REVIVED-BCIS2 Newsletter Issue no. 24 October 2015



## News

September was a busy month with site initiations held at Coventry on the 11th, Salisbury on the 17th, and a pre-initiation teleconference was held with York Hospital on the 24th.

Congratulations and thanks to Judy Radmore, Zoe Nicholas, Nick Curzen and the rest of the team at Southampton who recruited their first patient this month. This is a major milestone as it makes them the 20th site to recruit to REVIVED, with 6 new sites in the last six months.

Royal Bournemouth recruited their 10th and 11th patients making them this month's star recruiters!

October should be another good month for recruitment with a number of potential patients in the pipeline, continuing the positive momentum built up over the last six months.



### **LUCKY NUMBER**

Unfortunately there was no winner of the lucky number in September.

This month's lucky number is 136 Better luck this month!

### Echo core lab

This is a reminder to please send in your baseline, 6 months and 1 year echos to the echo core lab as soon as possible after completion.

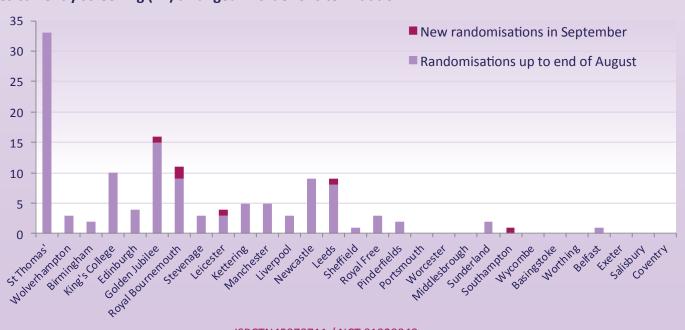
If you are having any issues regarding the echos, please contact

rebecca.matthews@lshtm.ac.uk

## Site Progress Summary

# 126 patients recruited

Sites currently screening (27) arranged in order of site initiation:



#### **REVIVED** at Leicester

Jo Hughes, Howard Fairey and Kris Kenmuir-Hogg, Research Nurses at Glenfield Hospital, Leicester have written an account of how their first 3 patients were recruited (*written in June 2015*):

At Glenfield we have managed to recruit 3 patients over the last 4 months and although these 3 patients were identified through the catheter lab there has been a collaborative effort to increase screening and to promote awareness about REVIVED.

We have increased the screening of patients looking over approximately 600 MRI scan reports and also receiving a list of patients from the Heart Failure specialist nurse, of patients with ejection fractions of ≤35%. Up to now this has provided approximately 40 potential patients and although as of yet we have not recruited anyone from these searches this did give us: 2 patients that were eligible but unfortunately declined; a further 2 patients will hopefully be randomised in September; 24 patients that after further discussion with their individual consultant have been deemed unsuitable and we currently have around 10 patients that we are hoping to approach over the next couple of months.

## **Authorship Policy**

The REVIVED TSC met on 8th September and one of the items discussed was authorship of manuscripts that will arise from the trial. The contribution of all sites (PIs, co-Investigators, study coordinators and research nurses) will be explicitly acknowledged in any manuscripts. In addition PIs from sites with the best recruitment figures will be invited to join the REVIVED writing committee, who will plan and compile the trial manuscripts. Those selected as authors would need to fulfil standard journal authorship criteria.

It is anticipated that approximately 10 site PIs will be invited to the writing committee on this basis, but if a natural cut-point emerges in recruitment figures when considering centres ranking 10-15, the TSC would be happy for the writing committee to be more inclusive. To avoid disadvantaging centres that join the trial late, average monthly recruitment rates (from the date of the first randomised patient) will be considered as well as total numbers of patients recruited. Centres that do exceptionally well may be invited to nominate an additional co-investigator to join the writing committee.



It is hoped that this system will reward those centres and investigators whose hard work will ultimately determine the success of REVIVED. Please let the CTU know if you have any questions or suggestions.

## Screening Logs

This is a quick reminder that first snapshot of screening will be collected during the month of November. All patients with an EF≤35% and coronary artery disease that have been considered for the trial over the course of the month should be logged. Screening logs can be submitted by email or fax.

A template screening log will be sent out to all open sites in mid-October.

If you have any questions about what you should be including on your log, please get in touch.

## Contact information

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