1.a. Full Title: Prognosis after MI and Stroke: Survival, Recurrence and Comorbid Events in three large prospective studies

b. Abbreviated Title (Length 26 characters): MI and Stroke Prognosis

2. Writing Group:
   Writing group members: Sean Coady, Paul Sorlie, Wayne Rosamond, Richard Kronmal, Christopher O’Donnell, Robert Kaplan and Thomas Thom

I, the first author, confirm that all the coauthors have given their approval for this manuscript proposal. __SC__ [please confirm with your initials electronically or in writing]

First author:
Address: 2 Rockledge Center
       6701 Rockledge Dr. MSC 7934 Rm 8163
       Bethesda, MD 20892
       Phone: 301-865-5520       Fax: 301-480-1455
       E-mail: coadys@nih.gov

Corresponding/senior author (if different from first author correspondence will be sent to both the first author & the corresponding author):
Address:

     Phone:    Fax:
     E-mail:

3. Timeline: This analysis will be conducted at NHLBI and will proceed as soon as the manuscript proposal is approved. Data analysis is expected to be completed in three to four months.

4. Rationale: The Incidence of first MI, Stroke, and CHD death have been well described from population based studies. However there is a general lack of descriptive studies on longer-term survival, recurrence, and incidence of comorbid events after an incident event. Descriptive studies of prognosis are
frequently limited to single geographic areas, race groups, age groups, or are limited to only short-term prognosis\textsuperscript{6-12}. Short and long-term survival, event recurrence rates, and incidence of comorbid events from a geographically, racially and age diverse population are needed to effectively characterize prognosis after an incident event. Tracking the benefits of interventions designed to prolong survival or prevent a recurrence require that baseline values be established through which the benefits of interventions can be compared.

Reference List


5. **Main Hypothesis/Study Questions**: Purpose of the study: Describe in the form of tables and/or Kaplan-Meier curves the observed survival, recurrence, and incidence of comorbid outcomes in subjects with a validated incident MI (Stroke) over both the short-term (28d and 1 year) and long term (5 year). Study questions include: Does the survival curve after an incident MI (Stroke) differ by sex or by race within sex? Does Stroke occur more frequently in men or women after an incident MI? What is the short-term survival (28d and 28d-1 year) for men and women after an incident MI (Stroke)? What is the long-term prognosis (28d-5 years or more) for men and women after an incident MI (Stroke)?

6. **Data (variables, time window, source, inclusions/exclusions)**: The data for this study will be pooled from the ARIC, Framingham and Cardiovascular Health Study (CHS). Study participants with a prevalent MI (recognized or unrecognized) will be excluded, and subjects followed for an incident, adjudicated MI. In order to make the Framingham Study contemporary with the ARIC and CHS studies, only participants known alive without a recognized or unrecognized MI on January 1, 1986 will be included. For prognosis after Stroke, subjects with a prevalent Stroke at baseline (or by January 1, 1986 for Framingham) will be excluded. Age at event will be calculated and Kaplan-Meier analysis used to characterize survival after an incident event by sex, race and age at incident event. In addition to survival and recurrence, incident Stroke rates after first MI will also be calculated. Year of event and Stroke type will be included in the analysis.

7.a. Will the data be used for non-CVD analysis in this manuscript?  ____ Yes  X  ____ No

b. If Yes, is the author aware that the file ICTDER02 must be used to exclude persons with a value RES_OTH = “CVD Research” for non-DNA analysis, and for DNA analysis RES_DNA = “CVD Research” would be used?  ____ Yes  ____ No

(This file ICTDER02 has been distributed to ARIC PIs, and contains the responses to consent updates related to stored sample use for research.)
8.a. Will the DNA data be used in this manuscript?  ____ Yes  ____ No

8.b. If yes, is the author aware that either DNA data distributed by the Coordinating Center must be used, or the file ICTDER02 must be used to exclude those with value RES_DNA = “No use/storage DNA”?  ____ Yes  ____ No

9. The lead author of this manuscript proposal has reviewed the list of existing ARIC Study manuscript proposals and has found no overlap between this proposal and previously approved manuscript proposals either published or still in active status. ARIC Investigators have access to the publications lists under the Study Members Area of the web site at: http://www.csecc.unc.edu/ARIC/search.php  ____ Yes  ____ No

10. What are the most related manuscript proposals in ARIC (authors are encouraged to contact lead authors of these proposals for comments on the new proposal or collaboration)?
No proposal appeared to be reasonably related.

11. a. Is this manuscript proposal associated with any ARIC ancillary studies or use any ancillary study data?  ____ Yes  ____ No

11.b. If yes, is the proposal
____ A. primarily the result of an ancillary study (list number* _________)
____ B. primarily based on ARIC data with ancillary data playing a minor role (usually control variables; list number(s)* _________ _________ _________)

*ancillary studies are listed by number at http://www.cscc.unc.edu/aric/forms/

12. Manuscript preparation is expected to be completed in one to three years. If a manuscript is not submitted for ARIC review at the end of the 3-years from the date of the approval, the manuscript proposal will expire.