

Survey of Treatment Practices for Symptomatic Intracranial Arterial Stenosis

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Please check ('X') only one answer unless otherwise specified.

1. Which of the following best describes the setting of your clinical practice?
 - ☐ A. Community-based private practice
 - ☐ B. University-hospital based
 - ☐ C. Other (specify): _____

2. Which of the following represents your number of years of clinical experience?
 - ☐ A. 1 - 2 years
 - ☐ B. 3 - 5 years
 - ☐ C. 6 - 10 years
 - ☐ D. More than 10 years

3. What proportion of patients in your clinical practice do you treat for stroke?
 - ☐ A. 76 - 100%
 - ☐ B. 51 - 75%
 - ☐ C. 26 - 50%
 - ☐ D. 15 - 25%
 - ☐ E. Less than 15%

4. Which non-invasive test do you use to initially diagnose intracranial stenosis? (check only one box)
 - ☐ A. MRA
 - ☐ B. TCD
 - ☐ C. CTA
 - ☐ D. Other (specify): _____
 - ☐ E. Combination of above (specify): _____

5. Do you require catheter angiography to confirm intracranial stenosis before starting long-term antithrombotic therapy?
 - ☐ A. Yes
 - ☐ B. No

6. Which of the following is your preferred antithrombotic agent for the long-term treatment of symptomatic stenosis of the middle cerebral artery or carotid siphon?
 - ☐ A. Warfarin
 - ☐ B. Antiplatelet therapy
 - ☐ C. Combination therapy (specify): _____
 - ☐ D. Other (specify): _____

7. If you answered 'B' or 'C' to #6, which of the following is/ar your preferred antithrombotic agent(s)? ('X' all that apply)
 - ☐ A. Aspirin
 - ☐ B. Plavix
 - ☐ C. Aggrenox
 - ☐ D. Other (specify): _____

8. Which of the following is your preferred antithrombotic agent for the long-term treatment of symptomatic stenosis of the basilar or intracranial vertebral artery?
 - ☐ A. Warfarin
 - ☐ B. Antiplatelet therapy
 - ☐ C. Combination therapy (specify): _____
 - ☐ D. Other (specify): _____

9. If you answered 'B' or 'C' to #8, which of the following is/ar your preferred antithrombotic agent(s)? ('X' all that apply)
 - ☐ A. Aspirin
 - ☐ B. Plavix
 - ☐ C. Aggrenox
 - ☐ D. Other (specify): _____

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Questions #10-14 refer to the Warfarin-Aspirin Symptomatic Intracranial Disease (WASID) study, which is an ongoing NIH-funded clinical trial comparing the efficacy of warfarin versus aspirin for preventing stroke and vascular death in patients who have symptomatic intracranial arterial stenosis.

10. If the results of WASID were to show that warfarin is superior to aspirin, to what degree would this finding impact your choice of antithrombotic therapy for treating this disease?

☐ A. Greatly
☐ B. Moderately
☐ C. Minimally
☐ D. Not at all

11. If the results of WASID were to show that aspirin is superior to warfarin, to what degree would this finding impact your choice of antithrombotic therapy for treating this disease?

☐ A. Greatly
☐ B. Moderately
☐ C. Minimally
☐ D. Not at all

12. If the results of WASID were to show that aspirin and warfarin were equally effective, to what degree would this finding impact your choice of antithrombotic therapy for treating this disease?

☐ A. Greatly
☐ B. Moderately
☐ C. Minimally
☐ D. Not at all

13. If your preferred antithrombotic agent for treating symptomatic anterior or posterior circulation intracranial arterial stenosis is WARFARIN, please answer the following:
 If the 3-year rate of stroke and vascular death is 30% among patients treated with warfarin in WASID, what would the 3-year rate of stroke and vascular death have to be among patients treated with aspirin in order for you to change your therapeutic regimen to aspirin or other antiplatelet therapy?

☐ A. 24% (e.g., 20% relative risk reduction)
☐ B. 20% (e.g., 33% relative risk reduction)
☐ C. 18% (e.g., 40% relative risk reduction)
☐ D. 15% (e.g., 50% relative risk reduction)
☐ E. 12% (e.g., 60% relative risk reduction)
☐ F. I would continue to use warfarin regardless of the rate on aspirin.

14. If your preferred antithrombotic agent for treating symptomatic anterior or posterior circulation intracranial arterial stenosis is ANTIPLATELET THERAPY, please answer the following:

 If the 3-year rate of stroke and vascular death is 30% among patients treated with aspirin in WASID, what would the 3-year rate of stroke and vascular death have to be among patients treated with warfarin in order for you to change your therapeutic regimen to warfarin?

☐ A. 24% (e.g., 20% relative risk reduction)
☐ B. 20% (e.g., 33% relative risk reduction)
☐ C. 18% (e.g., 40% relative risk reduction)
☐ D. 15% (e.g., 50% relative risk reduction)
☐ E. 12% (e.g., 60% relative risk reduction)
☐ F. I would continue to use antiplatelet therapy regardless of the rate on warfarin.

15. In what proportion of patients who have symptomatic intracranial arterial stenosis do you use angioplasty or stenting as a therapeutic strategy?

☐ A. More than 50%
☐ B. 26 - 50%
☐ C. 10 - 25%
☐ D. Less than 10%

Upon completion, please fax both pages of this survey (without a cover page) to:
404-727-1297