



EURHOBOP project Minutes

Teleconference 13-04-2011

Minutes

Participants:

Ana Azevedo (FMUP)
Antti Malmivaara (THL)
Danilo Fusco (DEASL)
Dimitrios Farmakis (HCS-ATTIKON)
Inge Kirschberger (HMGU)
Isaac Subirana (IMAS-IMIM)
Jaume Marrugat (IMAS-IMIM)
Joan Vila (IMAS-IMIM)
María Grau (IMAS-IMIM)
Marina Torre (ISS)
Pascal Garel (HOPE)
Roberto Elosua (IMAS-IMIM)
Jean Ferrière (AEPMCV)
Yolanda Ferrer (IMAS-IMIM)

1) Welcome and previous meeting minutes approval.

The minutes of the previous meeting are approved.

2) WP progress by responsible PI.

- WP1 (Coordination, JMarrugat):

The Coordinator visited partner HMGU last month to prepare the EURHOBOP evaluation meeting. This evaluation will be done by the ESAB (External Scientific Advisory Board), and the meeting will be held in Munich next June 6th.

Dr. Marrugat talked to the EURHOBOP EAHC officer, Mr Margetidis, as we have no news neither on the amendment to the EURHOBOP contract requested last October, nor on the First Annual Report and the funds for the second period. Next Thursday, April 14th, Dr. Margetidis will contact the Coordinator to explain all these issues, but he advanced that there is no problem with the project.

An email to all the EURHOBOP contacts is already being sent weekly with the recruitment of the corresponding country by hospital.

- WP2 (Dissemination, MTorre):

M Torre updates on the website changes.

She asks participants to send news to be published on the website.

ISS has started writing a contribution for their Bulletin which is available online on the ISS website, to disseminate the project and to invite new hospitals interested in participating in other Italian regions than Latium.

- **WP3 (Evaluation, CMeisinger):**

The EURHOBOP ESAB evaluation meeting is scheduled for June 6th 2011 in Munich. JM informs that we already have the three external reviewers confirmed: (Ricard Tresserras-Health Plannification, from Barcelona; François Paillard-Cardiology, from France; and Bern Brüggjenjürgen-Health Planning, from Berlin). JM presents the provisional agenda and the questionnaire for the evaluators.

- **WP4 (Benchmarking function, JMarrugat):**

Recruitment follows at satisfactory rhythm but we need to ensure that data collection is completed by September 2011 since a deliverable is due on Feb 2012. DEASL and THL will send their databases by June/July. FMUP will have 8 hospitals by then and the last two by September.

For WP5 AND WP6 we may not need the complete database to analyze their objective. Probably with the database as updated and "cleaned up" as per March 2011 will do.

M Cabañero will send reports on the repeated IDs to every PI.

Queries on the recruited patients:

J Vila has constructed an excel file for each country with several sheets each. There is one sheet with the variable definition and then one sheet per hospital in the country. Each sheet shows all the inconsistencies in the IDs of the corresponding hospital.

This excel file, per country, will be sent to each IP so that they can check these inconsistencies and correct them.

- **WP5 (Severity data availability, JFerrières):**

J Vila is closing the DB with complete QC with the data arrived up to March 2011 for interim analysis. The design for WP5 is still pending (deliverable due on Jan 2012).

J Vila will send an unclean database as a first step. He needs to know the format AEPMCV prefers for this database. J Ferrières will ask Vanina Bongard about it and will respond.

The Coordinator will visit AEPMCV next month and work on this package.

- **WP6 (Sex inequalities, MDavoli):**

D Fusco will send their data by the end of June 2011. DEASL will start with the preliminary analysis with the same data sent by J Vila.

The interim analysis design and execution is pending, (deliverable due on Dec 2011)

J Marrugat suggests having a meeting with DEASL in Rome previous to the Porto one.

- **WP7 (Cost Analysis, UHäkkinen):**

J Marrugat will send the email from Timo Seppälä with all the materials (the cover letter and the email text proposed) that every EURHOBOP partner should forward to the PI in the 10 EURHOBOP participant hospitals in their country.

- WP8 (Benchmarking assessment with hospital real-life data, PGarel):

P Garel comments on his progress with his contacts with HOPE members national hospitals federations in Europe. He first contacted some of the member states not involved in the other part of the project as well as France.

In six member states, a positive feedback was originally received and a person had been identified to be responsible for dissemination to hospitals: Bulgaria, Estonia, Denmark, France, Hungary and Slovenia.

In four of them the HOPE member suggested that in their country the hospitals would answer individually and a contact person was identified to develop this.

In the two others (Denmark and France) it was expected that it would be by providing databases gathering information from several hospitals together.

The Danish Regions (HOPE member and owner of all public hospitals) sent an expression of interest that was answered by J. Marrugat. No further progress made so far. Then P Garel contacted them again. They finally declined the invitation to participate because they contacted the Danish cardiologists' members of the European Society on Cardiology (ESC). The Danish cardiologists just said there were too many projects and would only support one of the ESC.

The Danish clinical registries are 'owned' by the Danish Regions both with respect to data security and in the financial sense. However the ownership of the information in the registries is shared between the medical scientific societies, the Regions and the health authorities. Therefore the Danish Regions have to get acceptance from the professionals. A second contact was made with the cardiologists but they stuck to their position.

The issue is now to secure France to show to other countries that it is possible and easier to provide such information.

In Germany and UK, on the contrary, has given a negative feedback, as they seem reluctant to benchmarking but also in the UK because of the major reform going on.

Germany will be contacted again and now the next countries will be Sweden, the Netherlands, Latvia, Lithuania, Slovakia and Czech Republic.

He also advertised the project at EU level presenting the project to the Heart network, an organization that will not directly help in convincing hospital but that is an important opinion leader in the field.

Then the next step will be to promote it in countries in the project how to handle it.

J Marrugat will be in touch with P Garel from time to time to follow this issue.

3) All other business

EURHOBOP Second Annual Meeting. Porto, October 10th and 11th, 2011.

J Marrugat comments on the provisional agenda already sent to partners.

This agenda is approved by all partners.

The Coordinator will visit FMUP partner in July to organize the meeting together with the host.

4) Next teleconference

Monday, June 27th at 15:00 Barcelona time.