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The Newsletter of the POINT Trial

Volume 7, Issue 1 1st Quarter 2017

2017 1st Quarter Recap

Dear Colleagues,

Study Enrollment Update
March was our best month to date, with 91 participants enrolled. The total enrollment this quarter has kicked off a great start to 2017, taking us to 75% of our enrollment target of 5840 participants. We continue to be pleased with the performance of our many US sites, and are very grateful for the terrific contributions of our more recent partners outside of the US. We look forward to continuing strong for the rest of the year. Keep up the good work!

Study Drug Update
We will be replacing the current inventory of study drug by June 30th, which is 90 days before its expiration date of September 30th. The new batch will use a different bottle design, but the label will remain the same and will still contain all the information necessary for randomization.

ESOC 2017: Prague, Czech Republic
The UCSF POINT Study Team will be presenting a poster at the European Stroke Organisation Conference (ESOC) on Tuesday, May 16th, in Prague, Czech Republic. More information regarding the ESOC poster session, including time and directions to the venue, will be sent out by email as the conference draws closer. Hope to see you there!

Biomarker Ancillary Study
The POINT Biomarkers Ancillary Study began enrolling in November 2012. Thanks to all your hard work, the enrollment for the substudy is going strong with 902 participants enrolled as of the end of Q1 2017.

Please see page 2 for important information regarding Biomarker Specimen Collection Kits. As we near the last stretch of the trial, please continue to do your best and to recruit as many participants as you can for both the trial and the substudy. The finish line is in sight!

If you have questions or need more information, please feel free to contact us directly. We look forward to a great year for POINT, and appreciate your efforts as we enroll the last 25%.

Sincerely,

Clay Johnston MD, PhD, POINT Principal Investigator

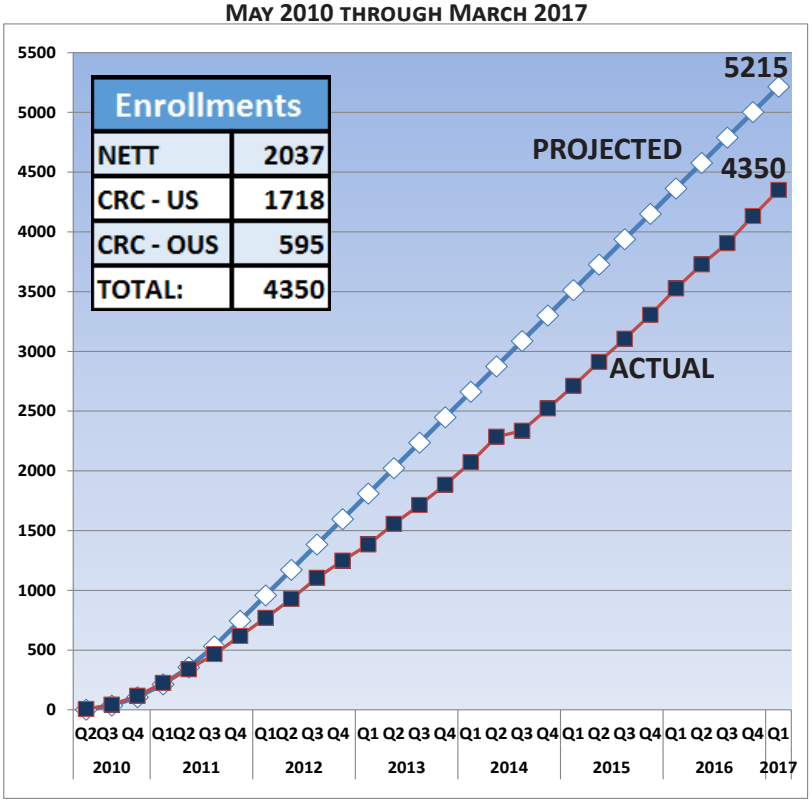
Don Easton MD, POINT co-Principal Investigator

Anthony S. Kim MD, MAS, POINT co-Principal Investigator

In This Issue: New FAQ and *Coordinator's Corner: Competing Trials to POINT*

POINT Cumulative Enrollment

May 2010 through March 2017



Hot Enrollers for 1st Quarter

Hub	Site	#
CRC	Bichat-Claude Bernard Hospital, *Paris, FRA*	11
CRC	University of Alberta Hospital, *Edmonton, AB, CAN*	9
CRC	Girona University Hospital, *Girona, SPA*	8
CRC	Pierre Wertheimer Hospital, *Bron, FRA*	8
CRC	Helsinki University Central Hospital, *Helsinki, FIN*	7
CRC	Santa Creu and Sant Pau Hospital, *Barcelona, SPA*	7
CRC	Footscray Hospital, *Footscray, VIC, AUS*	6
CRC	Vancouver General Hospital, *Vancouver, BC, CAN*	6

Top Enrollers (as of March 31, 2017)

Hub	Site (US)	#
CRC	Guilford Neurological Associates, *Greensboro, NC*	119
UPENN	Hospital of the University of Pennsylvania, *Philadelphia, PA*	116
CRC	Benefis Hospitals Inc, *Great Falls, MT*	95
Stanford	Stanford University Medical Center, *Stanford, CA*	81
NETT	Grady Memorial Hospital, *Atlanta, GA*	71

Hub	Site (OUS)	#
CRC	University of Alberta Hospital, *Edmonton, AB, CAN*	83
CRC	Santa Creu and Sant Pau Hospital, *Barcelona, SPA*	60
CRC	University of Calgary - Foothills Campus, *Calgary, AB, CAN*	46
CRC	Vall d'Hebron Hospital, *Barcelona, SPA*	30
CRC	Northwick Park Hospital, *Harrow, GBR*	25
CRC	Hospital del Mar, *Barcelona, SPA*	24
CRC	Miguel Servet Hospital, *Zaragoza, SPA*	24

Send your feedback and suggestions for future newsletters to POINTOperations@ucsf.edu.

COORDINATOR'S CORNER

Competing Trials to POINT

By Don Easton, MD

Guest Contributor and POINT co-Principal Investigator

Remember in Volume 6, Issue 1 when we reported the results of the SOCRATES Trial? SOCRATES directly impacted POINT enrollments, as the inclusion criteria for both studies were very similar. The 24-hour enrollment window in SOCRATES also made recruitment challenging at overlapping sites. Although no longer recruiting, the following two studies have also screened for participants using eligibility criteria similar to POINT.

TARDIS

As many of you are aware, the results of the TARDIS Trial were presented at the 2017 International Stroke Conference in Houston in February. TARDIS, which stands for **T**riple **A**ntiplatelets for **R**educing **D**ependency After **I**schemic **S**troke, enrolled 3069 subjects.

TARDIS, funded by the British Heart Association- sought to test if triple antiplatelet therapy of aspirin, dipyridamole and clopidogrel was superior to guideline-recommended treatment in preventing recurrent strokes in patients who had sustained a recent ischemic stroke or TIA. As the majority (95%) of the subjects of the TARDIS trial were recruited from the UK, TARDIS had to abide by the guideline-recommended strategies of the UK for treatment of ischemic strokes and TIAs, which consisted of aspirin plus dipyridamole or clopidogrel alone. At the ISC, it was reported that triple antiplatelet therapy was not superior and does not offer benefits over these guideline-recommended strategies.

Dr. Philip Bath, the PI of TARDIS, stated that subgroup analysis suggested that triple antiplatelet therapy was superior to control in terms of the primary efficacy endpoint in patients with mild stroke (NIHSS score of ≤ 3) but inferior in patients with more severe stroke (NIHSS score of > 3). However, the mild stroke group still showed an increase in bleeding with triple therapy, so there was still no net benefit.

These results mean that the rationale for continuing POINT is greater than ever.

International Stroke Conference (ISC) 2017. Abstract LB4. Presented February 23, 2017.

PARFAIT

Bristol-Myers Squibb (BMS) sponsored the **P**rotease **A**ctivated **R**eceptor-**4** (**PAR-4**) **A**ntagonist for **I**schemic stroke and **T**IA (PARFAIT; NCT 02671461) trial. PARFAIT sought to determine whether study drug BMS-986141, a PAR-4, was safe and effective in reducing the recurrence of stroke when given daily to people who recently had a stroke or a TIA and are also taking acetylsalicylic acid (also known as aspirin or ASA) to treat the stroke or TIA. The PARFAIT trial has been terminated.

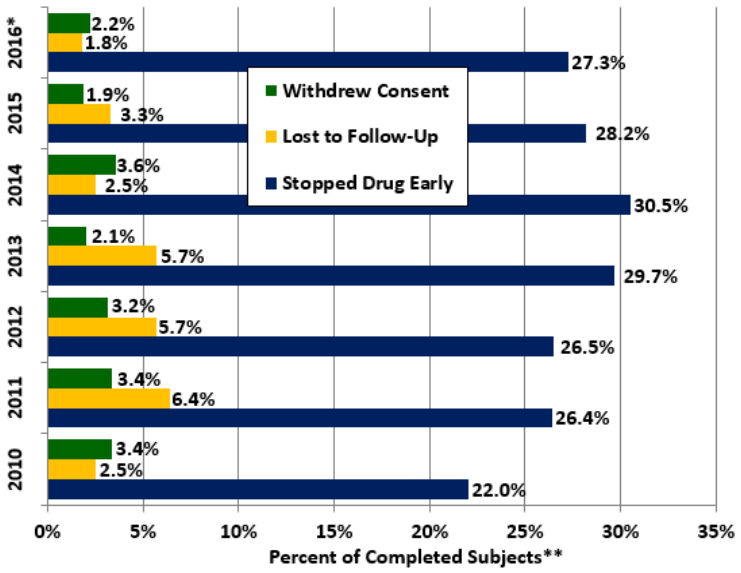
Available at: https://clinicaltrials.gov/ct2/show/NCT02671461

Upcoming POINT Data Freeze

There will be a data freeze on ***Friday, May 19, 2017***. Please continue to make sure your site is up to date with data by following the instructions that the WebDCU team provided by email for Open DCRs and Spoke Data Due, Visits Past Due, and Rule Violations.

For any questions, please contact
Adam Henry at henryad@musc.edu or
Aaron Perlmutter at perlmutt@musc.edu

CONSENT WITHDRAWALS, LOSSES TO FOLLOW-UP, AND STOPPED STUDY DRUG EARLY



*May include subjects that have reached 90 days, but have no end of study form.
**Includes those reaching 90 days or completing the end of study form.

Data as of March 28, 2017

New FAQ for POINT

Q. I have an acute TIA patient with a history of atrial fibrillation who had a traumatic subdural hematoma while anticoagulated. The atrial fibrillation was treated with catheter ablation and the patient is now in normal sinus rhythm.

A POINT protocol exclusion criterion states:

> Clear indication for anticoagulation (e.g., warfarin, heparin) anticipated during the study period (atrial fibrillation, mechanical heart valve, deep venous thrombosis, pulmonary embolism, antiphospholipid antibody syndrome, hypercoagulable state).

While we normally would anticoagulate this patient at high probability of a cardioembolic index TIA, and at ongoing high-risk for further cardioembolism, we do not plan to anticoagulate the patient because of the frequent falls and the patient's past history of a traumatic subdural hematoma. So, may we enroll this patient?

A. No. The intent of this criterion was both "a clear indication for anticoagulation" and the view that antiplatelet therapy would work differently in patients with cardioembolism.

Biomarker Specimen Collection Kits

Please remember to periodically check the expiration dates on any unused biomarker kits at your site. You can replace expired kits by contacting the appropriate Covance Site Support Associate at the corresponding email address:

United States and Canada: MonitoringUS@Covance.com
Europe: MonitoringEurope@LabCorp.com
Australia: SiteSupportAPAC@Covance.com

Note: Mexico and New Zealand are not currently participating in the Biomarker Ancillary Study.

ClinicalTrials.gov

Please note that enrolling POINT sites are now listed on ClinicalTrials.gov **(NCT00991029).**

The site list is also available at on the POINT Website (POINTTrial.org) under *Participating Sites*.