

Home-Based Screening for Early Detection of Atrial Fibrillation in Primary Care Patients Aged 75 Years or Older: the SCREEN-AF Randomized Trial

From the CIHR-funded Canadian Stroke Prevention Intervention Network (C-SPIN)
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SCREEN-AF is a first-of-its-kind national multicentre randomized controlled trial of AF screening targeting primary care patients aged ≥ 75 years who have hypertension.

The aim is to establish a practical, clinically effective, and cost effective screening strategy that could be easily integrated in primary care for early detection and treatment of AF.

This research is important because AF is a common risk factor in the elderly (after age 40, the lifetime risk of developing AF is 1 in 4) and AF-related strokes are reaching epidemic proportions. Identification and treatment of AF is one of the best ways to prevent stroke. The problem is that AF is frequently subclinical and paroxysmal and, therefore, often goes undetected before a patient suffers a stroke.

New ambulatory cardiac monitoring technologies are now making it possible to improve AF detection. SCREEN-AF offers patients access to the latest technology devices for AF screening. We are studying the ZIO XT Patch, a wearable ultra-portable adhesive patch monitor (a miniature Holter monitor) that provides continuous ECG recording for up to 14 days. We are also studying the WatchBP home blood pressure monitor that has built-in AF screening capability.



Figure 1 The Zio Patch (iRhythm Technologies, Inc, San Francisco, Calif) is an FDA-cleared, single-use, noninvasive, water-resistant, 14-day, ambulatory ECG monitoring adhesive patch.

This is a low-risk, potentially high-impact study. If more patients with paroxysmal AF can be detected, more patients will be able to receive guideline-recommended anticoagulant therapy, and more strokes, deaths, disability, and dementia can be prevented.

The trial officially launched in April 2015 and is currently recruiting interested family practice clinics across Canada that have a high volume of patients aged ≥ 75 years and want to offer their patients an opportunity to be screened for AF. The protocol is simple and quick for enrolling clinicians, with a brief questionnaire at baseline, 3 months and 6 months. A limited number of clinics will be selected for participation. If interested, please email for more information.

Study PI: David Gladstone MD, PhD, FRCPC david.gladstone@sunnybrook.ca

Project manager: Alex Grinvalds: alex.grinvalds@phri.ca