cochrane Handbook for Systematic Reviews of Interventions, Version 6 2019

The 2019 Version 6 edition of the [Cochrane Handbook for Systematic Reviews of Interventions](#) has launched and is now [freely available online via the Cochrane website](#) – and in printed book form, which can be purchased from the [Wiley website](#). Cochrane Methods has posted a '[What you need to know about the new Cochrane Handbook](#)' post, which includes links to a [Cochrane news announcement](#), a [what's new leaflet](#) and updated [MECIR Manual](#), as well as highlighting key talks at the Colloquium, including the [2019 Methods Symposium](#), a [Special Session on the Handbook](#), and the [Methods Diversity Plenary](#).



What are the most important unanswered research questions in trial retention?

Reporting on findings from the PRioRiTy II project - a James Lind Alliance Priority Setting Partnership that colleagues at the HRB-TMRN are involved in - a recently published article in the journal *Trials* identifies and prioritises unanswered questions and uncertainties around trial retention in collaboration with key stakeholders. Aimed at improving retention in randomised trials, the article describes the Top 10 priorities identified by key stakeholders i.e. patients, members of the public involved in trials, front-line staff, investigators, and trial methodologists. The article detailing the research process can be [accessed here](#), while the [top 10 questions are available here](#).



Clinical trials, methodology and accountability - a PPI view

Reflecting on his experience of the Oct 2019 International Clinical Trials Methodology Conference (ICTMC) in Brighton, Andrew Worrall provides an excellent summary of the conference from a patient's perspective [in this blog post](#). While Worrall identifies several examples of clinical trials where PPI is either a tick-the-box exercise or is non-existent, he notes that this was "not the predominant mood of my notes from the three days". The blog goes on to describe several positive examples of PPI in clinical trials, including from colleagues at the HRB-TMRN.



In other news...

"Mammy's not well" - so begins a recent Twitter thread by **Dr Liam Healy**, Consultant Geriatrician in Cork University Hospital (CUH) that tells the story of a young woman and her family suddenly impacted by stroke, and the combined efforts of colleagues in CUH who were able to save her life. The full thread can be [read here](#).



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