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## THE RIBURST STUDY (Reducing the International BURden of Stroke using mobile Technology)

Newsletter 11, September 2019

### Welcome to the 11<sup>th</sup> issue of the RIBURST study newsletter

#### Progress of the study

The study is progressing very well. Stroke prevention utilising the Stroke Riskometer is currently a flagship project for the World Stroke Organization (WSO). In this regard, the WSO together with the *International Journal of Stroke*, AUT University (New Zealand) and other experts around the world are developing a large social media campaign to profile the app on World Stroke Day on 29 October 2019.

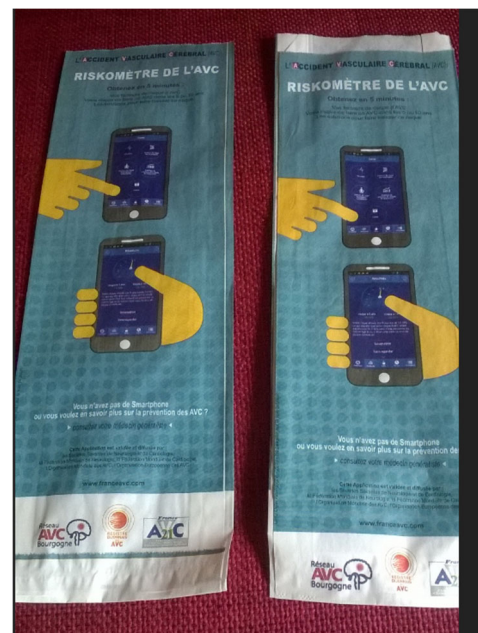
#### Updated app released this month

The NISAN team has been working hard on the new updated version of the app. The new version will be released soon and will include various improvements. There is now one comprehensive app with different language modules within the app and users will be able to track changes in their progress by using graphs on smoking and drinking cessation, improving diet and increasing their physical activity. One more exciting feature is that the app is now completely free of charge to download. In addition, users will be granted access to the premium content after sharing the link to the app with four other people. Important to note is that the previous version of the app that was launched in 2014 will no longer be updated once the new version is launched.



#### Clever advertising by the French!

Recently, a clever advertising campaign was carried out in Dijon, France: 12,00 baguettes were delivered by 3 bakeries in this bag.



# Launch of 2019 WSO World Stroke Day campaign in New Zealand

Kia ora,

As the CEO of Stroke Central Region in New Zealand, I feel very privileged to be a part of the World Stroke Organization's campaign.

Much of my personal experience was gained working for the Prince's Trust and an environmental charity Groundwork in the UK. Through working with people of all demographics, fundraising, raising awareness and developing people and communities in Manchester, I realised my passion for bringing people of all backgrounds together and making a difference to people's lives for the better.

I really enjoy working with my team here in the Central Region of New Zealand and we are very passionate about stroke and helping people to overcome issues in their recovery. Stroke prevention is something that we have recently taken on as a focus and we are determined to make a difference.

I am really motivated by the theme of WSO's campaign #DontBeTheOne. This is the kind of motivation our public need to make positive lifestyle changes. Let's be positive, let's give people the motivation that they need!

The Stroke Riskometer can be used as a tool to instigate these positive lifestyle changes. If we promote the Stroke Riskometer in a campaign that begins as a stroke prevention campaign on World Stroke Day, and then develops into an all-encompassing non-ego driven health promotion campaign that includes our whole health, recreation and not-for-profit sectors, it can be very successful.

When you consider that the risk factors for stroke are very similar to those of many other diseases and health issues in general, it makes complete sense that this campaign should be collaborative and across the whole sector. #DontBeTheOne fits with so many other issues (Cardiovascular, Mental Health, Cancer, Dementia, Diabetes) it would be a shame not to use it to its true potential.

The reason I say it should be non-ego driven is that people don't want to associate with reducing risk for something as debilitating as a stroke. It is more positive and motivating to speak about improving health and the benefits that come with it. "Stealth". By using the Campaign as an umbrella that other health organisations can use, it will widen the reach of the campaign and can have holistic health benefits.

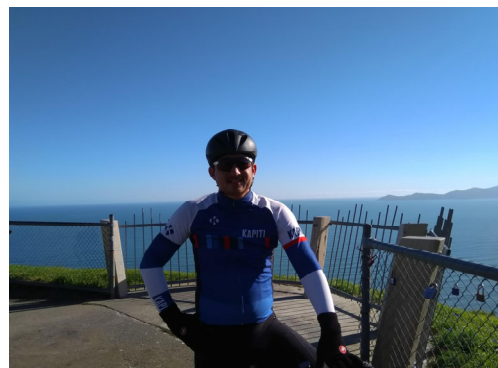
Here in New Zealand we are extremely lucky to have Prof. Valery Feigin and his team at AUT. Our campaign is developing into a year-long event. We are setting up collaborations with health not-for-profits, sports institutes, Nutrition NZ, and the health sector. We are joining forces with event organisers (running, walking, cycling, swimming and of course Rugby!) to encourage participation, which will effectively reduce stroke and health risks in general. Participants in the campaign can then post their new, healthier activities on social media with the hashtag #DontBeTheOne and challenge 3 others to do the same, with a snowball effect. Imagine the thought of millions of people retaking the test on World Stroke Day 2020 and discovering their risks had been significantly reduced!

That is the way our campaign can be positive and can capture the imagination of the public. That is how we can make a difference to the lives of millions of people and reduce the burden of stroke.

Kind regards,

Lee Pownall, **5-year Stroke Risk = 0.91%, 10-year Stroke risk = 1.61%**

Chief Executive Officer,  
Stroke Central Region



Lee cycling at the top of Paekakariki Hill

## World Stroke Day 2019 – Integrating the Stroke Riskometer

The World Stroke Day campaign hashtag is #DontBeTheOne. It will leverage the new GBD analysis, which shows global lifetime risk of stroke increasing from 1 in 6 to 1 in 4. Keeping to this single hashtag and using it for the Riskometer promotion within the campaign has advantages in increasing visibility and reach.

With regards to the Riskometer, the WSO will ask members to identify local high profile stroke champions who will run their stroke risk and share it with four other high profile friends; will push SSO members to mobilise the survivor and caregiver community to download, use and share the Riskometer using #DontBeTheOne and will put a social media promotion budget behind the Riskometer with the Hashtag #DontBeTheOne which will have a major impact on WSO reach.

### Researcher profile



Professor Sheila Martins  
Universidade Federal do  
Rio Grande do Sul  
Porto Alegre  
Brazil

Professor Sheila Martins, MD, PhD, MSc is Professor of Neurology at Universidade Federal do Rio Grande do Sul; Founder and President of Brazilian Stroke Network; Coordinator of the Stroke Programme at Hospital de Clínicas de Porto Alegre (public University Hospital); Chief of Neurology and Neurosurgery Service at Hospital Moinhos de Vento (private Hospital affiliated to Johns Hopkins Institute) and Vice-President of the World Stroke Organization.

Sheila completed her PhD in stroke neurology at the Universidade Federal de São Paulo in 2008.

In 2008, as advisor of the Brazilian Ministry of Health, Sheila started the organisation of the Brazilian National Stroke Programme. She collaborated to create the National Stroke Policy of the Ministry of Health (April 2012) and is now working for the establishment of the Policy, building stroke units and organising stroke systems around the country.

At the World Stroke Organization (WSO), Sheila is Vice-President, Chair of the World Stroke Campaign Committee, member of the Guidelines and Quality Committee and the Research Committee. Since 2009, she is the coordinator of the World Stroke Campaign in Brazil.

During the World Stroke Campaign in 2016 she started the promotion of the Stroke Riskometer in Brazil (Portuguese version) with high impact in the 2017 Campaign (Ten steps for stroke prevention). The population was taught how to download and use the app to motivate the users to know their personal risk factors and how to control them. A TV programme about stroke reached 480,000 homes and resulted in 30,000 downloads of the Stroke Riskometer app that day.

The app is a powerful tool for primary prevention, empowering the population to prevent stroke. During the 1st Latin American Stroke Ministerial Meeting in Gramado, Brazil (August, 2018), led by Dr Martins with representatives of the 13 countries and representatives from their Ministries of Health, the Declaration of Gramado was signed, with the commitment to prioritise the implementation of evidence-based strategies to prevent and to treat stroke in the region. One important elected strategy was to use the Stroke Riskometer to decrease the burden of stroke in the region. Sheila now is working with the Brazilian Ministry of Health on a proposal to implement the instrument nationwide.



## Translated versions of the app

Translation of the app into the Greek language has commenced. Translation into the Swedish language is almost complete.

Prof. Yoshihiro Kokubo (Japan) is working on ethics approval to release a Japanese version of the app.

Don't forget to check out the NISAN webpages:

- iOS version: <https://nisan.aut.ac.nz/Stroke-Riskometer/available-languages>
- Pro version: <https://nisan.aut.ac.nz/Stroke-Riskometer/stroke-riskometer-pro-version>

## Aggregated country data available

If any RIBURST study investigator would like to receive aggregated data for their country, you can request this information for your country from [riskometer@aut.ac.nz](mailto:riskometer@aut.ac.nz). Please note this is only possible if there are 2,000 or more study participants recruited from your country.

## Success stories

We invite RIBURST members to submit details of their 'success stories' of the use/implementation of the app to [bvangils@aut.ac.nz](mailto:bvangils@aut.ac.nz), for inclusion in future editions of the newsletter and sharing with the entire group.

## Contact information

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