

SPIRIT Newsletter

Volume 3/Issue 3
May 2020

The Southern New England Partnership in Stroke Research, Innovation and Treatment



JOIN US FOR THE SPRING STROKENET SPIRIT CONFERENCE

Learn about current StrokeNet Trials.
Interact with other SPIRIT researchers.
Collaborate with fellow colleagues.

Rescheduled: OCTOBER 9th 2020 | Madison Beach Hotel, 94 W. Wharf Road, Madison, CT

Shared Experiences and Best Practices from the Frontlines

• **Yale New Haven (Karin Nystrom)**

- Some of the neurology 'rounding' staff now work remotely; smaller teams work directly with patients and bedside staff to ensure orders, patient exams and care plans are fulfilled.
- Early on during the pandemic, the acute stroke team - along with the Emergency Department and Interventional staff – elected to evaluate all suspected acute stroke patients as 'COVID-positive' during the initial evaluation by donning PPE.
- The vascular neurology clinics have continued under a newly developed telehealth program through the EPIC telehealth platform.
- The stroke APRNs, stroke nurse navigators, RN coordinators, and Data coordinators are assisting on several of the newly designated COVID units.
- Preliminary planning is underway for staffing and workflow.

- **Rhode Island Hospital (Tina Burton)**

- ED code stroke process requires full PPE (e.g. N95 mask, shield, gown, and gloves) for those directly in contact with the patient, then other care providers more than 6 feet from the patient wear modified PPE (e.g. N95 mask and face shield).
- Trying to get rapid tests on all acute stroke patients.
- Outpatient clinics are largely telehealth.
- Neurocritical care unit is caring for an increasing number of COVID-19 patients, and some NCCU patients have been moved to other ICU locations.
- We have seen a drop in code stroke alerts and admissions, possibly due to fear of acquiring COVID-19.

- **Northwell Health (Betsy Moclair)**

- Redcap has the capabilities to build e-consent forms. Sponsors and IRBs are open to the idea, and this can help alleviate the issue with LAR not being able to be onsite to sign consents.
- Consent for SOC procedures is being obtained via verbal consent.
- Thinking of using e-consent for our investigator-initiated trials.

Patient Experience Highlight!

“A memorable sight leaving the hospital last Sunday was seeing a large family gathered at the entrance of the hospital donning surgical masks and holding “Happy Birthday Mom” signs up to the lobby window. Inside the lobby were two nurses supporting a fragile patient sitting up in her hospital bed so that she could see her family through the glass – as they wished her a happy birthday. One of the nurses leaned over to briefly remove the patient’s mask so that her smile could be viewed by her family members. It was a remarkable, touching sight.” – Karin Nystrom



Thank you to the amazing COVID RN team caring for our PCU patients. You guys amaze me everyday- thank you for your selflessness, and commitment to one another and our patients.

From Jen O'Neil

Credit: Facebook – Yale New Haven Hospital via Jen O'Neil

SPIRIT FEATURED PUBLICATIONS



PCSK9 (Proprotein Convertase Subtilisin-Kevin Type 9) Inhibition and Stroke Prevention: Another Step Forward, Alberts et al, Stroke

<https://pubmed.ncbi.nlm.nih.gov/32312221/>



Mechanical Thrombectomy in Patients with Ischemic Stroke with Prestroke Disability, Burton et al, Stroke

<https://pubmed.ncbi.nlm.nih.gov/32268851/>



Genetically Elevated LDL Associates With Lower Risk of Intracerebral Hemorrhage, Falcone et al, Ann Neurol

<https://pubmed.ncbi.nlm.nih.gov/32277781/>

Highlights

- (2020, April 1). Temporary Emergency Guidance to US Stroke Centers During the COVID-19 Pandemic. *American Heart Association*, Retrieved from <https://www.ahajournals.org/doi/10.1161/STROKE.AHA.120.030023>
- *National Institutes of Health StrokeNet Training Core*, Sharma et al, Stroke <https://www.ncbi.nlm.nih.gov/pubmed/31795907>

Since March 14

2,050

COVID-19 patients have been discharged back to their lives after being treated by our **healthcare heroes.**

#inthistgether

YaleNewHaven**Health**

CLINICAL TRIALS UPDATES:

- ARCADIA (SPIRIT currently ranked 18th out of 29 sites for randomizations!)
 - Yale – 34 consented – 5 randomized; 4 to-be randomized after enrollment pause
 - North Shore – 8 consented – 3 randomized
 - Rhode Island – 15 consented – 3 randomized
 - Hartford Hospital – 7 consented – 1 randomized
 - Lenox Hill Hospital – 1 consented – 0 randomized
 - Per NCC enrollment on pause as of March 21, 2020
- SLEEPSMART
 - Yale – 17 consented – 6 randomized
 - North Shore – 5 consented – 1 randomized
 - Hartford Hospital – 0 consented
 - STATEN ISLAND opening to enrollment VERY SOON!
 - Per NCC enrollment on pause as of March 20, 2020
- MOST
 - Yale – 1 consented – 1 randomized
 - North Shore – 0 consented
 - RHODE ISLAND opening to enrollment VERY SOON!
 - Per NCC enrollment on pause as of March 16, 2020
- ARCADIA-CSI
 - Yale, Hartford and North Shore recently open to enrollment. No enrollments yet!
 - Per NCC enrollment on pause as of March 17, 2020
- I-ACQUIRE
 - Yale – 2 consented – 1 randomized
 - Per NCC enrollment on pause as of March 17, 2020
- ASPIRE
 - Yale, Rhode Island, Hartford, and Staten Island recently released to enrollment. No enrollments yet!
 - NORTSHORE opening to enroll SOON!
 - Per NCC enrollment on pause as of March 20, 2020
- SATURN
 - Yale – 0 consented
 - HARTFORD, NORTSHORE, and RHODE ISLAND opening to enroll soon!
 - Per NCC enrollment on pause as of March 22, 2020

Helpful Updates & Reminders!

1. Please complete COVID-19 Impact Assessment in WebDCU for each StrokeNET trial at your site, per what your local policies have instated.
2. Go to NIH website for up-to-date COVID-19 updates via: <http://nihstrokenet.org/> or <https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-087.html>
3. Each site will need to follow local guidance once NCC opens back up enrollment, please alert NCC PI and Project Managers as well as SPIRIT leadership.
4. E-Consent will be forthcoming for all StrokeNet studies, will be using RedCAP, please make sure local policies and irb will support this new system.
5. I-ACQUIRE amending protocol to add: saliva collection, e-Consent, additional parent council questionnaire, and adding new age eligibility up to 36 months.
6. All StrokeNet studies will be amending protocols to allow for remote consent, randomization and follow-up as applicable.
7. ARCADIA NCC has confirmed amending protocol to allow for 120 window to be pushed out to 180 days.
8. MOST NCC has confirmed the 90-day follow-up can be performed remotely. However, the Modified Rankin Score needs to be recorded with the video recorder provided to sites, or in case cannot get on site, can be recorded and uploaded via GlasGlow from phone, please contact: alastair.wilson@glasglow.ac.uk for more help. Please check with local HRPP office to follow local policies and guidance in collecting properly.
9. Some StrokeNet studies are collecting COVID-19 + as adverse event, please enter as applicable.
10. For site not yet activated, NCC will continue site activation process, including completion of regulatory documents, delivery of study drug and releasing sites to enroll. Goal is to have as many sites ready as possible once we are able to return to usual procedures.

PI & Coordinator Spotlight: Dr. Henry Yaggi and Radu Radulescu



We would like to recognize Dr. Henry Yaggi and Primary Coordinator Radu Radulescu at Yale News Haven Hospital for their efforts and incredible contribution to recruitment for the SleepSmart CPAP trial. Yale New Haven Hospital ranks **#9** out of 92 sites for randomized by site!! THANK YOU for your continuous hard work and dedication. Great job!!

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THANK YOU FOR YOUR SUPPORT!

