

Chronic coronary syndrome in Swedish primary care (COSPRI)

A cluster-randomized study on a single-visit package investigation versus routine sequential investigation for chronic coronary artery disease conducted in Swedish primary health care.

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Document revision history

Issue	Summary of change
01	New document

Statistical considerations

Analyses will be done according to the intention-to-treat principle.

Conventional descriptive methods of means (with standard deviations) or medians (with interquartile ranges) for continuous data and proportions for categorical data will be used to compile data.

Comparison between groups will be made using Chi-2 test for proportions and T-test or Mann Whitney U test for continuous data, the latter if data are not normally distributed. The appropriate type of regression model will be used to estimate the relationship between waiting time and investigation model, package investigation or standard investigation. Due to cluster randomization mixed models will be used.

Downstream cardiac investigations, final outcome and cost per patient will be structured according to Table 1-3.

Table 1 Downstream cardiac investigations

Modality	Package investigation ¹ n=	standard investigation ² n=
Myocardial perfusion scan, n (%)	0	

Echocardiography	0	0
Computed tomography angiography		
Stress echocardiography		
Magnetic resonance imaging		
Invasive coronary angiography		
Ergospirometry		
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¹ Myocardial perfusion scan, echocardiography and CT of heart.

² Exercise stress bicycle test and echocardiography.

Table 2 Final outcome after cardiac investigations

Modality	Package investigation n	standard investigation n
CORAI: Significant coronary artery stenosis.		
CABG		
PCI		
Myocardial ischemia		
Heart failure EF < 50 %		
Criteria for HFpEF: EF>50 %, E/e'>15, LAVI index >37 mL/m ²		
Valve disease: Aortic stenosis, > 3m/sec		

Mitral insufficiency with enlarged cardiac chambers		
Pulmonary hypertension, > 3.2 m/sec		
Dilated ascending aorta >45 mm		
No signs of CAD		

Table 3

Cost per patient in total, per action, diagnosis or ruling out of CAD.

Modality	Package investigation n	standard investigation n
All participants		
CABG		
PCI		
Myocardial ischemia		
Heart failure		
Valve disease		
No signs of CAD		