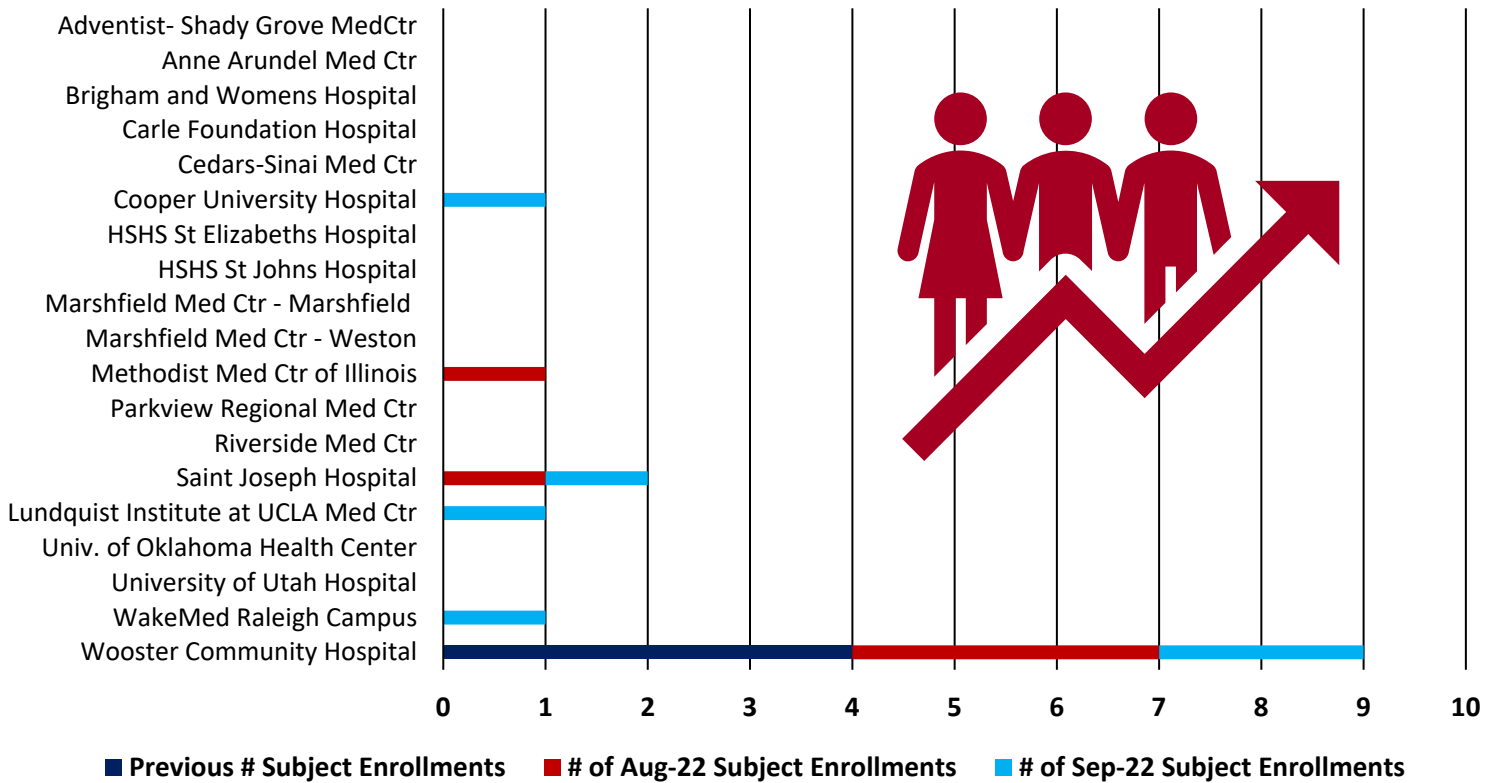


MESSAGE FROM THE TRIAL TEAM

Thank you to all our CHANGE AFib trial sites for their hard work and commitment to answering the important question of whether early treatment with dronedarone is more effective than usual care for the prevention of cardiovascular hospitalization or death in patients with newly diagnosed atrial fibrillation. With this trial, we have the opportunity to change treatment guidelines for patients with newly diagnosed atrial fibrillation in an effort to improve the patient outcomes and quality of life. As a compliment to the Fireside Chats, the monthly newsletter will highlight trial milestones, challenges, as well information to keep your trial team up to date.

TRIAL LEADERBOARD



WELCOME TO OUR AUGUST ACTIVATED SITES!

- Saint Joseph Hospital (Lexington, KY)
- Riverside Medical Center (Kankakee, IL)
- UCLA Medical Center – Harbor (Torrance, CA)
- University of Utah Hospital (Salt Lake City, UT)
- WakeMed Raleigh Campus (Raleigh, NC)



CONGRATULATIONS FOR AUGUST FIRSTS!

1st Randomization @ Site

- Methodist Med Ctr of Illinois (Peoria, IL)
- Saint Joseph Hospital (Lexington, KY)



1st Site to Randomize 2 Subjects in ONE DAY!

Wooster Community Hospital (Wooster, OH)

MONTHLY FAQ SPOTLIGHT

1. **What is considered ‘prior antiarrhythmic drug therapy’ and how does this relate to Exclusion Criteria #1?**
 - Antiarrhythmic drug therapy, as it pertains to CHANGE AFib, is defined as chronic drug therapy (>7days). One time dosing of an antiarrhythmic drug or pharmacologic cardioversion are not considered ‘prior antiarrhythmic drug therapy’, nor are they considered exclusionary for CHANGE AFib.
2. **What is a list of ‘approved’ antiarrhythmic drugs for this trial?**
 - If a patient has been on outpatient antiarrhythmic drug therapy for AF or AFL they are not a candidate. Antiarrhythmics include class IC agents (flecainide, propafenone), class III agents (dofetilide, sotalol) or multichannel blockers (amiodarone, dronedarone).
 - Beta-blockers (metoprolol, atenolol, carvedilol, propranolol, bisoprolol, etc) or calcium channel blockers (verapamil, diltiazem) are permitted in either arm.
 - If a patient has short-term/IV antiarrhythmics in the ER or hospital (e.g. ibutilide, procainamide, amiodarone, etc as an inpatient) for cardioversion or acute control of AF only, they are eligible.
 - If a patient is failing therapy after enrollment and their provider wants to start an antiarrhythmic or stop dronedarone and switch to a different AAD then this is permissible as per protocol.



CALENDAR OF EVENTS

FIRESIDE CHAT DATES:

- Thurs, September 29th
3-4pm ET
 - Thurs, October 27th
3-4pm ET
 - Mon, November 28th
3-4pm ET
 - Mon, December 19th
3-4pm ET
- Don't Forget! Registration Required for ALL Fireside Chats!*

IRB CONTINUING REVIEW:

- October 29th - *More information forthcoming*

CONFERENCES:

- Scientific Sessions:
November 5-7th in Chicago, IL



IN CASE YOU MISSED IT!

- **New Screening Log Template** – Launched on 7/14/22 and can be found [on the trial website](#).
Please remember to submit your weekly log to your site manager by 12pm ET on Mondays.
- **Past Fireside Chats** – Recordings and handouts from past Fireside chats can be found [on the trial website](#).
- **Call for new CHANGE AFib trial sites!** – As we work to reach our goal of activating 200 sites, we ask that you promote trial participation amongst your peer networks and connect us with any interested sites!



! IMPORTANT TRIAL CONTACTS !

General Trial Questions	CHANGEAFib@heart.org
AHA Site Managers	Crystal.Glodek@heart.org ; Jack.Goldberg@heart.org ; MarieL.Dronson@heart.org
REDCap Questions	CHANGEAF@duke.edu or Tel: 919-668-9339
GWTG-AFib (Trial EDC) Questions	Enrollment Site Managers or CHANGEAFib@heart.org
Contracting Questions	CHANGEAFibContracting@heart.org
Invoicing Questions	CHANGEAFibInvoicing@heart.org
Adverse Event Reporting	Sanofi PV at 1-800-633-1610