

News

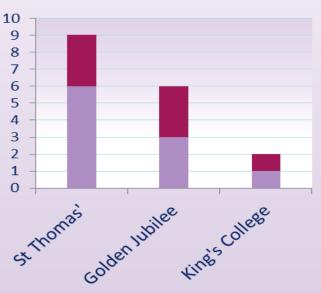
The first REVIVED Investigator meeting was held on the 27th February with nearly 70 people attending from around 22 hospitals. A particular thanks goes out to the people who presented and there were some very entertaining talks. A full meeting update will be included in April's Newsletter.

February has been another good month for trial progress with 7 patients recruited and site initiations at Kettering (10th February), Manchester (14th February) and Leeds (28th February). The site initiation at Liverpool Heart and Chest Hospital has been rescheduled to the 3rd March.

There are now 11 sites able to recruit, and it is hoped that randomisation will begin at more sites in March.

17 patients recruited Site Progress Summary

Sites currently recruiting (3)



Sites currently screening and able to recruit (8):

New Cross Hospital in Wolverhampton, Birmingham Heartlands Hospital, Edinburgh Royal Infirmary, Glenfield Hospital in Leicester, Royal Bournemouth, Lister Hospital in Stevenage, Kettering General Hospital, Manchester Royal Infirmary

Screening but awaiting R&D approval (2):

Northern General Hospital in Sheffield, Leeds General Infirmary

Awaiting site initiation (3):

Liverpool Heart and Chest Hospital, Freeman Hospital in Newcastle, James Cook Hospital in Middlesbrough

Reviewing documentation (14):

Southampton General Hospital, University Hospital of North Staffs in Stoke, Trent Cardiac Centre in Nottingham, Queen Alexandra Hospital in Portsmouth, Royal Free Hospital in London, Papworth Hospital in Cambridge, Royal Brompton Hospital in London, Basildon Hospital, Wythenshawe Hospital in Manchester, Harefield Hospital in Middlesex, Sunderland Royal Hospital, Victoria Hospital in Blackpool, Hammersmith Hospital in London, St George's Hospital in London.

FAQ

Q. Can patients who have viability but also have ischaemia be included? If so and ischaemia is present, is there a cut off for the amount of ischaemia that is present?

A. Yes, patients with ischaemia can be included. You only need to demonstrate viability to get in the study but going on to look for ischaemia is encouraged where possible (i.e. going on to high dose dobutamine on stress echo or adenosine perfusion MRI). There is no recommended ischaemia cut off but the MDT can use the information if they wish.

Short Course in Clinical Trials

The Medical Statistics Department (MSD) at LSHTM will be running a short course in clinical trials.

The course will provide attendees with a clear understanding of the essentials of phase III Randomised Controlled Clinical Trials (RCTs). Lectures and practical sessions cover the key issues in designing and conducting RCTs.

Topics that are addressed are both relevant to the public sector and the pharmaceutical industry.

The course is relevant to those who are keen to gain understanding of the rigorous evaluation of interventions in health care including health care workers, research managers and other scientists with an interest in this field.

Places on the course are limited.

The course runs for 5 days from 16th to 20th June 2014.

For Further information and application form, please visit http://www.lshtm.ac.uk/study/cpd/sct.html

eCRF

The eCRF is also now live and ready for use by sites, and login details have been sent to those centres who have already randomised patients. There is an eCRF SOP which is sent when accounts are set up and additional advice can be given if required. When centres recruit their first patient an account can be set up for those responsible for data collection and entry. In order to get an account you must have already completed and signed the delegation log. Once you have accessed the eCRF and are happy to start using it a training form from the site file must be completed and returned to us.



If you have any questions about the eCRF please contact either steven.robertson@lshtm.ac.uk (on the right) or matthew.dodd@lshtm.ac.uk (on the left).

Screening Logs

Screening data is vital at this stage of the trial for improving the recruitment process and ensuring that recruitment is feasible so please remember to complete the monthly screening log and return it to Richard Evans at the email address below.

A blank screening log will be provided after the site initiation, or alternatively the data can be submitted on an excel spreadsheet.

Contact information

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This project was funded by the National Institute for Health Research Health Technology Assessment (NIHR HTA) Programme (project number 10/57/67).

National Institute for Health Research