REVIVED-BCIS2 Newsletter Issue no. 12 October 2014



News

There is a lot of good news for REVIVED this month. A successful site initiation was held at the Royal Free Hospital, London at one of their regular departmental seminars. This was great for discussion of cases and getting the message out to the wider cardiology department. Sheffield have recently received R&D approval, and are ready to start screening and recruitment. Also, great news from Bournemouth who recruited their first patient in September. Congratulations to Peter O'Kane, Sarah Kennard, Cathie Purnell

and the rest of the team.

Recruitment update

Recruitment for REVIVED remains a challenge. The trial is now approximately 30 patients behind the original target. There have been positive signs of improvement at all sites since the amendment. Screening efforts have been increased and recruitment has been at a wider range of sites. More suggestions for how recruitment can be improved will continue to be developed. These will distributed through the newsletter, teleconferences and email.

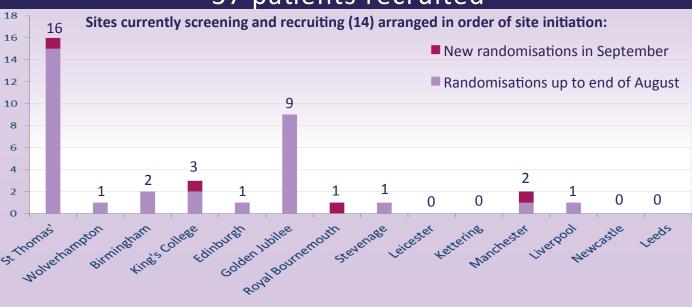
Breaking news on Screening Logs!

The requirement for monthly screening logs is being stopped. Thank you to everyone who has been sending in screening logs over the last year, however, it is felt that the time spent on this could be used better. Specifically, it is hoped that this will free up more time to spend on screening. After sending in your September screening log, please continue to only use your patient tracking log. New instructions on screening requirements will be sent out shortly.

District General Hospital Month

October is DGH month for REVIVED. One common thought is that many eligible patients are in the community. DGHs often see more stable patients on a regular basis which makes them a great source. Divaka, Sophie and Lucy at St Thomas' have provided all the information they have on how DGH involvement works at their site. See page 2 for more information. DGH referrals have proven successful at St Thomas' with several referrals per month.

Site Progress Summary 37 patients recruited



How do DGH referrals work at St Thomas'?

When first getting in contact with DGHs, Divaka sent an email to everyone explaining the trial and the type of patients that could be eligible. This is followed up with regular reminders to keep the trial fresh in people's minds. All the relevant contacts from the DGHs have been added to the newsletter mailing list as an additional reminder about REVIVED. A template email is available for contacting your DGHs to ask for referrals. This works best coming from the PI/Co-I and should be adapted to fit your specific site.

Specific clinic slots have been reserved for ischaemic cardiomyopathy patients that have been referred to St Thomas' for assessment. Referred patients can come in and have a one stop service for all required tests such as Echo, Dobutamine Stress Echo and bloods. At this point the patients can be approached about the REVIVED study and the Patient Information Sheet is given out. This requires forward planning from the nurses and the wider clinical team. It is important to remember that these are not research specific clinics but are purely clinical.

The patients referred are very early on in the process and some may not have up to date echos or any other tests. The important thing here is to enter the patients onto the possibles log and start to introduce the possibility of being involved in the REVIVED study.

Having a clear point of contact for referral is important. At St Thomas' this normally comes through emails to the PI but could also be to the research nurses themselves.

The DGHs themselves have been responsive and have no issues with sending patients for these clinics for assessment. The patient gets a more comprehensive workup whether they are suitable for the study or not.

DGHs that refer to St Thomas' and the teams involved

Medway Maritime Hospital: Shaumik Adhya, Evengelos Fountzopoulos, Sandeep Gandhi, Adrian Stewart

Darent Valley Hospital: Savio D'Souza, Winston Martin, Jagdip Sidhu.

Queen Elizabeth Hospital: Shoaib Hamid, Sundip Patel, Bal Wasan

Maidstone Hospital: Bet Mishra, Laurence

Nunn, Scott Takeda.

Kent and Canterbury: Mark Fenton, David

Lythall

DGH referrals, like any other screening source, are not guaranteed to identify eligible patients. It is important to consider this information in relation to your site. Some centres will find this a rich source of patients and may become one of the best forms of recruitment.



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