Award Number: W81XWH-11-1-0831

TITLE: Application of Near Infrared Spectroscopy, Intravascular Ultrasound and the Coronary Calcium Score to Predict Adverse Coronary Events

PRINCIPAL INVESTIGATOR: Dr. Charles Lambert

CONTRACTING ORGANIZATION: Florida Hospital Tampa, Tampa FL 33613

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PREPARED FOR: U.S. Army Medical Research and Materiel Command Fort Detrick, Maryland 21702-5012

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### Introduction

The aim of the present project is to

- 1. Utilize near infrared intra-coronary spectroscopy as an adjunctive technique during cardiac catheterization to identify potential vulnerable plaque morphology
- 2. Relate its presence to intermediate and long-term outcomes in patients defined as angina, myocardial infarction, death, congestive heart failure, stroke and need for revascularization over five years.
- 3. To compare near infrared intra-coronary spectroscopy data to that from coronary calcium scoring, angiographic findings and intracoronary ultrasound in predicting those outcomes in #2.

### Keywords

coronary artery disease, intravascular ultrasound, near infrared spectroscopy, calcium scoring

### Accomplishments

The original award in 2011 was revised under the direction of scientific officers several times. Patient recruitment began in 2014 after final approval by all involved. Subsequently, 1126 patients were screened for inclusion in the trial.

The first patient was enrolled on 6/9/2014. The initial protocol was designed for five year follow-up to allow adequate statistical power. Thus, five-year follow-up for the first patient enrolled would occur in 2019.

Successful enrollment of 55 patients with coronary angiography, coronary calcium scoring, intravascular ultrasound examination, and near infrared spectroscopy was accomplished.

Follow-up of all enrolled patients as of December 2016 (end of study) has revealed only nine interim events. Only one of these was a cardiovascular death. Thus, no relationship to any study variable can be made at this early date.

Event rate in this patient cohort has proven to be exceedingly low at the midpoint in planned five year follow-up. No significant nine relationship between any anatomic variable can be made with only one patient having a significant cardiovascular event in follow-up. Thus, data are negative at this point, however, continued local follow-up is planned pending funding.

#### Impact

Successful application of simultaneous coronary angiography, intravascular ultrasound, and near infrared spectroscopy in a significant number of patients undergoing elective cardiac evaluation is significant. This represents an ambitious invasive strategy for evaluation which has been accomplished in this study with no significant complications. This will have impact in applying such methodologies to further pathophysiologic study in humans.

### Changes/Problems

None

### Products

No significant products were involved in this study.

### Participants and other collaborating organizations

No other collaborating organizations were involved in the study. Participants included Dr. Charles Lambert (PI), Janice Shirley (administration), Dr. Brian Nordgren (physician's assistant and research coordinator), and part time participation by covering research coordinators. Coinvestigators listed at a local IRB level included attending physicians referring patients for study.

### **Special reporting requirements**

None

## Appendices

### IRB final report:



Dr. Kinan C. Patel Research Institute The skill to beal. The spirit to care.\*

## Investigator's Progress Report

Continuing Review / Interim Report / Final Report of Research

Florida Hospital Tampa Bay Division IRB

Full Board Con	ntinuing Review Instructions:	Expedited Continuing Review Instructions:			
	deadline: All Part A & B documents due on month for review on the 3 <sup>st</sup> Tuesday.	If the protocol is permanently closed to the enrolliment of new participants, all participants have completed all research-related therapy / interventions (labs, x-rays, etc.), and the research remains			
All documents are to be submitted under (2) separate Part A & B email attachments or 17 collated paper copies.		active only for long-term follow-up of participants: -OR- No participants have been enrolled and no additional risks have been identified; -OR- The remaining research activities are limited to data			
Ensure all documents and revisions are clearly identified, and in the following order:		analysis only; your continuing review may be eligible for Expedited Review (45 CFR 46.110). Expedited submissions may be submitted at time via Email or 3 paper copies to the IRB.			
	nstructions: If the project is complete', submit this form and I out, and any publications and/or data analysis reports in	al check "Final Report - Termination Requested". The form must be chuled with the submission.			
Part A 🔀 #1.	<ul> <li>Continuing Review Application filled out completely, and signed. Please note that blanks and/or insufficient information may result in a delay of your review/approval.</li> </ul>				

#### **Contact Information**

Today's Date: 31OCT2016 Date of Initial Review: 1				Last Continuing Review: 05MAY2016 ast Seen by the IRB: 17JUN2016			
Type of Submission:	Continuing Review		Interim Report 🛛 Final		al Report - Termination requested		
Type of Review Requested:	🛛 Full Review 🗌 Expedito		ited Review	d Review			
Protocol Information:	Title: Proposal 10169004 - Application of Near Infrared Spectroscopy, Intravascular Ultrasound and the Coronary Calcium Score to Predict Adverse Coronary Events						
	Protocol #: 5/2012	Prob	Protocol Version (current): 5/2012				
Study Type:	Device	IDE #:	IDE #:		Phase#:		
	Drug	IND #:	IND #:		Phase #:		
	Post Market Approval Study	Registry		Prospective Data Review	Data Review		
	Investigator Initiated Study Please describe type of trial:						
	Other (please describe):						
Principal Investigator:	Charles Lambert, MD, PhD MBA						
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Telephone:	(813)615-7200 ext. 50321		Fax:	(513)613	5-7574		

#### Current Status of Project (check only one):

Part A Z 72. Please summarize activity for all study types. "For data review studies, summarize the number of charts, etc. that were reviewed.

DOD Final Report Nov 20163

<sup>\*</sup> No participants on therapy or in follow-up, no data collection being done; and no data queries being resolved.