

Recruitment 11/06-04/08

UK 392

Lincoln	41
Nottingham City	25
Aberdeen	23
Bishop Auckland	20
Boston Pilgrim	18
Blackpool Victoria	18
Stockport Steppg Hill	13
Stoke-on-Trent	13
Edinburgh Western	9
Glasgow Monklands	9
Newham General	5
Wolvhmpn, New Cross	4
Royal Devon & Exeter	4
Scarborough	4
Doncaster	3
Derby Hospitals	3
Torbay	2
Yeovil District Hospital	2
Liverpool Aintree	2
Harrogate	2
Borders Melrose	2
Scunthorpe	2
Staffordshire General	1
Edinburgh Royal	1
Glasgow Royal	1
London Kings	1
Glasgow Stobhill	1
Coventry	1
Southport & Ormskirk	1
Barnsley	1

China 92

Wenzhou	87
Tian Tan	5

New Zealand 19

Dunedin	16
Auckland	1
Hawkes Bay	1
Hutt Hospital	1

Singapore 12

Sri Lanka 12

Canada 10

Malaysia 7

Poland 7

Australia 1

Italy 0

Philippines 0

Hong Kong 0

Belgium 0

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The Newsletter for the Efficacy in Nitric Oxide Stroke Trial

Web: www.enos.ac.uk Email: enos@nottingham.ac.uk

ENOS Worldwide

CHINA We are pleased to welcome Dr YaQing Zhang to the trial, who is coordinating the ENOS trial in China. She visited the International Coordinating Centre in the UK for 3 weeks in April and travelled around the UK.

SPAIN Philip Bath attended the "V International Conference on Ischaemic Stroke" in Madrid and hosted an Investigator Meeting.

POLAND Gillian Sare and Sally Utton attended 2nd International Conference of Central and Eastern European Stroke Society in Warsaw and hosted an Investigator Meeting.

ESC ENOS will be represented at the ESC, Nice, France with a stand (no. 323) and Investigator Meeting on 14 May at NH Hotel at 5.30pm. All welcome.



ENOS Team in Poland with Prof Anna Czlonkowska, National Coordinator (centre)



Thames Network Team, London with YaQing Zhang, ENOS China Coordinator (bottom centre) and Jennifer Backhouse, Thames Network Manager (bottom right)

Congratulations to....

- Coventry University Hospital UK, Southport & Ormskirk Hospital UK, and Barnsley Hospital UK, for randomising their first ever ENOS patients, and to Derby Hospitals for recruiting their first three patients in April.
- Scarborough for recruiting the 900th patient and winning a bonus of £250.

UK Investigator Meeting

ENOS is hosting a UK Investigator Meeting on 18 September 2008 at The University of Nottingham, Lenton Hall on University Park. Evening dinner and reception on 17th September. Agenda to follow.

ENOS Trial Office

Division of Stroke Medicine
Clinical Sciences Building
Nottingham University
Hospital NHS Trust
Hucknall Road
Nottingham
NG5 1PB
Tel +44 115 823 1770
Fax +44 115 823 1771

Chief Investigator
Philip Bath
+44 115 823 1768

Trial Medics
Gillian Sare
+44 115 823 1769

Tim England
+44 115 823 0288

Trial Manager
Sally Utton
+44 115 823 0287

UK Centre Coordinator
Tanya Payne
+44 115 823 0286

**International Centre
Coordinator**
Shirley Macalpine
+44 115 823 1807
NEW TEL NUMBER

Follow Up Coordinator
Sharon Ellender
+44 115 823 0289

Trial Statistician
Laura Gray
+44 115 823 1772

**Data and Imaging
Officer**
Lida Kaur
+44 115823 1776

Research Secretary
Yvonne Smallwood
+44 115 823 1770



A word on Dysphasia

The difference between dysphasia (problems with the production of speech by the brain) and dysarthria (difficulty in speaking clearly due to motor weakness) can be tricky, but is essential for correctly localising where the stroke has occurred in the brain.

Dysphasia: this is present when the **content** of speech is abnormal. This means that a patient:

- cannot speak at all (aphasia),
- cannot find some words. This is usually characterised by stuttering speech when a patient has to keep stopping because they can't get a word out. You can test this by asking a patient to name objects – try some tricky ones.
- uses the wrong words (e.g. says clock instead of coat) or speaks fluently but nonsense.

Often the terms “dysphasia” and “aphasia” are used interchangeably.

Dysarthria: this describes **slurring of the speech** that can occur with many strokes as the muscles of the mouth and face become weak. A purely dysarthric patient will be able to say all the words they want to and make sense in content. However, forming the words with the mouth is difficult (rather than the brain being unable to form the words) and they may speak slowly, have problems controlling the pitch, loudness, rhythm, and voice qualities of their speech and be difficult to understand.

Patients may have dysarthria and dysphasia together. The question is always “is there true dysphasia?”, so always take time to see if the content of the speech is normal.

When completing the Scandinavian Stroke Scale, please note that it is asking about dysphasia and not dysarthria. Please take time to assess speech for yourself as admitting juniors will often incorrectly report speech problems.

Tips of the month

CT Scans – if you are sending CT scans on CDs, please send them in batches.

tPA – open label thrombolysed patients can be entered into ENOS. Patients should be randomised to ENOS as soon as possible after the tPA, and ideally not >1 day later.

Serious Adverse Events – We have a legal responsibility to collect all SAEs and our SAE rate is currently lower than expected. Please remember that all SAEs need to be reported, even those after the treatment period.

*****Recently Updated Forms*****

- Study Personnel Signature Log v1.2, International Start Up Checklist v1.2, Post-site monitoring visit letter v1.2.
- All forms can be downloaded from the web-site (Documents page after login).

ENOS now has 59 centres in 13 countries.

More centres are welcome.