



Issue 31 June 2016

Preoperative intravenous iron to treat anaemia in major surgery

PREVENTT News



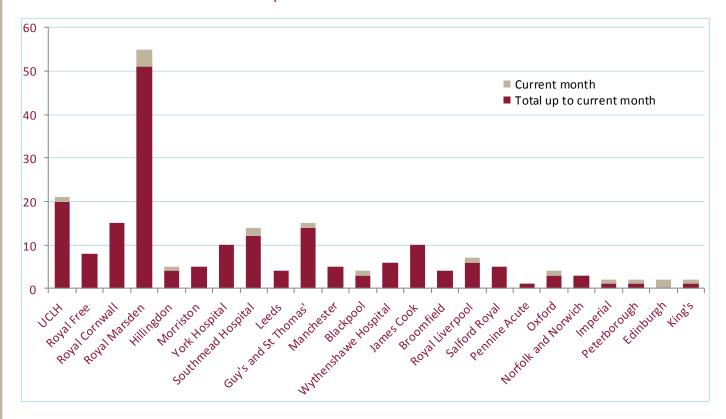
Welcome to the June newsletter for PREVENTT.

Firstly, a big thank you to all sites for helping us to reach the halfway point for recruitment. Our 250th patient was recruited by the team at Edinburgh. This is a fantastic achievement and it is all down to the hard work and support that all our recruiting sites have provided over the past few years. All sites should now have received their PREVENTT mugs with a few additional treats as a thank you from all the team.

PREVENTT Recruitment - 261 Patients Randomised

During May, 17 patients were recruited which means that we have exceeded our monthly target of 10 patients. This is also the top month for recruitment so far during 2016 which is fantastic and second best month for recruitment since we opened in September 2013. Target recruitment is still 10 patients per month, however any additional patients each month will help us reach our target of 500 more quickly.

Overall, 12 sites recruited at least one patient into the trial during May. It is encouraging to have recruitment spread across so many sites. This month special mention goes to the teams at Edinburgh, Southmead and the Royal Marsden who all recruited more than one patient.



PREVENTT Raffle Winner

Congratulations to Ewen Harrison, Alastair Lang and the team at the Royal Infirmary Edinburgh who are the winners of this month's box of chocolates! Thank you to the team for their ongoing support for the trial. Another prize is up for grabs in June so please keep screening and randomising patients.

PREVENTT-The halfway statistics

6th January 2014 - first patient recruited at Royal Cornwall Hospital

March 2015 - top month for recruitment (18 patients randomised)

Thursday - Most popular day for randomisations (**75** patients randomised)

5th February 2015 - top day for randomisations (4 patients randomised)

11.00am - 12noon - most popular time for randomisations (48 patients randomised)

Site Profile: Hillingdon

PI: Dr Cheryl Messer (Consultant Anaesthetist)

Co-investigator: Dr Neil Verma (Anaesthetic Registrar)

Lead Research Nurse: Mariam Nassari

PREVENTT opened at Hillingdon Hospital in October 2013 and during the first two years only two patients were recruited. However, since putting certain measures in place in January 2016 we have successfully enrolled an additional three patients (over the course of three months)!

The answer lay in regular team meetings, increased communication, raising awareness of the study amongst surgeons, increasing the number staff that can provide cover and providing consistency in the staff who track patients through the recruitment process. Our PI, sends out regular reminder emails along with study entry criteria and study newsletters to the surgical team, raising the profile of the study and encouraging awareness to keep identification of participants at the forefront of our colleagues' minds.

Our unblinded study nurse has identified and trained an experienced, GCP certified haematology nurse so that we could add a second nurse to our unblinded log. This additional cover has meant that patients are not missed due to unblinded staff unavailability and has made the (sometimes tight) infusion window more practical to achieve. In addition to this, having a data manager trained on the study protocol has meant that the running of the study can be supported at all times. Our co-investigator, has tirelessly liaised with various teams, providing trial information and encouraging surgeons to put their patients forward (he is currently arranging a trial presentation for the gynae team). This has expanded the pool of patients we have access to, for example, as a result of Dr Verma's efforts, we are now able to include large hernia open surgeries. Thanks must also go to our R&D manager, whose encouragement has spurred on the entire team!

The biggest factor in our recent success must be attributed to Dr Neil Verma and Mariam Nasseri. Their teamwork, focus and experience in the screening and approaching of patients has by far been our biggest asset.

In summary our top tips for improving recruitment are:

- Improved communication and team meetings held more regularly
- Increased awareness within different teams through presentations and reminder emails
- Addition of a second unblinded nurse
- Consistency in chasing up the potential patient list
- Improved staff cover for holidays/sickness

Contact Information

Website: http://preventt.lshtm.ac.uk/

Tel: +44 (0)20 7927 2071 Fax: +44 (0)20 7927 2189

Email: preventt@lshtm.ac.uk/rebecca.swinson@lshtm.ac.uk

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