

## The newsletter of the ASCEND Study

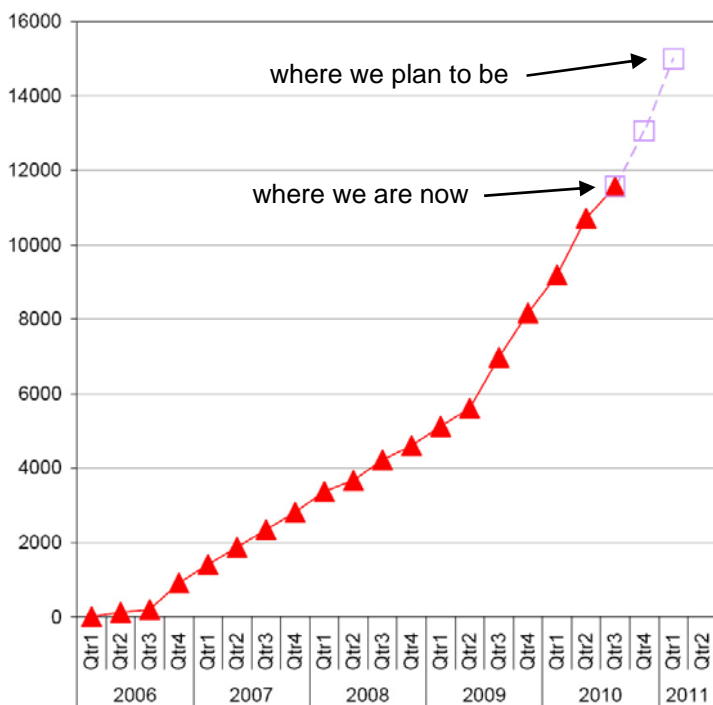
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Welcome to the seventh edition of **HIMALAYA** – the newsletter of the ASCEND study. Thank you very much for your interest and participation in the ASCEND study so far. If you have not received **HIMALAYA** before, we hope this newsletter will educate and entertain you, and tell you more about the study that you are playing such a vital role in. If you have, then read on and find out what we have been up to since the last issue.



The picture opposite shows *Mt. Dhaulagiri*, which is the seventh highest mountain in the world and, apparently, one of the deadliest.

### ASCEND RECRUITMENT CONTINUES...



As you probably remember, when ASCEND started we expected that we would need to recruit at least 10,000 people into the study in order to provide reliable answers to the questions it is addressing. However, it now seems sensible for ASCEND to continue until at least 15,000 participants have been recruited and followed up (and we are currently seeking the necessary approvals to allow this). This increase is needed because fewer people than expected have had heart attacks or strokes during the study, which is obviously good news. However, this has reduced the ability (or “power”) of ASCEND to detect any effects of the study treatments. In order to improve the “power” we have had to increase the number of people taking part in the study so that a clear answer can be achieved. ASCEND is already well on the way to reaching its new target. Currently, there are nearly 12,000 people who have agreed to take part in ASCEND.

### WHY DOES ASCEND NEED TO TAKE SO LONG?

We need to follow up all our participants for at least five years because — like many modern medical treatments — the effects of the ASCEND study treatments are likely to be moderate in size. This means that it may take this long (or perhaps longer) for a clear difference to appear (if there is one) between the groups who are taking active treatments and the groups taking placebo (‘dummy’) treatments. It is, therefore, very important for you and your fellow participants to continue in the study long enough for us to be able to detect any treatment effects.

#### 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

## THE ASCEND TEAM

In each issue of **HIMALAYA** we hope to introduce you to different members of the ASCEND team. The two people in this picture (Kevin Murphy and Jill Barton) are the senior administrative team who oversee the day-to-day running of ASCEND. They have overall responsibility for the team who send out the tens of thousands of questionnaires, liaising with the company who package and post the study treatments, coordinating the computer programming which makes ASCEND possible and many many other tasks. ASCEND would rapidly grind to a halt without all their daily input.



## ASCEND REACHES THE INITIAL TARGET OF 10,000 PARTICIPANTS

When we asked to interview Tony Rundle, the 10,000th participant recruited into the ASCEND trial, he replied, "I am always ready, as Rumpole of the Bailey says, to 'tell them the tale!'" And tell us he did.



Tony, 77, lives in Carshalton, Surrey. While he has lived mainly within the London area, he has also travelled widely. He has a mobile home in Normandy, visiting whenever he can. It is old and far from fancy, he says; a French neighbour sometimes offers to help push it over a cliff.

Leaving school at 16, Tony worked in a travel agency until National Service in the Army Medical Corps. While he was stationed at Aldershot, troops returned from North Africa with smallpox. Tony and his colleagues had their work cut out inoculating hundreds of soldiers passing through the camp. Perhaps this laid the foundations of Tony's obvious interest in health and his willingness to volunteer as a participant in medical research trials. In the 1990s, he volunteered for the Heart Protection Study, a large trial of simvastatin to reduce cholesterol levels in people at high risk of cardiovascular events, carried out, like ASCEND, by the Clinical Trial

Service Unit in Oxford. Its results, published in 2002, showed significant risk reduction in all participant groups, and changed medical practice around the world.

Next, Tony worked for trading companies in London and specialised in shipping at one trading in sugar. This saw him travel abroad on occasions, including three stints in New York. When he was 58, he was made redundant by new proprietors but another company realised that with his experience and know-how, he was the ideal man to help train staff. He duly worked on until 70.

Tony, a widower, still lives a very full life, undeterred by diabetes and other health problems. He keeps in touch with many friends and relatives, and has made three visits to see family in Australia. We wish him many years more active life.

## HOW CAN I MAKE ASCEND A SUCCESS?

You have a major role to play to help ASCEND provide a clear answer about whether aspirin and fish oils safely prevent heart attacks and strokes in people with diabetes. Firstly, please complete the follow-up questionnaires we send every six months. To ensure that ASCEND gives reliable answers, it is vital that we know what happens to you, even if you're not taking study treatments. Secondly, please take your study treatment. If you have been told to stop either treatment (or been put on aspirin or drugs such as warfarin or clopidogrel), please call to let us know (if you haven't done so already). With your help, we are confident that the ASCEND study can provide valuable information that will improve the care of patients with diabetes world wide.



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ASCEND is coordinated by the *Clinical Trial Service Unit* of the *University of Oxford*



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