

NCE funding for
CANADIAN ARRHYTHMIA NETWORK (CANET)
\$26.3 million for 2014-2019

PATIENTS PLAY CENTRAL ROLE IN NEW ARRHYTHMIA RESEARCH NETWORK

The opportunity

Canada has a long history of excellence in heart rhythm research. The first external cardiac pacemaker was developed in Toronto. The first implantable heart recorder was developed in London, Ontario. And groundbreaking Canadian studies have helped identify appropriate treatment for patients with atrial fibrillation, reduce heart failure and death with cardiac resynchronization therapy and reduce the risk of stroke from atrial fibrillation. But a growing number of patients are being diagnosed with major arrhythmia problems, notably sudden cardiac death, atrial fibrillation and syncope. Treatments often require expensive medications, medical procedures, and highly sophisticated technology, presenting a complex mix of health, economic, and commercial challenges. Canada is responding with a national effort that links scientists and clinicians at 25 heart research centres with engineers, social scientists, healthcare providers, industry, government, non-profits and people living with arrhythmia. Together, they are exploiting the potential of new technologies to develop and evaluate new heart rhythm therapies and grow Canada's biotechnology sector.

CANet at a glance
(as of January 15, 2015)

NCE program
Network of Centres of Excellence

Headquarters
Western University

Scientific Director

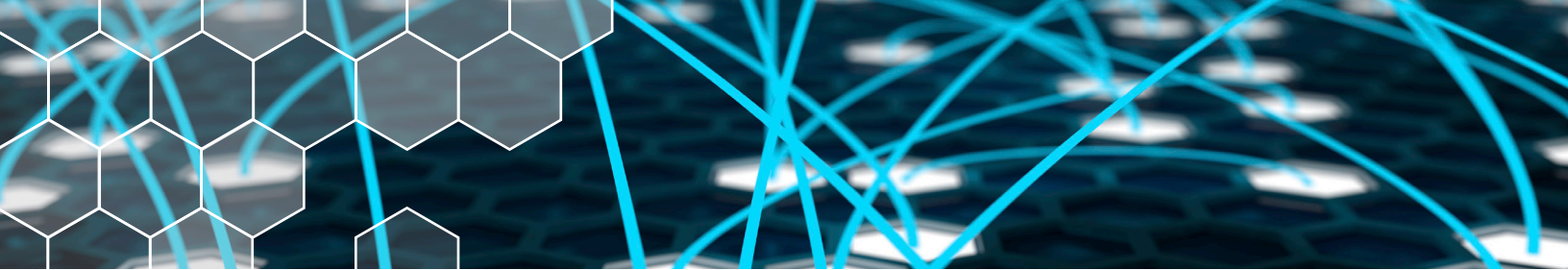


Anthony Tang

Board chair



Pierre Boyle,
Université de Montréal



How CANet is seizing the challenge

The Canadian Arrhythmia Network is a multidisciplinary, multisector network of over 100 investigators, patients and healthcare providers who identify research priorities and then work with stakeholders to put the right solutions into practice. By using innovative technological and health systems solutions, and by aligning the needs of patients, healthcare, and industry, CANet will support: technologies that improve diagnosis; safe and effective treatments; and proven approaches to promote accessible and sustainable health services. An emphasis will be placed on empowering patients to manage their own arrhythmic diagnoses and treatments. This national and coordinated approach will help reduce premature deaths and suffering, while increasing quality of life, ensuring efficient use of healthcare resources and growing Canada's health-related industries.

Among the expected results

- CANet's targets for the next 10 years include:
 - a 10% reduction in sudden cardiac deaths;
 - a 20% reduction of atrial fibrillation burden;
 - a 30% reduction in healthcare utilization for syncope;
 - commercializing 5-7 new technologies arising from network-sponsored research; and
 - producing 30-40 new highly skilled arrhythmia researchers.
- Canada's capacity for clinical trials in arrhythmia will be strengthened by leveraging this country's world-class centres.
- CANet will simplify clinical research in Canada by developing common contracts, ethics harmonization case report forms and patient information consents.
- A Patient Advisory Council (PAC) will be established consisting primarily of patients living with arrhythmia and other stakeholders.
- Patients and caregivers will be supported in adopting smartphones, tablets and other personal computing devices to better monitor and manage their arrhythmia.
- CANet will provide formal research training in this regulation-intense era of clinical research and a formal process for mentoring.

