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SEMI-ANNUAL REPORT, covering the period of 1 May 2003 – 31 December 2003

Submitted to the U.S. Agency for International Development; Bureau for Global Programs, Field Support and Research; Center for Economic Growth and Agricultural Development.

Title: Coronary Heart Disease Risk in Palestinian and Israeli Residents of Jerusalem

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Section I: Technical Progress

A) **Research objectives**: The previous report covered only the first two months of our activity; therefore, the same objectives are applicable to the presently reported period. These include:

1. Planning of the two parts of the study [registry of acute coronary syndrome (ACS) incidence and the coronary risk factor survey]
2. Establishment of administrative contacts with outside institutions for access to data required for the undertaking of the ACS registry and coronary risk factor population survey.
3. Recruitment and training of staff
4. Preparation of forms
5. Initiation of registry data collection and entry.

B) **Research Accomplishments**:

1.i. Planning: The infrastructure for the acute coronary syndrome incidence arm of the study is now set up. Data collection will commence in January 2004 for coronary deaths and in March 2004 for hospitalized patients. This includes both Israeli and Palestinian patients, residents of Jerusalem.

ii. Most of the steps necessary to implement the population survey have been completed for the survey of the Israeli population. A number of steps have yet to be finalized on the Palestinian side (see below). We await receipt of the study sample to be drawn from the National Population Register by Hewlett-Packard which holds the government contract to provide these services. Up to 3-4 weeks will elapse from arrival of the sample until actual examination of participants can begin.

2. Contacts with outside institutions and permissions

During this period we established contacts with key outside institutions for approval and access to indispensable information. It included Israeli as well as Palestinian institutions and was the major cause of delay in commencement of data collection. These included:

i. Negotiation with the Israeli Ministry of Interior for the legal approval to receive a random sample of the East and West Jerusalem population, where an obstacle was recent legislation regarding privacy of personal information and the sharing the National Population Registry database with external bodies, among them an East Jerusalem hospital . Approval was finally granted in September 2003

ii. Only after approval by the Ministry of Interior were we able to begin negotiations with the HP-Compaq Company [contracted by the Ministry of Interior to hold the National Population Registry database, and to sell services] regarding sampling. A contract to provide the required population sample was finally signed in December 2003. From payment to supply of the sample 3 months will pass.

iii. Negotiation with the Jerusalem District Health Office for access to all Death Notifications of East and West Jerusalem and for the Office's approval to contact additional institutions for gathering information about causes of death and obtaining actual addresses of next-of-kin. These include the police, the National Forensic Pathology Institute, religious burial societies which handle virtually all Jewish Israeli burials, other district health offices, hospitals, nursing homes and general practitioners. Access to Death Notifications and to the forensic pathology reports was granted on the end of October 2003 following the approval of the Director

of Public Health Services of the Israeli Ministry of Health. We learned that the system of death notification and of obtaining a burial license in Jerusalem had changed recently such that our previous methods to obtain updated addresses of next-of-kin had to be revised. This necessitated an official meeting of the Hadassah investigators and the Directors of the Jerusalem District Health Office with directors of the main burial societies which the District Health Office set for the end of January 2004—until then we could not commence data collection.[The main burial societies (4 of the total of 13) attended a successful meeting– they agreed to alter their procedures in order to assist in the study and provide the necessary information to the District Health Office]. We will tailor our methods to manage the somewhat different systems for Israeli and Palestinian application for burial licensing. A periodical two weekly review of Death Notifications by Dr. R. Fink is scheduled to begin on January 1 2004. A candidate to perform administrative work associated with reviewing Death Notifications [to be employed by the study] was approved by the District Health Office. The District Health Office has insisted that it authorize telephone interviewers of next-of-kin, a formal process that takes time. We have received approval for 2 people—one who will interview in Hebrew and one in Arabic. The interviewing is scheduled to begin in February/March, 2004.

iv. Negotiation with the Directorate of the Makassed Hospital for granting 3-room space inside the hospital for performing the population survey was delayed due to a prolonged absence of the Director. A meeting finally took place on the end of December, and was very positive. The project received the renewed support of the hospital Director, and the required space is to be found until the end of February after consultation with the Islamic Charitable Society that runs the hospital. A bank account dedicated to the study was finally set-up in east Jerusalem to facilitate transfer of the study funds to Makassed. Hadassah transferred the first installment earmarked by USA-AID for Makassed after receiving the necessary formal documentation. Makassed is not a research institution and did not have the routine infrastructure to handle research accounts.

v. Space for performing the West Jerusalem population survey at the Hadassah Ein Kerem Hospital Campus was granted without delay, but with a proviso that the space (which belongs to the Genetics Therapy Department) can revert to its owners if needed for its uses after a one-month notice.

3. i. Recruitment of staff for the West Jerusalem population survey. 6 people were recruited, 3 will begin their training in January 2004, and the additional 3 will begin in February 2004.

ii. We recruited a coordinator for the East Jerusalem population survey team. The selected person is to be hired by the Makassed hospital in February 2004. She is a Palestinian graduate of the International Master of Public Health course of the Hebrew University-Hadassah School of Public Health [in which the Hadassah PI teaches], and is aware of the methodological expectations for standardization and quality control.

iii. We recruited a person to do the official work on suspected coronary deaths in the District Health Office and to interview next-of-kin in Hebrew (she holds an MPH degree from our School of Public Health) (she will be hired as of January 1, 2004), as well as an Arabic-speaking nurse to interview the Palestinian next-of-kin (who will be hired in February 2004).

4. Preparation of study instruments:

i. Preparation of a Hebrew and English instruction protocol for both staffs of the population survey.

ii. Preparation of forms for the ACS incidence study – registration and interview of next-of-kin. Translation to English and Arabic will be undertaken in February 2004. A registration form that records all potential cases was programmed and installed for data entry.

iii The survey interview instruments are in final stages of preparation.

C) **Scientific Impact of Cooperation**: - Further studies regarding cardiovascular disease, diabetes and psychosocial stressors related to the conflict in the Jewish and Palestinian population, that will build on our study base are currently being planned. We may also incorporate the Palestinian medical staff of an additional east Jerusalem hospital.

D) **Project Impact**: -too early to assess

E) **Strengthening of Middle Eastern Institutions**: -The study is beginning to provide an infrastructure for population-based clinical research at the Makassed hospital.

F) **Future work**: too early

Section II: Project Management and Cooperation

A) **Managerial Issues**:

Administrative—we have dealt in some detail (above) with the administrative hurdles faced in launching and maintaining an ambitious study such as ours.

Budgetary –the main budgetary hurdle was the setting up of a separate bank account for our Makassed co-PI and the safe transfer of funds to that account. This was completed in December 2003. Both Dr Hussein, the Makassed co-PI AND the hospital vice-director are authorized to sign withdrawal of funds from this account for the purpose of the research. Dr Hussein was unable to purchase the -80 freezer and refrigerated centrifuge in the absence of this account and in the absence of the specific authorization of the hospital director. We hope that the way is now open to purchase these items [as of mid February the Palestinian co-PI remains limited in his authority]

Staff:

- Mrs. Hana Shuv (MPH) will be employed from 1 January 2004 to assist in case finding of eligible deceased and to serve as the Hebrew next-of-kin interviewer.
- Mrs. Ilian Sababga (nurse) will be employed in February 2004 as the Arabic-language interviewer of Palestinian deceased next-of-kin.
- Mrs. Sarah Marc , Mrs. Or Nativ (MSc) and Mr. Asaf Biyamini (BA) will start their training in the procedures of population survey (physical examination, interviewing and blood processing and organizational duties in the Israeli part of the population survey) in January 2004
- Mrs. Shunamit Hollender, Mrs. Ifat Niv and Mrs. Helena Kvirkalia will start their training in the procedures of [the west Jerusalem] population survey in February 2004.

-Mrs. Rona Meshiah will be hired as a recruiter of the study population for the West Jerusalem survey upon the receipt of the population random sample. We are looking for additional recruiters. This is a crucial facet of the study.
Ms Zippi Ochion will start performing secretarial tasks and data entry from January 1 2004
- Mrs. Ahlam Kastiro (about to receive an MPH degree) is to be employed as the coordinator and supervisor of the field team for the East Jerusalem population survey in February 2004. Members of the team at Makassed will be recruited by Dr Hussein and Mrs Kastiro in consultation with the Hadassah team.

Time table changes: Due to the delays in receiving necessary permission from outside institutions (as above), the Acute Coronary Syndrome registry will begin on January 1 2004. The coronary risk factor population survey is scheduled to begin on March 2004 (but this is dependent on the population sample being delivered on time)

Equipment: major items purchased during the reporting period were for
The Israeli team - 2 computers,1 printer and a -80 deep freezer
The Palestinian team - 2 computers

Special concerns: -

B) Cooperation, Travel, Training and Publication:

1. Cooperation. In addition to frequent telephone contact, several meetings of both groups took place:
- Dr. Hussein from Makassed visited the Hadassah Hospital. At this meeting scientific aspects of the current study, as well as its potential ramifications, were discussed. Dr. Hussein visited the site at which the West Jerusalem population survey will take place and met the team of the Epidemiology unit during a session of examination of participants of another population study, to learn about the organizational needs of the Makassed hospital for performing similar tasks.
- Meetings took place at the Makassed hospital in east Jerusalem between the Hadassah and Makassed teams, which also included Dr Ayyesh, the head of the scientific laboratory in Makassed hospital. The issues discussed included organization of the population survey with a focus on space requirements, location of the freezers for blood samples storage, backup systems for the freezers – emergency electricity generators and 24-hour support by the Makassed cooling engineer. Dr. Ayyash promised his personal supervision of crucial aspects of the blood sample collection, processing and frozen storage to allow comparability with the west Jerusalem survey.
- A long-awaited meeting with Dr. Khaled Qurei, Director of the Makassed hospital, Dr. I. Hussein and Dr. R. Fink took place at Makassed as described in item 4 of section 3 (Research Accomplishments).

2. Training. We have related to this issue in above sections

3. **Publication:** this is premature

Request for USAID Actions: - No request at this stage