

CME/CE QUESTIONS

Continuing Medical Education Accreditation

The University of Cincinnati College of Medicine designates this educational activity for a maximum of 2 Category 1 credits toward the AMA Physician's Recognition Award. Each physician should claim only those hours that he/she actually spends in the educational activity.

The University of Cincinnati College of Medicine is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to sponsor medical education for physicians.

Continuing Pharmacy Education Accreditation



Medical World Communications Office of Continuing Professional Education is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education. This program is approved for 2 contact hours (0.2 CEUs) under the ACPE universal program number of 290-999-04-038-H01.

Instructions

After reading "The Economic Burden of Stroke in Atrial Fibrillation," complete the program evaluation and select the 1 best answer to each of the following questions. A statement of continuing education hours will be mailed to those who successfully complete (with a minimum score of 70%) the examination at the conclusion of the program.

1. Atrial fibrillation (AF) independently increases the risk of stroke by:

- a) 2-3 times
- b) 5-6 times
- c) 10 times
- d) 15 times

2. In well-controlled clinical trials of individuals with AF, warfarin is associated with a stroke risk reduction (versus placebo) of:

- a) 22%
- b) 44%
- c) 52%
- d) 62%

3. The prevalence of AF in the Medicare population (ie, individuals older than 65 years of age) is:

- a) 0.8%
- b) 1.8%
- c) 5.9%
- d) 9.0%

4. The average cost of caring for an ischemic stroke patient in the first 3 to 4 months after the event has been estimated to be:

- a) \$2000 to \$3000
- b) \$14 000 to \$15 000
- c) \$50 000 to \$60 000
- d) \$150 000 to \$165 000

5. In patients with AF and at least 1 other risk factor (like those in the major clinical trials with warfarin) the overall stroke rate without any preventive treatment is:

- a) 1.3%/year
- b) 4.7%/year
- c) 7.9%/year
- d) 12.5%/year

6. Stroke in patients with AF is generally more serious and expensive than stroke related to other causes.

- a) True
- b) False

7. How many people in the United States have AF?

- a) 15.5 million
- b) 12.0 million
- c) 5.6 million
- d) 2.3 million

8. The introduction of anticoagulation clinics has shown:

- a) Improved use of warfarin and better stroke prevention
- b) Decreased need for warfarin or stroke prevention
- c) Increased use of aspirin and better stroke prevention
- d) Increased rates of stroke for AF patients

9. The economic model presented in this supplement considers a stable population of patients with AF and can:

- a) Estimate national economic and clinical burden of AF complications
- b) Calculate embolic and hemorrhagic event rates
- c) Create scenarios for current methods of care
- d) All of the above

10. In the economic model presented here, based on the literature, what percentage of patients with AF are currently taking either nothing or aspirin?

- a) 20%
- b) 35%
- c) 55%
- d) 90%

CME/CE QUIZ

11. In economic models of stroke prevention with oral anticoagulants, any cost savings related to fewer stroke events need to be balanced against likely increased costs for:

- a) Major bleeding events
- b) Nursing home use
- c) Minor bleeding events
- d) All of the above

12. The economic model presented here suggests that optimizing anticoagulation by treating 50% more patients who have AF, and treating 50% more patients with optimal care, can produce an overall cost savings (from the Medicare perspective) of:

- a) 4%
- b) 12%
- c) 20%
- d) 31%

13. Which of the following stroke-related costs are overlooked in a Medicare-oriented economic model?

- a) Outpatient drug costs
- b) Long-term nursing home costs
- c) Construction and staffing of anticoagulation clinics
- d) All of the above

14. What percentage of the Stroke Prevention Using Oral Thrombin Inhibitor in Atrial Fibrillation (SPORTIF) trial population had had a previous stroke or transient ischemic attack?

- a) 5%
- b) 10%
- c) 20%
- d) 35%

15. The goal of the SPORTIF study was to establish whether ximelagatran was:

- a) Statistically superior to warfarin
- b) Noninferior (no worse) than well-controlled warfarin therapy
- c) Preferred by doctors and patients most often
- d) All of the above

16. Warfarin and ximelagatran were both equally effective in primary and secondary prevention of stroke.

- a) True
- b) False

17. The annual rate of stroke and systemic embolic events in the ximelagatran SPORTIF pooled populations was:

- a) 0.67%
- b) 1.62%
- c) 2.05%
- d) 3.5%

18. The risks of intracranial hemorrhage in both SPORTIF treatment groups were:

- a) >0.75%
- b) 0.40%-0.60%
- c) 0.20%-0.59%
- d) <0.20%

19. The main laboratory abnormality noted with ximelagatran in SPORTIF was:

- a) Low white blood cell counts
- b) Liver enzyme elevations
- c) Excessive out-of-range international normalized ratios
- d) Serum creatinine abnormalities

20. In SPORTIF, the combined rate of minor and major bleeding was 38.7% in the pooled warfarin groups. What was this rate in the pooled ximelagatran groups?

- a) 25.6%
- b) 31.7%
- c) 38.8%
- d) 41.1%

CME QUIZ

For Physicians

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CME TEST FORM

The Economic Burden of Stroke
in Atrial Fibrillation

Please circle your answers:

1. a b c d
2. a b c d
3. a b c d
4. a b c d
5. a b c d
6. a b
7. a b c d
8. a b c d
9. a b c d
10. a b c d
11. a b c d
12. a b c d
13. a b c d
14. a b c d
15. a b c d
16. a b
17. a b c d
18. a b c d
19. a b c d
20. a b c d

(PLEASE PRINT CLEARLY)

Name/Degree _____

Street _____

City _____

State/ZIP _____

Daytime Phone _____

Fax _____

E-mail _____

Sponsored by the University of Cincinnati for
2 hours of Category 1 CME credit.

Release Date: December 31, 2004

Expiration Date: December 31, 2005

CME Activity Evaluation

Activity Evaluation

How long did it take you to complete this activity?
_____ minutes

How well did this activity achieve its educational objectives?
 Very well Well Somewhat Not at all

What overall grade would you assign this activity?
 A B C D

Did this activity exhibit promotional bias for any pharmaceutical
agents? Yes No

Will you make changes in your practice as a result of
information presented in this lesson?
 Yes No

Answer Form Instructions: Testing and Grading Procedures

1. Each participant achieving a passing grade of 70% or higher on any examination will receive an official computer form stating the number of CME credits earned. This form should be safeguarded and may be used as documentation of credits earned.
2. Participants receiving a failing grade on any exam will be notified and permitted to take 1 reexamination at no cost.
3. All answers should be recorded on the answer form.
4. To receive credit certification electronically, please provide your e-mail address. Detach and mail or fax the test portion of this page to: University of Cincinnati, Office of CME, PO Box 670567, Cincinnati, OH 45267-0567; phone: 513-558-7277; fax: 513-558-1708. Please print clearly to ensure receipt of CME credit.

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CE QUIZ

For Pharmacists

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ANSWER CARD INSTRUCTIONS

Testing and Grading Procedures

1. Each participant achieving a passing grade of 70% or higher on any examination will receive an official computer form stating the number of CE credits earned. This form should be safeguarded and may be used as documentation of credits earned.
2. Participants receiving a failing grade on any exam will be notified and permitted to take 1 reexamination at no cost.
3. All answers should be recorded on the answer form. Please print clearly to ensure receipt of CE credit.
4. To receive credit certification electronically, please provide your e-mail address. Detach and mail completed exam form with your \$10.00 payment to *Pharmacy Times*, 405 Glenn Drive, Suite 4, Sterling, VA 20164-4432; or fax to 703-404-1801.
5. Take the test online for FREE at www.pharmacytimes.com and receive immediate grading and CE credits, and download your CE statement of credit.

Please photocopy the test form for additional test takers.



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Answer card and evaluation form for Pharmacists follow on page S482.

CE QUIZ

For Pharmacists

ANSWER CARD AND EVALUATION FORM

The Economic Burden of Stroke in Atrial Fibrillation

(PLEASE PRINT CLEARLY)

PROGRAM EVALUATION

Please mark your level of agreement with the following statements.

(4 = Strongly Agree; 0 = Strongly Disagree)

- | | |
|------------------------------------------------------------------------|-----------|
| 1) Met its stated objectives | 4 3 2 1 0 |
| 2) Was well organized | 4 3 2 1 0 |
| 3) Contributed to my knowledge | 4 3 2 1 0 |
| 4) Presented current and relevant information | 4 3 2 1 0 |
| 5) Presented information in a fairly balanced and noncommercial manner | 4 3 2 1 0 |
| 6) Offered information useful in my professional practice | 4 3 2 1 0 |
| 7) Provided new insights into contemporary pharmacy practice | 4 3 2 1 0 |

Name/Degree _____

Street _____

City _____

State/ZIP _____

Daytime Phone _____

Fax _____

E-mail _____

Check (payable to *Pharmacy Times*)

Credit Card (check one)

VISA

MasterCard

American Express

SSN _____ - _____ - _____

Credit Card Number _____

Expiration Date _____

Signature (REQUIRED) _____

Sponsored by Medical World Communications Office of Continuing Professional Education for 2 contact hours (0.2 CEUs) of CE credit.

Expiration Date: December 31, 2005

Detach and mail completed answer card and evaluation form with your \$10.00 payment to:

Pharmacy Times
405 Glenn Drive
Suite 4
Sterling, VA 20164-4432

Or take the quiz online for FREE at www.pharmacytimes.com.

PROJ A109

ANSWER CARD

Please circle your answers:

I	2	3	4	5	6	7	8	9	10
a	a	a	a	a	a	a	a	a	a
b	b	b	b	b	b	b	b	b	b
c	c	c	c	c		c	c	c	c
d	d	d	d	d		d	d	d	d
11	12	13	14	15	16	17	18	19	20
a	a	a	a	a	a	a	a	a	a
b	b	b	b	b	b	b	b	b	b
c	c	c	c	c		c	c	c	c
d	d	d	d	d		d	d	d	d

The Economic Burden of Stroke in Atrial Fibrillation

GOAL

To provide participants with current information about optimal anticoagulation therapy to avoid the morbidity and mortality associated with stroke in patients with atrial fibrillation, contain costs, and preserve healthcare resources.

TARGET AUDIENCE

This activity is intended for physicians, medical directors, pharmacists, pharmacy directors, primary care physicians, and specialists in hematology and internal medicine.

EDUCATIONAL OBJECTIVES

After completing this continuing education activity, the participant should be able to:

- Define the need for and prevalence of anticoagulation therapy in patients with atrial fibrillation.
- Discuss the current research trends in anticoagulation and emerging anticoagulation therapies.
- Compare the cost effectiveness of anticoagulation therapies.
- Explore the impact of underutilization and underdosing of anticoagulation therapies on payers and patients.
- Identify the hard costs of anticoagulation treatment between “ideal” and real-world patients.

CONTINUING MEDICAL EDUCATION ACCREDITATION

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CONTINUING PHARMACY EDUCATION ACCREDITATION



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FUNDING

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