Site Activities

- Study training, patient consent and enrolment procedures
- Data input into electronic data capturing system: internet connection on site will be required
- Non-interventional study to observe the treatment of AF-patients according to your clinical practice:
  - no additional medical procedures required outside of normal practice

Further information can be found at: www.gloria-af.com

- Disease Information
- Information on the GLORIA™-AF Registry Program
- Registry news, participating countries …and much more

Boehringer Ingelheim

The Boehringer Ingelheim group is one of the world’s 20 leading pharmaceutical companies. Headquartered in Ingelheim, Germany, it operates globally with 142 affiliates in 50 countries and more than 41,500 employees. Since it was founded in 1885, the family-owned company has been committed to researching, developing, manufacturing and marketing novel products of high therapeutic value for human and veterinary medicine.

For more information, please visit: www.boehringer-ingelheim.com.

Interested?

Contact Information

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Further information can be found at: www.gloria-af.com.
Atrial fibrillation affects one in every four adults 40 or over. 

Atrial Fibrillation: the Most Common Cardiovascular Arrhythmia
Affects 1–2% of the total population, or an estimated 6 million people in Europe and 2.7 million people in the USA. Over 65% of hospital admissions, has increased 60% over the past 20 years. In the US AF prevalence is predicted to more than double by 2050. Age increases the lifetime risk of developing AF. In the 40 years or over population this increases to one in four.

The Risk and Need for Stroke Prevention in AF Patients
The major cause of illness and premature death in patients with atrial fibrillation (AF).

Patients with AF have a 4 to 6 times higher risk for stroke than unaffected subjects. - AF-related strokes are ischemic.

Ischemic stroke is the most common type of stroke in patients with AF—more than 9 out of 10 AF-related strokes are ischemic.

Treatments for Stroke Prevention in Atrial Fibrillation (AF)

- Vitamin K antagonists (VKAs) can decrease the risk of stroke by 64% but have important limitations. 
  - narrow therapeutic window 
  - unpredictable dose-response effect 
  - numerous drug-drug and drug-food interactions 
  - slow onset and offset of action 
  - require close monitoring and intensive follow up; and if not treated according to guidelines, can expose patients to an increased risk of stroke or bleeding.

- Antiplatelet agents, which have been shown to be comparable or better than VKAs in reducing the occurrence of stroke, systemic emboli and intracranial hemorrhage.

Many patients with AF do not receive appropriate anticoagulation treatment for the prevention of stroke. To address the shortcomings of VKAs, several novel oral anticoagulants (direct thrombin and factor Xa inhibitors) have been developed and approved in many countries. These new treatment options are now included in updates of the guidelines for the management of patients with AF. 

Introduction to GLORIA™-AF Registry Program

GLORIA™-AF is a global Registry Program to evaluate Stroke Prevention in AF. The GLORIA™-AF registry Program will collect information and follow up on patients with AF. Treatment they receive for stroke prevention and the new anticoagulants on the market.

Why a Registry?

- Real world data provide information on the AF population at risk for stroke.
- The effect of new oral anticoagulants entering the market can be navigated and changes in treatment patterns and outcomes monitored in a real-world setting.
- Large patient numbers in a broad population reflect how antithrombotic treatment is used in a real-world setting.
- The patient population will reflect real-world comorbidities.

Objectives:

- A global registry program run in different phases designed to: 
  - characterise the population of patients newly diagnosed with non-valvular atrial fibrillation at risk for stroke 
  - study patterns, predictors, and outcomes of different treatment strategies for stroke prevention 
  - Data on the safety and effectiveness of antithrombotic treatments will be collected.

Benefits of Participation in GLORIA™-AF

Furthers Scientific Knowledge
- Develop information about the AF patient population and risk for stroke.
- Increase knowledge on treatment choice and treatment effectiveness and safety in patients with AF in a real-world setting.
- Collect data on the comparative effectiveness of oral anticoagulation treatments.

User-friendly Electronic Data Capture system (EDC) with real-time data validation
- Submit forms with one click.
- View baseline characteristics as a snapshot.
- Real-time data analyses and comparison— 
  - ability to run customized reports and graphs 
  - compare patients to aggregated practices in the country or worldwide 
  - study data from ‘your’ own practice can be exported and saved for local analysis.

Reimbursement according to the time invested in the Registry Program.

Further information on GLORIA™-AF is available on www.GLORIA-AF.com.