REVIVED-BCIS2 Newsletter Issue no.32 July 2016



Recruitment update

June has been a brilliant month for REVIVED, the best month ever with 17 patients randomised from 12 different sites. This is the best month in terms of patients recruited and sites recruiting and brings our total over the 200 milestone. Well done everyone for all your hard work!

Special thanks go to Sunderland Royal Hospital, King's College Hospital, Royal Bournemouth Hospital, Golden Jubilee National Hospital and St Thomas' Hospital who all recruited 2 patients this month.

Thanks also go to Barts Heart Centre, London; Royal Victoria Hospital, Belfast; Freeman Hospital, Newcastle; Lister Hospital, Stevenage; Edinburgh Royal Infirmary and Northern General Hospital, Sheffield who recruited one patient each this month.

Finally, congratulations to Raquel Gomez, Nick Pegge, Sukhbir Dhamrait and the rest of the REVIVED team at Worthing who recruited their first patient in June.

There is a lot of hidden work behind the scenes identifying, screening and consenting patients, and this does not always result in patients being recruited. Thank you all. Your work is hugely appreciated even if it is not shown in the recruitment figures at the end of the month.



202 Patients randomised!



Lucky Number!

Congratulations Marion McAdam, Mark Petrie and the rest of the team at Golden Jubilee National Hospital, Glasgow who recruited patient 200 on 27th June 2016. special prize is on its way to you.

Informed Consent for REVIVED

As you know, once you have found an eligible patient, the final step before randomisation is consent. With all the challenges of finding eligible patients, it can be very frustrating for patients to drop out at the consent stage. To help the patient make an informed decision, below are some helpful tips and points to keep in mind:

- There is no evidence to say that either PCI or OMT alone is best for this disease area
- You will be closely followed up for any adverse events
- There are dedicated research nurses you can contact if you have any concerns about your treatment
- If your condition worsens and you are in the OMT group, you will still be offered PCI if it is clinically indicated
- PCI is currently performed routinely in the UK for the treatment of angina, is it not an experimental treatment
- Information we collect in this study will potentially improve the treatment of patients in the future



Although it would be preferable for all eligible patients to be entered into the trial, it is important to remember that the patient is free to make a choice to participate and not to coerce patients. Patients who are very reluctant to enter or have strong preferences are more likely to withdraw in the long term, so it is important to bear that in mind and always respect the wishes of the patient.

REVIVED at BCS

A regional meeting was held in Manchester on the evening of the 6th June, following on from the first day of the British Cardiovascular Society (BCS) annual conference. Representatives from 12 sites were present. Richard gave an update on trial progress, followed by talks by Mark Petrie highlighting the current lack of evidence for PCI for patients with heart failure, and Peter O'Kane who spoke about the local experience in Bournemouth. Thank you to Peter and Mark for presenting and to all who attended and have actively engaged with REVIVED, both at the meeting and over the course of BCS. Your support is hugely appreciated. There is a buzz about REVIVED at the moment which is apparent from the increased recruitment in May and June, and maintaining this momentum is the next big challenge for the trial.

HRA application

The REVIVED HRA application has now been approved and site set up can continue at a number of new sites. The HRA approval will not have any impact on sites already open. If you would like a copy of the HRA approval letter, please get in touch.

Contact information

Website: http://revived.LSHTM.ac.uk Tel: +44 (0)20 7927 2723 Fax: +44 (0)20 7927 2189

Email: revived@LSHTM.ac.uk / <a href="mailto:revived

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

