

# The ERIC-PPCI Newsletter

## News

Welcome to the July Newsletter. It has been another excellent month with 134 patients randomised in June. A huge milestone was passed this month with the 500th patient recruited into the trial. St Thomas' Hospital recruited this landmark patient, congratulations to Kirsty Gibson, Megan Smith, Divaka Perera and the ERIC-PPCI team there. ERIC-PPCI is now over a quarter of the way to the recruitment target of 2000 patients.

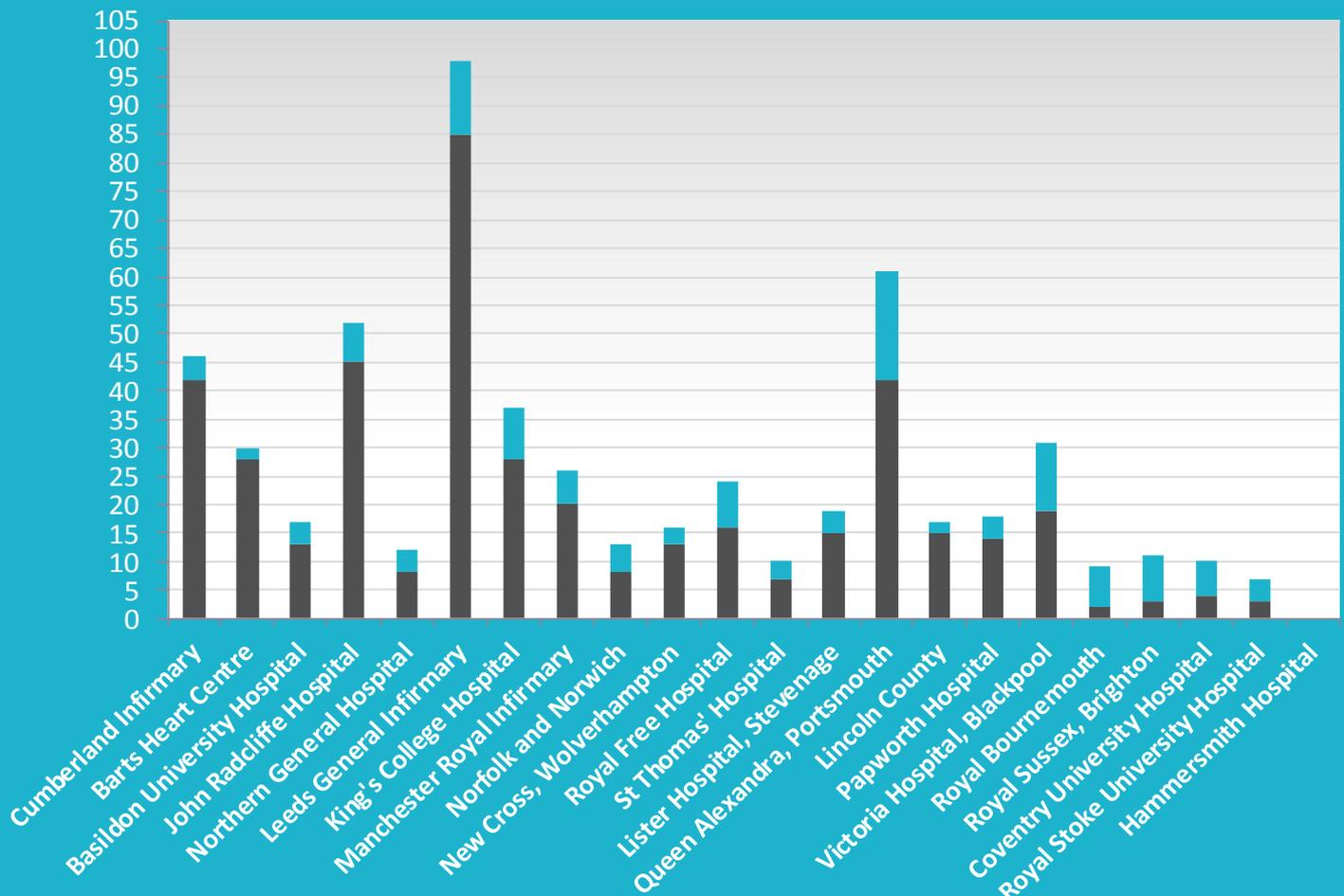
The top 3 recruiting sites for the month are Queen Alexandra Hospital Portsmouth with 19 patients, Leeds General Infirmary with 13 patients and Blackpool Victoria Hospital with 12 patients. It is very encouraging that all 21 open sites recruited this month and 19 of these recruited to or above their target. Thanks to all of you for helping make this trial such a success.

In other news, HRA approval was received in June and any participating sites not yet open have been contacted to resume set-up. A site initiation visit will be held at Birmingham Heartlands Hospital on the 19th July. There is now very limited space available for new sites to get on board so if you wish to be a part of ERIC-PPCI please do get in contact.

We wish you all a great summer, hopefully the weather will improve!

## 566 Patients Recruited!

### Recruitment Summary



## ERIC-PPCI at Queen Alexandra Hospital, Portsmouth



The team at Queen Alexandra, from left to right: Colin Longbottom, Dr Kalyar, Dr Dana (PI), Serena Howe, Trevor Smith, Clare Smith, Anne Suttling, Amy Getty, Charlotte Turner and Rosalynn Austin.

At Queen Alexandra Hospital in Portsmouth we have been very successful in our involvement in the ERIC-PPCI trial, and are now at the point that we are able to screen nearly every patient arriving at our unit with a ST-elevation MI and recruit 60-70% of all comers in to the study. We owe our recruitment success to our amazing and enthusiastic teamwork within the Cardiology department, including the interventionalists, cath lab staff, radiographers and of course, the research nurses and clinical trials assistant keeping on top of all the data entry.

At the start of our involvement with ERIC-PPCI, we were only able to recruit patients in to the trial during office hours, with significant involvement of the research nursing team in the randomisation of patients. To enable us to recruit patients on a 24/7 basis, we approached the cath lab radiographers to take on the role of obtaining verbal assent from the patient as they are wheeled in to the lab, and subsequently randomise the patients, while the rest of the team get the patient ready for PPCI. The radiography team was very enthusiastic about the idea of becoming involved in research, and were all given protected time to complete their GCP training. We now have 10 radiographers on the delegation log, actively participating in recruitment into the trial. The un-blinded research nurse very rarely has to get involved with the randomisation process; we just wait for the notification to pop into our mailbox.

In order to keep on top of the data entry, we aim to consent patients within the first 24h of admission when possible, photocopy their notes, and complete the majority of the CRF. The technical aspects of the PPCI are subsequently completed by the Interventionalist who undertook the procedure. In this way we are able to complete the majority of the eCRF within a few days.

As a team we are all very proud of our success, but it is only through the team work within the department that we have been able to achieve it, and be able to offer participation in this trial to the vast majority of our STEMI patients.