

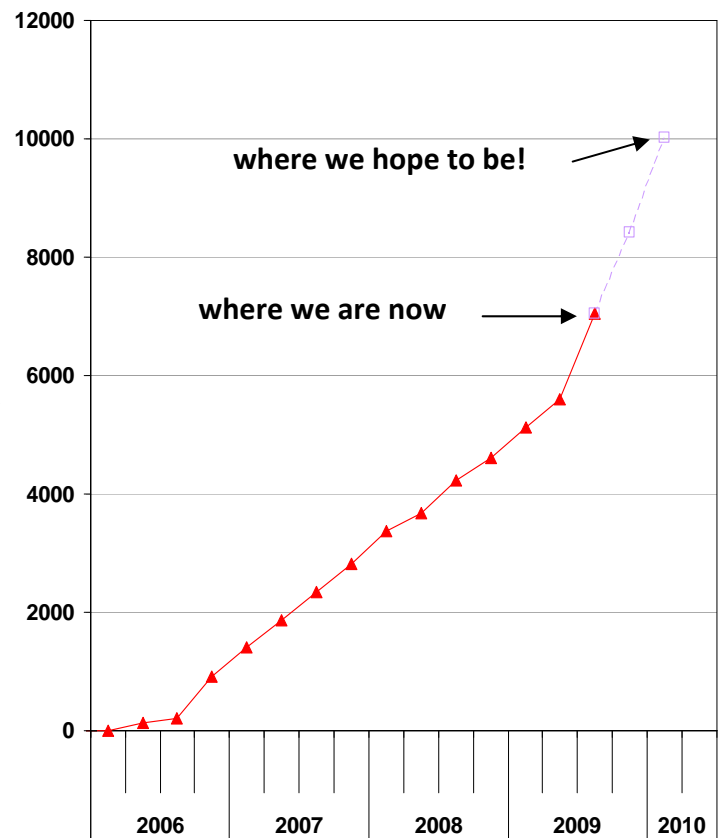
## The newsletter of the ASCEND Study

Winter 2009/10 – Number 6

Welcome to the sixth edition of **HIMALAYA** – the newsletter of the ASCEND study. Thank you very much for your interest and participation in the ASCEND study so far. If you have not received **HIMALAYA** before, we hope this newsletter will educate and entertain you, and tell you more about the study that you are playing such a vital role in. As you probably know, aspirin has been in the headlines again and we discuss this overleaf so please read on!

### ASCEND RECRUITMENT IS ALMOST COMPLETE...

There are now over 7,500 people taking part in ASCEND which means we are well on the way towards our target of 10,000 participants. ASCEND is now the largest ever study of aspirin in people with diabetes. As you can see from the graph, our recruitment has actually accelerated in 2009 so we hope to have finished this by early 2010. This means that we hope to be able to announce the completion of recruitment in the next issue of **HIMALAYA**. This has been a huge amount of work both here at the coordinating centre in Oxford but also in many GP surgeries around the UK. However, we are particularly grateful to each and every one of our participants who make a study like this possible. Studies like ASCEND can provide very reliable information so that doctors can provide better care now and for years to come, but they rely on people like you being willing to participate so thank you for all you are doing!



### ...BUT RECRUITMENT IS ONLY THE BEGINNING!

Getting 10,000 people into the study is only the first part of this study. As you will read overleaf, if we are to get a clear answer from ASCEND it is vital that as many people as possible take their study treatments as regularly as possible. The picture opposite shows *Cho Oyu* which is the sixth highest mountain in the world, and the easiest mountain over 8,000 metres (26,240 feet) to climb. Apparently you can drive to base camp!



#### Where can people find out more?

They can:



visit the ASCEND website: [www.ctsu.ox.ac.uk/ascend](http://www.ctsu.ox.ac.uk/ascend)



call a member of the study team: (Freefone) 0800 585323

## ASPIRIN IN THE NEWS

There has been lots of press coverage about aspirin in the news over the past few months. There is uncertainty about when the benefits of aspirin (i.e. preventing heart attacks and strokes) outweigh the potential harms (i.e. bleeding). In people with a previous heart attack the benefits clearly outweigh the risks, but in healthy people the benefits and risk

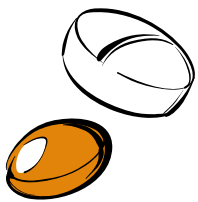


are about equal (so aspirin is no longer recommended as you may have heard in the news). However, people with diabetes are somewhere between these two and there is no reliable evidence to say whether or not aspirin should be used. This is what ASCEND is trying to find out and we are immensely grateful for your participation which makes this possible.

## HOW CAN I MAKE ASCEND A SUCCESS?

As you know, ASCEND is trying to answer two important questions: do aspirin or omega-3 fatty acids (“fish oils”) safely prevent heart attacks and strokes in people with diabetes? Like all commonly used treatments it is likely that any effect they have will be moderate in size and this is one reason why we need a large study. However, having lots of people in the study is only the first step.

For ASCEND to get a clear answer, we also need to have good “adherence” to study treatment. This means that we need as many as possible of our participants to take their study treatments every day. For example, if everyone stopped taking their study white pill, then instead of comparing about 5,000 people taking aspirin with 5,000 people taking placebo (or “dummy” aspirin), we would be comparing nothing with nothing. Obviously, in this rather extreme example we would never hope to get a useful answer.



Clearly this is an exaggeration, but every participant who stops one or other study treatment reduces the ability (or “power”) of the study to give a clear answer. There are often very good reasons to stop study treatment. For example, if you have a heart attack or stroke then we know that aspirin is a very good treatment for you so it would be important for you to take aspirin on prescription and stop your study white pill.



However, it may just be that you’ve forgotten to take your study treatments for a while and wonder whether it’s worth restarting. The answer is definitely “yes!”, because every time a study participant takes their study treatment it helps the study. We are very excited about the information that ASCEND will provide for doctors and hope that you are too. With your help, we can improve the care of people with diabetes around the world.

## IS THERE ANYTHING ELSE I CAN DO?

It is also vitally important for ASCEND that we know what happens to you, regardless of whether you are taking study treatment or not. This is why we send regular questionnaires and we would be very grateful if you could continue to complete and return these to us. It is the information on these that will help us work out whether the study treatments are safe and effective. It may be that something changes with your health or other



treatments in between questionnaires; please do call 0800 585323 to tell us about it.

Finally, tell anyone else you know with diabetes about the study and help us reach our target of 10,000 people! Thank you for all your help!



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