



# Risk of Aneurysm Rupture (ROAR) Study

Newsletter 3

Jul 2023

## Welcome to ROAR

The ROAR Study has progressed well since the last Investigator Meeting in March on many fronts. We have presented at iSAH, received our first tranche of HES data ahead of time and seen a flurry of units opening for recruitment. Our focus right now is completion of baseline data collection this summer.

**Data collection deadline** - All baseline data collection is due to close 31<sup>st</sup> July 2023. Please have a final push to complete your datasets. If you think this isn't achievable then let us know ASAP and we can try to provide additional support.

**Site set up** - We are pleased to say that St Georges, Imperial, Preston, Birmingham and Romford have all opened since the last newsletter.

**Initial HES results** - We are very excited to have received the first batch of HES data which arrived only 2 months after the application approval, and considerably less than the 6 months we were quoted. It is likely this was due to ROAR being selected for a trial of a new pathway for HES searches. We now have hospital admission and death data for 6,700 patients from the first 9 units who completed their data collection.

Data collection complete	
Southampton	1,590
Manchester	1,472
Leeds	804
Plymouth	610
Bart's	604
Cardiff	528
Bristol	521
Stoke	429
Middlesbrough	401
Romford	303
Cambridge	157
Total	7,419

**HES validation** - We have used the HES data to validate the ROAR study design in the Southampton cohort. We found that HES identified all but one of SAH events that were known to the clinical team (39 of 40 events). We have gone on to verify all events not previously known to the team and identified via HES and found this identifies an additional 13 rupture events that would otherwise not be known showing the value of HES for this application. From this we estimate that HES and local records combined will identify 99.3% of all aneurysm ruptures that occur during follow-up comparing very favourably to conventional prospective cohort studies and validating the study design. We plan to write this up for publication in advance of the main ROAR study.

Set up and collecting data	
King's	1,229
Queen Square	890
Liverpool	608
Birmingham	500
Hull	500
Brighton	446
St George's	400
Nottingham	336
Imperial	222
Preston	210
Sheffield	176
Oxford	20
Total	5,539

**International Subarachnoid Haemorrhage Conference** - The ROAR study and the above validation was presented at the 16<sup>th</sup> iSAH conference hosted by Duke University, USA with very positive feedback from amongst other members of the original ISUIA and PHASES study teams.

**Rupture validation** - Now we have tested the HES verification methodology we will work with one or two units to trial this externally over summer before a drive to verify rupture events in the 8 other units that now has HES results available in September.

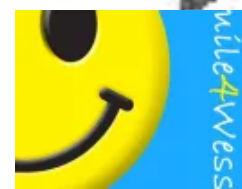
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**Website:** [www.roarstudy.co.uk](http://www.roarstudy.co.uk) ISRCTN: 17658526

In set up	
Dundee	N/A
Edinburgh	N/A
Glasgow	N/A
Newcastle	N/A

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## Timeline of events

### Data collection/verification

### National Databases

Pilot case verification – all ruptures will undergo verification of data accuracy by a senior team member (i.e. PI/SpR). This can begin using the known ruptures from local data

Oct 2022

Pilot HES search application ✓

Dec 2022

Pilot HES search approval – the pilot search will use the patients identified so far (approximately 10,000) and link them to the HES database. This will allow early data cleaning and fault finding for the final search ✓

Complete R&D set ups

Mar 2023

Apr 2023

Pilot HES data released ✓

May 2023

Jun 2023

Full HES search application ✓

### Complete baseline data collection

Pilot cases from first HES search released to units for verification of potential rupture event

Jul 2023

Aug 2023

Full HES search approval

Dec 2023

Full HES data released

Full list of cases for verification

Jan 2024

Complete case verification

Apr 2024

Initial study results

Aug 2024

\*\*Items in blue apply only to units set up and with eligible patient data available to be included in the pilot search.