# eGFR-C Newsletter

#19 December 2018

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### Message from the Chief Investigator: Dr Edmund Lamb

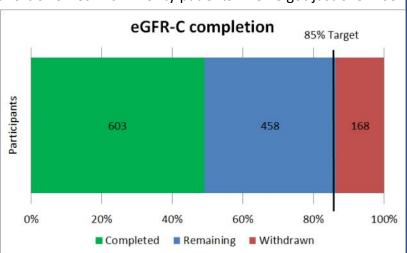
Thank you all - research nurses, clinical trial assistants, lab staff and co-investigators - for all of your continued efforts this year. I am very grateful for the work that everyone involved in the study has put in so far. In every meeting and newsletter we have to keep driving the message of minimising dropouts so we have a successful study, but with one year of follow up left it's worth thinking about how successful we've been so far.

We've had over 7000 patient visits, and we've centrifuged and stored over 70,000 aliquots of serum, plasma and urine. We've got a successful biological variability study currently submitted for publication. We've got a large cohort of UK ethnic minority patients. We've got just over 400

more iohexol visits to have, and then we'll be finished.

Hopefully all this will add up to a study that can improve clinical practice.

Thanks for helping us get this far, and please remember to pass on our thanks to all of our patients.



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#### **CRF** completion table eGFR-C office closure:

#### **Christmas 2018**

The study office will be closed due to University of Birmingham closed days from Friday 21st December 2018 to Thursday 3<sup>rd</sup> January 2019.

In the event of any SAEs, please email r.ottridge@bham.ac.uk and follow the instructions on who to contact.

603 final CRFs have been returned, and overall we have an (excellent) average of 96% CRF return rate. Our leaders this month in promptly returning data are:

- Derby 100% of due CRFs returned 1.
- 2. Leicester - 100%
- 3. Birmingham - 99%
- East Kent 99% 4.
- 5. Salford - 94%
- 6. King's - 82%

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The views expressed in this newsletter are those of the authors and not necessarily those of the NIHR, NHS, or the Department of Health.









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### Study completion vs study drop out - December 2018

We need 1000+ completed iohexol tests at 36 months for 90% power. This means a maximum 15% dropout rate. Dropout means withdrawing, dying, or being lost to follow up. On the graphics below, as far as possible we need every site to have their green bar (patients completing) reach the black 85% line before their red bar (patients dropping out) does.

Some sites have passed the line or may do soon, but every iohexol test completed will make our results more reliable.

