

Welcome to the AFFIRMO Newsletter!

We're thrilled to bring you the latest updates from the AFFIRMO project, just in time for summer! Our mission to enhance the care and management of elderly patients with atrial fibrillation and multiple chronic conditions is heating up with some exciting new developments.

In this edition, we're delighted to introduce the brand-new AFFIRMO Study App (iABC), share sunny insights from our recent publications, and recap our vibrant consortium meeting in Florence, Italy. Plus, you'll find cool information about upcoming events and much more.

So sit back, relax, and dive into the latest from AFFIRMO. Thank you for being a vital part of our community!



THE PROJECT

AFFIRMO: ADVANCING HEALTHCARE FOR MULTIMORBIDITY AND ATRIAL FIBRILLATION

PIONEERING FOR THE MANAGEMENT OF OLDER PATIENTS WITH ATRIAL FIBRILLATION AND MULTIMORBIDITY.

AFFIRMO, a groundbreaking initiative with 20 partners from nine countries, aims to enhance the clinical pathway for older patients with multimorbidity and Atrial Fibrillation (AF). Focusing on the challenges posed by multiple chronic conditions, AFFIRMO adopts a patient-centered approach that considers individual needs and social contexts, actively involving patients in decision-making.



AFFIRMO aims to offer fresh perspectives on handling multimorbidity in individuals with atrial fibrillation, the most prevalent heart rhythm disorder. This is crucial considering our ageing population and the growing public health challenges associated with this condition.

Professor Gregory Lip (University of Liverpool)

AFFIRMO brings together insights and expertise from various scientific disciplines, healthcare stakeholders, and countries in a collaborative effort to tackle one of the most pressing challenges in contemporary healthcare: enhancing care for older patients with atrial fibrillation and one or more chronic conditions.

Professor Søren Paaske Johnsen (Aalborg University)





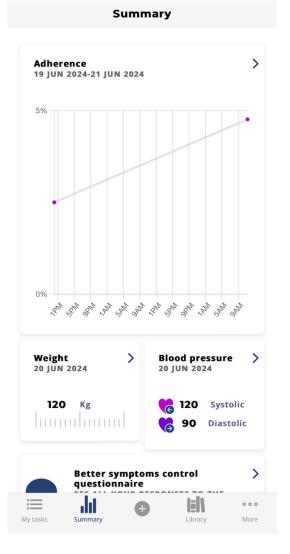
INTRODUCING THE AFFIRMO STUDY APP (IABC)

We are excited to announce that the AFFIRMO Study App (iABC)

The AFFIRMO Study App (iABC) is a revolutionary tool designed to support patients with atrial fibrillation (AF) by offering:

- Comprehensive Condition Management: Easily manage your AF with tools to track symptoms, monitor health data, and set medication reminders.
- **Educational Resources**: Gain access to a wealth of information about atrial fibrillation, treatment options, and lifestyle tips tailored to your needs.
- **Personalized User Experience**: The app is built with a user-centered design approach. It was developed with patients and clinicians to ensure it effectively meets real-world needs.





What Makes the AFFIRMO Study App (iABC) Unique?

- **Collaborative Design:** We worked closely with the Arrhythmia Alliance to host two Patient and Public Involvement and Engagement (PPIE) workshops. These sessions included individuals with lived experiences of atrial fibrillation, ensuring the app addresses the actual challenges faced by AF patients.
- **Multilingual Support:** the app is available in six languages: Danish, Spanish, Italian, Serbian, Bulgarian, and Romanian. This ensures that patients from different countries can use the app in their native language, enhancing accessibility and ease of use.

The digital platform developed to support AFFIRMO's care pathway will assist physicians in tailoring treatment and promote shared decision-making considering patients' and caregivers' needs and preferences. The digital tool will also help investigate the reciprocal relationship of AF with other comorbidities in older patients.



>

Questionnaire

Stroke

Blood pressure

ılıl

Heart failure



Remind to maintain an adequate nutritional income. Your diet needs to be balanced for the various nutrients, being sure to get enough protein, carbohydrates, and vegetables. Your diet needs to be adherent to medical indications related to your medical conditions. Be sure to drink enough water to keep you hydrated, within limits related to your conditions.

Health tip

Maintaining an adequate physical activity is a key essential element to maintain a good health state in older adults. Physical activity needs to be tailored on the physical status. If deprived, even small exercises to maintain the capacity of your lower limbs.

THE AFFIRMO TRIAL

The current population is ageing, leading to an increase in cardiovascular and non-cardiovascular risk factors and comorbidities, which, in turn, has resulted in more patients with atrial fibrillation (AF). These patients often suffer from multiple health issues, such as multimorbidity, delirium, sarcopenia, and frailty, which complicate their clinical management and increase healthcare utilisation..

Recent scientific evidence suggests that a holistic and integrated care approach is best for managing AF patients with multiple comorbidities. This involves proper evaluation of thromboembolic and bleeding risks to prescribe suitable anticoagulation, patient-based symptom management, correction of wrong lifestyle habits, and thorough assessment and treatment of all comorbidities following international guidelines.

The ABC Pathway is a clinical strategy designed to effectively implement this integrated care approach, reducing adverse outcomes like cardiovascular events, hospitalisations, and death. The AFFIRMO trial, which began patient enrolment in April 2024 and aims to recruit 1250 patients by December 2024, will further the Comprehensive investigate incorporating if Pathway can Assessment into **ABC** the improve risk management and outcomes for older adults with AF and multimorbidity.

The success of our trial relies heavily on achieving the patient enrolment targets, as the results will guide the clinical implementation of this integrated care approach. Everyone's effort in ensuring patient enrolment is crucial for the trial's success and the potential benefits it promises.

PUBLICATION ALERT

THE COST OF ATRIAL FRIBRILLATION

The recent AFFIRMO's publication *The Cost of Atrial Fibrillation: A Systematic Review* addresses the economic burden of atrial fibrillation (AF), the most common heart rhythm disorder rising due to aging populations.

The study systematically reviewed existing research to pinpoint the primary cost drivers of AF and evaluate the financial impact of different care strategies. Analyzing data from 24 studies conducted worldwide, researchers found that hospitalizations are the largest expense, with strokes and heart failure significantly increasing overall cost.

The findings revealed that hospitalizations are the primary contributors to direct medical costs, while strokes and heart failure significantly increase overall expenses. Implementing guidelines to manage these complications could improve patient health and reduce healthcare costs. The study emphasizes the importance of targeting comorbidities to mitigate the financial impact of AF.

CHECK IT OUT!

Alessandra Buja, PhD, Vincenzo Rebba, PhD, Laura Montecchio, MD, Giulia Renzo, BSc, Vincenzo Baldo, PhD, Silvia Cocchio, PhD, Nicola Ferri, PhD, Federico Migliore, PhD, Alessandro Zorzi, PhD, Brendan Collins, PhD, Cheïma Amrouch, MSc, Delphine De Smedt, PhD, Christodoulos Kypridemos, PhD, Mirko Petrovic, PhD, Martin O'Flaherty, PhD, Gregory Y.H. Lip, MD



AFFIRMO CONSORTIUM **MEETING**

FLORENCE (IT) 27 - 28 MAY 2024

This year AFFIRMO celebrated its 3nd project meeting in Florence, Italy



On May 27 and 28 AFFIRMO held its third face-to-face Consortium meeting at the Heart Care Foundation (HCF) in Florence, Italy. This event was a significant milestone in our journey, bringing together partners to discuss our progress and future plans.

Key highlights:

- We presented the progress made during the second year of the AFFIRMO project, showcasing achievements across various work packages.
- Future plans: upcoming activities and strategies for AFFIRMO's future
- The meeting provided a picturesque setting for conversations among partners, fostering a spirit of collaboration and shared visions.

We are excited about the future and remain committed to optimizing the clinical management of older AF patients through a holistic approach. This meeting has strengthened our resolve and set the stage for future achievements.

Arrivederci! Stay tuned for more updates as we continue our journey to improve healthcare outcomes for AF patients.



Get to know the tech SMEs in AFFIRMO



Advice Pharma is a CRO specialized in research with new technologies and software development for clinical research. The company has always developed projects based on clinical data management through proprietary solutions and has been involved as lead CRO in conducting international studies for the life science industry, hospital research centres and scientific foundations for more than ten years.

At AFFIRMO, the company contributed to the sub-study that leveraged multiple methodologies to assess the needs of patients, caregivers and healthcare professionals for the comprehensive management of multimorbidity, including AF, and ways that could optimize the care provided and patient self-management.

Advice Pharma used its IT skills to host the online survey for patients, doctors, and caregivers for this project. Additionally, as a Contract Research Organization (CRO), we managed the translation of the survey into Italian, Spanish, Romanian and Danish, in collaboration with the country leads, and supported the ethical and regulatory aspects and the study's initiation in collaboration with UoL. A favorable opinion on the clinical study was obtained in all the countries involved.



AFFIRMO WP4:

Needs Assessment and Indicators of Quality of Care (QPIs) Identification

This online survey is part of the AFFIRMO project which focuses on improving the management of Atrial Fibrillation in the context of multimorbidity (defined as the presence of two or more concomitant long-term conditions). This online survey aims to assess the needs of patients, caregivers, and health professionals for the comprehensive management of multimorbidity including Atrial Fibrillation.

The survey takes approximately 30-40 minutes to complete.

You can complete the survey in one go or save and resume later.

Thanks for your participation in the project!

Advice Pharma's eSurvey platform was validated and compliant with all regulations concerning both clinical research and the privacy of sensitive data, and also ensured maximum cybersecurity.

	x that best describes your health TODAY.
IOBILITY	
Choose one of the follow	ing answers
	I have no problems in walking about
	I have some problems in walking about
	I am confined to bed
	© EuroQol Research Foundation. EQ-5D™ is a trade mark of the EuroQol Research Foundation. UK (English) v2.1
This project has rece	rived funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No 89987

After the validation of the eSurvey modules for AFFIRMO, the structure for the 3 surveys (HCP, Patient, Caregiver) was created by University of Liverpool, University of Padua, and the Arrhythmia Alliance, and translated in the corresponding languages by Advice Pharma. Thanks to the technology managed directly by Advice Pharma's IT department, all changes to the questionnaires that had been requested by the Ethics Committees were also implemented and tested.

The online survey involved healthcare professionals, AF and multimorbidity patients and their caregivers enrolled in 5 different countries (including UK, Italy, Spain, Denmark and Romania). The survey content, in addition to collecting sociodemographic and anamnestic data from those involved, generated evidence on the experience of living with and managing AF in the presence of multimorbidity, using validated questionnaires and scales (e.g. quality of life, involvement in the care process, burden, level of empowerment).

Raising awareness around AFFIRMO

Spreading the word: AFFIRMO's participation to conferences and events

AFFIRMO at the 27th Nordic Congress of Gerontology

At the 27th Nordic Congress of Gerontology, researchers and practitioners gathered with the goal to lead in promoting healthy ageing globally by advancing research and practices in equity, global health, living conditions, migration, welfare technology, and healthcare organization.

On 14 June 2024, AFFIRMO shared its latest healthcare research findings. Collaborating with two other EU-funded projects, I-CARE4OLD and EHRA-PATHS, they held a symposium on "Risk Stratification of Multimorbid Patients Across the Care Continuum." The event focused on improving the understanding and management of patients with multiple chronic illnesses, leveraging insights from these projects to enhance patient care.



Spotted: Davide Liborio Vetrano, Mirko Petrovic, Lu Dai, Cheima Amrouch

AFFIRMO at the EHRA conference in Berlin

AFFIRMO conducted an online survey open to patients, their caregivers, and healthcare professionals, in five European countries, United Kingdom, Italy, Spain, Romania, and Denmark, between June 2022 and January 2023. We used the information obtained from the surveys to identify the key needs, indicators of high-quality medical care, and outcomes that stakeholders think are important through a series of online workshops (known as a modified Delphi process), which involved patients, caregivers, and healthcare professionals from across Europe. These findings were presented at the European Geriatric Medicine Society conference in Helsinki in September 2023. In addition, the survey included questionnaires that examined patient engagement in healthcare and the impact of AF and multimorbidity on patient and caregiver quality of life.

The preliminary results of the key characteristics of engaged patients living with AF and multimorbidity, and the impact of these chronic conditions on their quality of life and that of their caregivers, were presented at the European Heart Rhythm Association (EHRA) Congress, Berlin in April 2024.

During the event, Professor Deirdre Lane (University of Liverpool) presented some of the findings from the AFFIRMO project on behalf of the team. The EHRA 2024 Congress was a great opportunity to present the findings to an international audience of healthcare professionals and researchers working in the field of cardiac arrhythmias, and the posters generated great interest and discussion in the work and the wider AFFIRMO project.

A huge thank-you to the rest of the team: Dr Donato Giuseppe Leo (UoL), Dr Caterina Trevisan and Adele Ravelli (University of Padua, UNIPD), Prof. Guendalina Graffigna and Dr Caterina Bosio (Universita' Cattolica del Sacro Cuore – UCSC), and Trudie Lobban (Arrhythmia Alliance).



Engagement personas in patients living with atrial fibrillation and multimorbidity: results from the AFFIRMO international online survey



Donato Giuseppe Leo¹, Caterina Trevisan², Guendalina Graffigna³, Caterina Bosio³, Trudie C.A Lobban⁴, Deirdre A. Lane¹, on behalf of the AFFIRMO Study investigators

Liverpool Centre for Cardiovascular Sciences and Department of Cardiovascular and Metabolic Medicine, University of Liverpool, Liverpool, UK; Department of Medical Sciences, University of Ferrara, Ferrara, Italy, EngageMinds HUB – Consumer, food & health engagement research center, Universita' Cattolica del Sacro Cuore, Italy, Arrhythmia Alliance, Celixir House, Warwickshire, UK

*E-mail: deirdre.lane@liverpool.ac.uk | Project website: https://affirmo.eu/

INTRODUCTION



Atrial fibrillation (AF) is the most common heart rhythm disorder



AF affects 1-3% of EU population



Patients with AF have a higher rate of concomitant chronic conditions



Multimorbidity further impacts patients' quality of life



AIM

Exploring patient engagement in healthcare among those with AF and multimorbidity



4





Participants recruited from 5 European countries

Patient engagement measured by PHE-s and ACE questionnaires and grouped into 'high' and 'low' engagement based on scale specific cut-off values

RESULTS

Table 1. Patients' level of engagement (high vs. low) assessed by the PHE-s® and ACE scales, by age, sex, educational attainment, region of recruitment, and co-morbidities

	PHE-s	ACE ²				
	High engagement* n=428 (64.9%)	Low engagement* n=231 (35.0%)	p-value	High engagement* n=369 (56.0%)	Low engagement* n=290 (44.0%)	p-value
Age groups, years						
<65	96 (14.6)	60 (9.1)		105 (15.9)+	51 (7.7)	
65-74	144 (21.9)	93 (14.1)	0.04	122 (19.1)	111 (17.4)	0.005
≥75	188 (28.5)	78 (11.8)**		123 (17.3)	114 (18.7)	
Male sex	226 (34.3)*	85 (12.9)	<0.0001	165 (25.0)	146 (22.2)	0.15
Level of education (n=640)						
Primary	62 (9.7)	32 (5.0)		38 (5.9)	56 (8.8)++	
Secondary**	156 (24.4)+	110 (17.2)	0.026	141 (22.0)	125 (19.5)	<.0001
Degree level or above	195 (30.5)+	85 (13.3)		176 (27.5)+	104 (16.3)	
No. of comorbidities (n=638)						
1-2	198 (31.0)+	77 (12.1)		173 (26.3)+	102 (15.5)	
3-5	182 (28.5)	115 (18.0)	0.003	156 (24.5)	141 (21.1)	<.0001
>5	35 (5.5)	31 (4.9)		25 (3.9)	41 (6.4)+	
Region						
Eastern Europe	58 (8.8)	34 (5.2)		54 (8.2)	38 (5.8)	
Northern Europe	230 (34.9)	131 (19.9)	0.55	215 (32.6)+	146 (22.2)	0.034
Southern Europe	140 (21.2)	66 (10.0)		100 (15.2)	106 (16.1)++	

659 patients, 201 caregivers and 445 healthcare professionals (HCPs) completed the online survey (Fig 1). Patients with 'high' engagement were <65 years old, living in Northern Europe, educated to degree level or above, and had <3 co-morbidities, with no sex differences in engagement level (Fig 2).
 138 (68.7%) caregivers reported 'high' engagement. No significant differences between sex, age group,

region of recruitment, or level of education between high and low engagement were reported

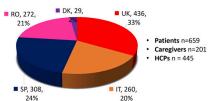


Figure 1. Countries representation (n, %). UK = United Kingdom, IT = Italy, = Spain, DK = Denmark, RO = Romania. HCPs = Healthcare professionals

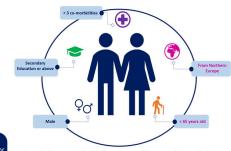


Figure 2. Summary of patient engagement personas' characteristics.

In pink, characteristics highlighted by the ACE scale

5 CONCLUSION

- Engagement level of patients and caregivers varied, with the majority reporting a 'high' level of engagement.
- For patients, factors contributing to 'high' engagement were: being younger than 65 years of age, living in Northern Europe, having further education, and having a lower number of comorbidities.
- For caregivers, no specific factors related to 'high' and 'low' engagement were identified.
 Identification of engagement personas of patients and their caregivers could help to develop better management pathways for AF patients with multimorbidity.

The AFFIRMO project has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No 899871.

Quality of life in patients with atrial fibrillation and multimorbidity, and their caregivers: Results from the AFFIRMO International Online Survey



Donato Giuseppe Leo¹, Caterina Trevisan^{2,3}, Adele Ravelli³, Guendalina Graffigna⁴, Caterina Bosio⁴, Trudie C.A Lobban⁵, <u>Deirdre A. Lane¹</u>, on behalf of the AFFIRMO Study investigators

re for Cardiovascular Sciences and Department of Cardiovascular and Metabolic Medicine, University of Liverpool, Liverpool, UK; ²Department of Medical Sciences, University of Ferrara, Ferrara, Italy, ⁹Department of Medicine, University of Padova, Padua, Italy; ⁴EngageMinds HUB – Consumer, food & health engagement research center, Universita' Cattolica del Sacro Cuore, Italy, ⁵Arrhythmia Alliance, Celixir House, Warwickshire, UK

*E-mail: deirdre.lane@liverpool.ac.uk | project website: https://affirmo.eu/

INTRODUCTION



Patients with AF have a higher rate of concomitant chronic conditions



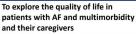
Multimorbidity further impacts patients' quality of life (QoL)



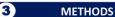
Burden of caregiving also impact the QoL of the caregivers of these patients



AIM









Patients and caregivers recruited from 5 European countries completed an online survey from May 2022 to Jan

OoL was assessed using the EQ-5D-3L questionnaire

Table 1: Differences in patients' quality of life: comparison for sex and age group

		Sex				Age groups		
Questionnaire Median (IQR)	Overall N = 659	Male N=311	Female N=348		18-64 years N = 156	65-74 years N = 237	75+ years N = 266	
Quality of Life (EQ-5D-3L)								
Mobility	1.0 (1.0-2.0)	1.0 (1.0-2.0)	2.0 (1.0-2.0)*	<0.001	1.0 (1.0-2.0)	2.0 (1.0-2.0)	2.0 (1.0-2.0)*	<0.0001
Self-care	1.0 (1.0-1.0)	1.0 (1.0-1.0)	1.0 (1.0-1.0)	0.277	1.0 (1.0-1.0)	1.0 (1.0-1.0)	1.0 (1.0-2.0)*	0.002
Usual activities	2.0 (1.0-2.0)	1.0 (1.0-2.0)	2.0 (1.0-2.0)*	<0.0001	1.0 (1.0-2.0)	2.0 (1.0-2.0)	2.0 (1.0-2.0)	0.215
Pain discomfort	2.0 (1.0-2.0)	1.0 (1.0-2.0)	2.0 (1.0-2.0)*	<0.0001	1.0 (1.0-2.0)	2.0 (1.0-2.0)*	2.0 (1.0-2.0)	0.006
Anxiety/D epression	2.0 (1.0-2.0)	1.0 (1.0-2.0)	2.0 (1.0-2.0)	0.053	2.0 (1.0-2.0)	2.0 (1.0-2.0)	1.0 (1.0-2.0)*	0.008
VASI	70.0 (50.0-80.0)	70.0 (50.0- 80.0)*	60.0 (50.0-80.0)	0.007	70.0 (50.0-80.0)	65.0 (50.0-80.0)	69.0 (50.0-80.0)	0.762

irwise comparisons showed no differences between groups

Table 2: Differences in patients' quality of life: comparison by country.

Questionnaire	Overall	Eastern Europe	Northern Europe	Southern Europe	P-value
	N=659	N= 92	N= 361	N= 206	
Quality of Life (EQ- 5D-3L)					
Mobility	1.0 (1.0-2.0)	1.0 (1.0-2.0)	1.0 (1.0-2.0)	1.0 (1.0-2.0)	0.580
Self-care	1.0 (1.0-1.0)	1.0 (1.0-1.0)	1.0 (1.0-1.0)	1.0 (1.0-2.0)*	<0.0001
Usual activities	2.0 (1.0-2.0)	1.0 (1.0-2.0)	1.0 (1.0-2.0)	1.0 (1.0-2.0)	0.111
Pain discomfort	2.0 (1.0-2.0)	1.0 (1.0-2.0)	2.0 (1.0-2.0)	2.0 (1.0-2.0)	0.025**
Anxiety/Depr ession	2.0 (1.0-2.0)	2.0 (1.0-2.0)	2.0 (1.0-2.0)	2.0 (1.0-2.0)	0.354
VAS	70.0 (50.0-80.0)	70.0 (50.0-80.0)	70.0 (50.0-80.0)	60.0 (50.0-80.0)	0.046**

RESULTS

Questionnaire		Sex			Age Groups				
(median-IQR)	Overall		Women	P-value	<50 years	50-64 years	65-74 years		P-value
	N= 201	N+54	N=147		N= 57	N= 81	N= 29	N=34	
Quality of Life (EQ-5D-3L score)									
Mobility	1.0 (1.0-1.0)	1.0 (1.0-2.0)	1.0 (0.0-	0.249	1.0 (1.0-1.0)	1.0 (1.0-1.0)	1.0 (1.0-2.0)*	2.0 (1.0- 2.00*	<0.0001
Self-care	1.0 (1.0-1.0)	1.0 (1.0-1.0)	1.0 (1.0-	0.199	1.0 (0.0)	1.0 (0.0)	1.0 (0.0)	1.0 (1.0)*	<0.0001
Usual activities	1.0 (1.0-1.0)	1.0 (1.0-1.0)	1.0 (1.0-	0.583	1.0 (1.0-1.0)	1.0 (1.0-1.0)	1.0 (1.0-2.0)	2.0 (1.0- 2.0)*	<0.0001
Pain/disco mfort	1.0 (1.0-2.0)	1.0 (1.0-2.0)	1.0 (1.0- 2.0)*	0.40	1.0 (1.0-2.0)	1.0 (1.0-2.0)	2.0 (2.0-2.0)	1.0 (1.0-2.0)	0.104
Anxiety/De pression	1.0 (1.0-2.0)	1.0 (1.0-2.0)	1.0 (1.0- 2.0)	0.148	1.0 (1.0- 2.0)*	2.0 (1.0-2.0)	2.0 (1.0-2.0)	2.0 (1.0-2.0)	0.001
VAS	80.0 (56.0-90.0)	77.50 (59.25-90.00)	80.00 (50.00-	0.842	80.00 (70.00-	80.00 (52.50-90.00)	70.00 (50.00-80.00)*	69.00 (50.00-	0.002

Table 4: Differences in caregivers' quality of life: comparison by country.

Questionnaire	Overall	Italy	Spain	Romania	P-value	
	N=195°	n=49	n=66	n=80		
Quality of Life						
(EQ-5D-3L score)						
Mobility	1.0 (1.0-1.0)	1.0 (1.0-1.5)	1.0 (1.0-1.0)	1.0 (1.0-1.0)	0.104	
Self-care	1.0 (1.0-1.0)	1.0 (1.0-1.0)	1.0 (1.0-1.0)	1.0 (1.0-1.0)*	0.011	
Usual activities	1.0 (1.0-1.0)	1.0 (1.0-2.0)	1.0 (1.0-1.2)	1.0 (1.0-1.0)	0.340	
Pain/discomfort	1.0 (1.0-2.0)	2.0 (1.0-2.0)	1.0 (1.0-2.0)	1.0 (1.0-2.0)	0.109	
Anxiety/Depressio	1.0 (1.0-2.0)	2.0 (1.0-2.0)	1.0 (1.0-2.0)	1.0 (1.0-2.0)*	0.018	
VAS	80.0 (57.0-90.0)	75.00 (50.00-82.50)	70.00 (50.00-81.75)	80.00 (70.00-90.00)*	0.001	

*Statistically significant

**Post-hoc pairwise comparisons showed no differences between groups

- QoL for <u>patients</u> was lower in women (↑ impairment in mobility and usual activity, ↑ level of pain discomfort) and in older people (aged 65+ years, ↓ VAS) Patients in Southern Europe reported
 ↓ ability in self-care.
- Caregivers <50 years old reported ↑ anxiety/depression, <65 years old reported ↑ impairment in mobility and usual activity; women reported ↑ level of pain and discomfort.

CONCLUSION

- AF and multimorbidity negatively impact the QoL of patients and their caregivers.
- Mitigating factors for patients are: being male, being <65 years and living in Norther Europe.
- Results from AFFIRMO will help inform and develop better clinical and self-management strategies for AF patients with multimorbidity to reduce the negative impact on QoL.

^{*}Statistically significant **Post-hoc pairwise comparisons showed no differences between groups

AFFIRMO the interviews



Hey there! We're excited to share that AFFIRMO - the Interviews is now on YouTube!

In this online series, we interviewed the people behind AFFIRMO. You'll get to know why they joined the project, their unique perspectives, and their aspirations for the future of healthcare. Tune in to hear their inspiring stories and insights, and learn how they are contributing to advancing medical research and patient care.

Discover the amazing stories behind the AFFIRMO project!

- Guendalina Graffigna Università Cattolica del Sacro Cuore
- Caterina Bosio Università Cattolica del Sacro Cuore
- Cheima Amrouch Ghent University
- Jose Miguel Rivera Caravaca Universidad de Murcia
- Marco Proietti Università degli Studi di Milano
- Donato Giuseppe Leo University of Liverpool





Deepen your expertise by exploring the valuable insights and knowledge shared during our training session, particularly in the context of multimorbidity—a prevalent condition among older adults that significantly affects health and quality of life, complicating medical management. Despite this challenge, current healthcare systems often adopt a fragmented, single-disease approach.

The AFFIRMO project seeks to address this issue by focusing on clusters of multimorbidity, highlighting cases where atrial fibrillation (AF) is among the chronic conditions being studied.

Watch or revisit the session's highlights!



On May 28, 2024, in Florence, Italy, during the consortium meeting of AFFIRMO, a significant collaboration was announced. The Horizon Europe funded projects AFFIRMO, **ARISTOTELES,** and **TARGET** launched a new informal cluster aimed at enhancing research on the management of cardiac diseases and associated multimorbidity. This cluster is set to foster collaboration, expand research impact, and welcome additional projects to join its efforts.

The primary focus of this cluster is to enhance collaborative research and extend the impact of efforts in managing cardiac diseases and associated multimorbidities. Initially, the cluster will concentrate on joint communication and dissemination activities to effectively share research findings and engage with broader audiences.

By combining their expertise, the projects aim to organize joint events and workshops, share non-confidential research results, and develop innovative care pathways for cardiac diseases. The overarching theme of this collaboration is to improve patient outcomes and healthcare efficiency through integrated, multidisciplinary approaches.

We look forward to the exciting developments and advancements that will emerge from this collaborative effort. Stay tuned for further insights and developments, and to learn more about the exciting initiatives and activities of this innovative cluster.

Click here to read the full press release!

Meet our young Researcher





ABOUT CECILIA

Ms. Cecilia Damiano, MSc Istituto Superiore di Sanità (ISS) – Italian National Institute of Health

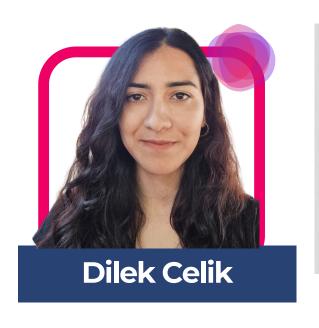
I have a bachelor's degree in statistics and a master's degree in biostatistics; my work focuses on populations affected by chronic diseases and aging.

My interest in science sparked after completing my bachelor's degree, while I was exploring options for my master's studies. I discovered biostatistics, a field that perfectly merged my analytical skills with my growing interest for scientific research. Choosing biostatistics as my master's was a defining moment that set the course for my career.

One of the most fulfilling aspects of my work is the potential to make a tangible difference in people's lives. Whether it's through improving public health policies or advancing medical research, I am driven by the hope that my contributions can lead to positive societal impacts. This also applies to AFFIRMO, which aims to uncover meaningful insights to enhance the lives of the older population with atrial fibrillation. This project has the potential to improve the quality of life for a vulnerable segment of the population.

Looking forward on the future of health decision-making, I envision a landscape where clinical and public health decisions are increasingly guided by robust scientific evidence derived from large observational analyses. This evidence-based approach has the potential to revolutionize healthcare, ensuring more precise and effective interventions.

Meet our young Researcher





ABOUT DILEK

I am a UNIPhD Fellow in Pharmacological Sciences at the University of Padova, with a bachelor's degree in Bioengineering, master's degrees in Bioengineering, and master's degree in Public Health.

I first discovered my passion for science as a child, when I actively read science journals. My family subscribed to a monthly scientific journal, which fueled my curiosity and passion for understanding the world. This early exposure inspired me to study bioengineering. What I find most fascinating about my work is the opportunity to have a concrete impact on patients' lives, particularly through the innovative integration of engineering principles with medical science. The biggest challenges in my research so far have been navigating the complexities of AF treatment in elderly patients with multiple health issues, requiring a comprehensive and multidisciplinary approach.

I look forward to the possible improvements that my research could bring in terms of enhancing the quality of life for elderly individuals with AF. Over the next decade, I hope to see significant advancements in personalized medicine within my field, making treatments more effective and tailored to individual patient needs.







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