

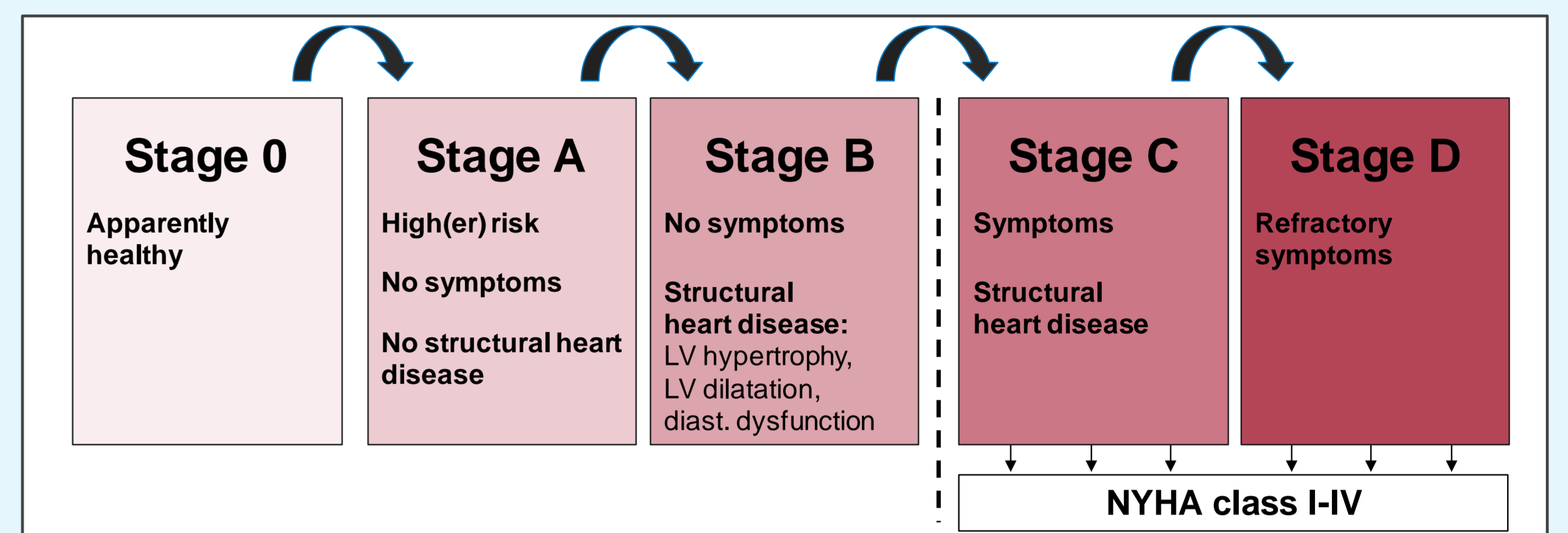
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BACKGROUND

For developing effective heart failure prevention programs for the general population, it is important to understand the entire disease continuum of heart failure (**figure**), starting from subjects at risk for developing heart failure (stage A), to people without symptoms but with evidence of structural heart disease (stage B), to patients with symptoms and signs of heart failure (stages C & D). Yet, little is known about the natural course and determinants of disease inception and progression of heart failure.

In order to describe the prevalence of early stages of heart failure as well as the transition into symptomatic stages in

the general population, we will establish the STAAB cohort study. Until 2015, we will recruit a random sample of n=3000 men and women aged 30-79 years from the Würzburg area.



OBJECTIVES

Aim 1: determine the prevalence of heart failure stage A/B in a representative sample of the general local population.

Aim 2: assess the natural temporal course of heart failure stage A/B, thus clarifying the importance of risk factors, intermediate phenotypes and comorbidities for the progression from asymptomatic to symptomatic cardiac dysfunction.

METHODS

Study Unit : Petrinistraße 33a

In 2012, the joint survey unit of the CHFC and the Institute of Clinical Epidemiology and Biometry (ICE-B) was established. Between 08/2012 and 02/2013, 536 participants of the EUROASPIRE IV Study were interviewed and examined, proving the feasibility to recruit and perform standardized data collection for 8-10 participants per day.



STAAB Screening Core Protocol

The protocol (duration ~3 hrs) comprises a physical exam., quantitative measurements, detailed questionnaires & interviews, and biomaterial acquisition (**table**). Key aspects include precursors of comorbidities that become manifest later in life and psychoemotional categories.

Similar to EUROASPIRE IV, STAAB will examine ~40 subj./wk.

Beyond the current funding period, we plan repetitive *follow-up visits* every 3-5 years to investigate changes in cardiac function, intermediate phenotypes, comorbidities, risk factors, and disease occurrence.

The STAAB program aims to establish network- and crossproject-analyses in the future, both locally and nationally, including a fruitful data exchange with the German National Cohort.

Procedures

- Detailed echocardiography
- Carotid intima-media thickn.
- Femoral plaque
- ECG, blood pressure
- Pulse wave velocity
- Spirometry
- Body composition (bioimpedance)
- Periodontal status & swab
- Oral glucose tolerance test
- Collection of biomaterials

Questionnaire/Interw.

- Comorbidities
- Risk factors
- Family history
- Life-style
- Exercise capacity
- Quality of life
- Cognitive impairment
- Depression
- Anxiety
- Sleep behaviour
- Heart failure knowledge

MILESTONES

- Ethical and data safety issues solved. All required approvals obtained.
- All study logistics established (incl. access to university hospital management system).
- Study personnel recruited and trained (SOP). Pilots were run.
- Standardized collection of high quality biomaterials such as blood, urine and saliva implemented with ibdw.
- PR campaign planned and started.
- Recruitment will start in December 2013.

