Trial Management & Data Management

Launch Meeting

3rd April 2014, Lucas House, Birmingham









Trial coordination

Birmingham Clinical Trials Unit

- Trial coordination
- Data collection
- Data analysis
- Design and maintenance of the trial website and database
- Randomisation
- Safety reporting



Hull and East Yorkshire Hospitals NHS Trust

- Chief Investigator
- Sponsor
- Oversight
- Trial design
- Clinical lead

Hull and East Yorkshire Hospitals



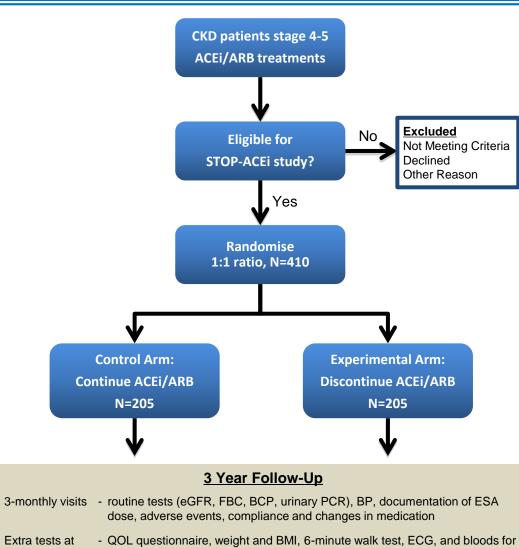
NHS Trust



Trial schema

2 years recruitment

3 years follow-up



annual visits

C-reactive protein, cystatin-C, NT-proBNP, ACE/renin levels and biomarkers



Patient Recruitment

Identify poter	ntial participants
Against inclusion/exclusion criteria	From medical records

Invite potential participants to take part					
1-2 weeks before next clinic appointment	REC-approved Letter to Accompany PIS				
Record details of all participants considered for STOP-ACEi in the screening log	REC-approved Participant Information Sheet				

Discuss participation in STOP-ACEi			
At next clinic appointment	Discuss risks/benefits - equipoise		

Informed Consent Process				
Appropriately trained medically qualified staff	Optional consents			

Final eligibility check

Appropriately trained medically qualified staff





Inclusion criteria

Aged ≥18 years (male or female);

CKD stage 4 or 5 (eGFR <30mls/minute using the MDRD equation) and not on dialysis therapy;

Progressive deterioration in renal function (fall in eGFR of >2ml/min/year over previous 12-24 months) as measured by linear regression analysis.

Treatment with either an ACEi or ARB or a combination of both for >6 months with at least 25% of the maximum recommended daily dose on the day of consent;

Resting blood pressure (BP) ≤160/90 mmHg

At least 3 months of specialist renal follow-up at the time of entry into the trial;

Written, signed informed consent to the trial.



Exclusion criteria

Aged <18 years;

Uncontrolled hypertension (>160/90mmHg) or requirement for 5 or more agents to control BP;

Undergoing dialysis therapy;

Any condition which, in the opinion of the investigator, makes the participant unsuitable for trial entry due to prognosis/terminal illness with a projected survival of less than 12 months;

History of myocardial infarction or stroke in preceding 3 months;

Participation in an interventional research study in preceding 6 weeks;

Pregnancy, confirmed by positive pregnancy test, or breastfeeding;

Inability to provide informed consent (e.g. due to cognitive impairment);

Immune mediated renal disease requiring disease specific treatment;

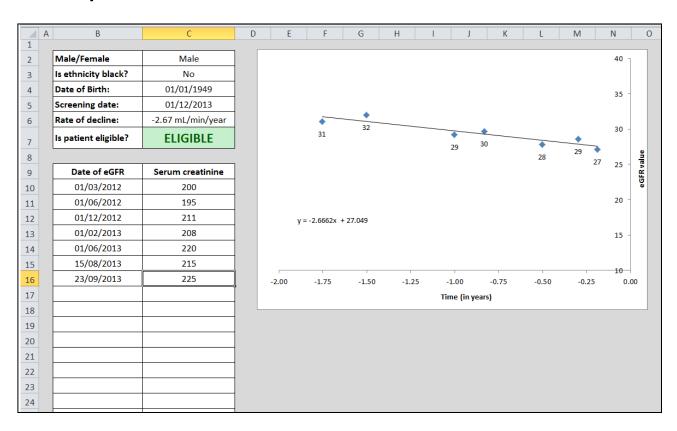
Known drug or alcohol abuse;

Inability to comply with the trial schedule and follow-up.



Eligibility - eGFR decline

Progressive deterioration in renal function (fall in eGFR of >2ml/min/year over previous 12-24 months) as measured by linear regression analysis.





STOP-ACEi Participant Screening Log



EudraCT number:	2013-003798-82	Investigator name:	Site name:	
Study title:		nised Controlled Trial of a	 nibitor (ACEi) /	Angiotensin Receptor Blocker (ARB)

Please record details of all participants considered for potential participation in STOP-ACEi and reasons for non-participation, where available.

Codes

A.	Recruited into STOP-ACEi	G.	Patient declined because in other research
В.	Not suitable because eGFR decline not >2mL/min/year	Н.	Patient declined because not interested in research/STOP-ACEi
C.	Not suitable because blood pressure too high, or uncontrolled	I.	Patient declined because visit assessments will take too long
D.	Not suitable because history of MI/stroke in previous 3 months	J.	Patient declined because concerned about trial intervention
E.	Not suitable because not currently on ACEi/ARB treatment	K.	Patient declined, but no reason given
F.	Not suitable because didn't meet other eligibility criteria (please specify)	L.	Other (please specify)

	Patient Initials	Patient DoB	Date of screening (dd/mmm/yyyy)	PIS	Recruited (yes/no)	Code/s see list on page 1	Further details	Study number (if recruited)
1.								
2.								
3.								

CONFIDENTIAL WHEN COMPLETED: PLEASE DELETE OR BLACK-OUT PATIENT INITIALS, DATE OF BIRTH AND HOSPITAL NUMBER BEFORE SENDING TO BCTU TO PREVENT SHARING OF PATIENT IDENTIFIABLE INFORMATION

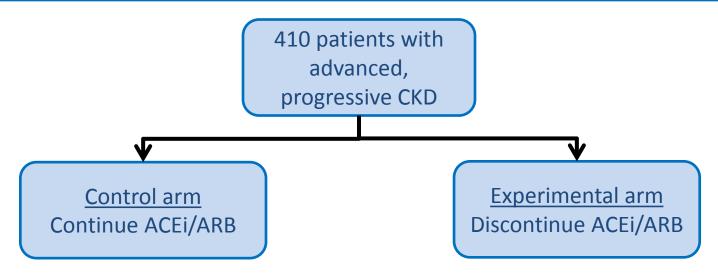
Informed consent

- As per GCP
- By appropriately trained and medically qualified personnel
- Must be delegated

After consent is obtained, can now randomise



Randomisation



What information is needed to randomise?

- Patient identifiers
- 3 x Serum creatinine to check eGFR decline
- eGFR to confirm stage 4 or 5
- BP to confirm controlled BP
- Eligibility check

- Who performed eligibility check
- Minimisation variables:
 - Diabetes, BP, age, proteinuria, eGFR
- Confirmation of informed consent

Everything on CRF01 - Randomisation Notepad!



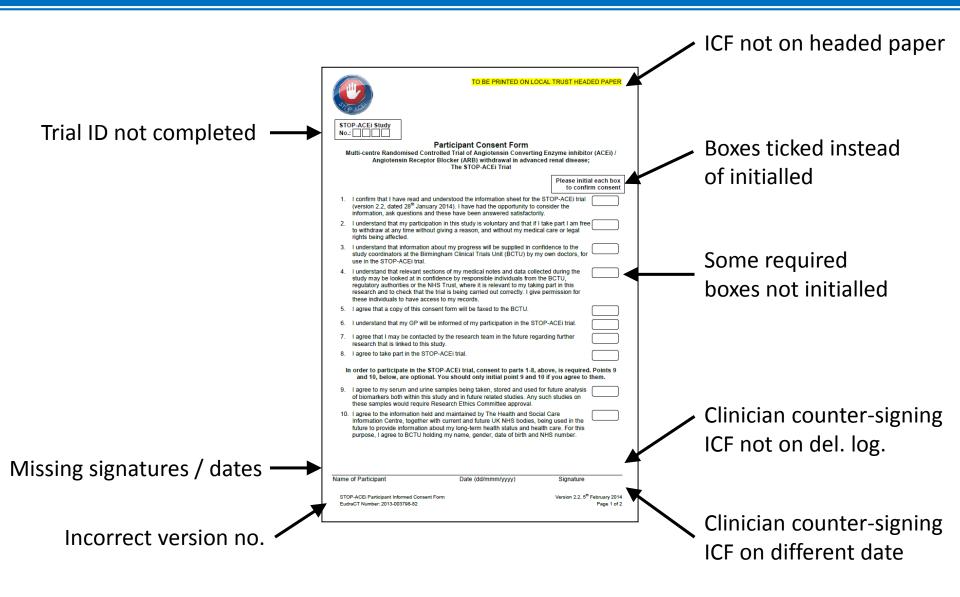
Randomisation







Common problems with ICFs





Continued consent and withdrawal

- Consent an ongoing process
- Continued participation and consent recorded on visit CRFs
- Withdrawal
 - Withdrawn if consent is withdrawn
 - Not if a participant just stops taking study medication
 - Cause should be documented on the appropriate form e.g. consent withdrawn, lost to follow-up etc.



After randomisation

- Fax the participant's signed consent form to the STOP-ACEi trial office
- Give the participant a copy of the following documents:
 - Participant Advice Letter for treatment continuation/discontinuation
 - A blank copy of the participant diary to be completed between visits and collected at each visit
 - A copy of the signed Consent Form
 - A copy of the Participant Information Sheet
- Send a copy of the GP letter for treatment continuation/discontinuation to the participant's GP
- File a copy of the Confirmation of Randomisation e-mail in the participant's case notes and a copy in the local Site File.
- File a copy of the Consent Form and Participant Information Sheet in the participant's case notes and file the original in the local Site File.
- Put the participant's details are listed with the Participant Trial Number in the Recruitment Log in the Site File.
- Perform baseline assessments



Participant Identification log

STOP-ACEi Participant Identification Log

STGP-ACE

EudraCT number:	2013-003798-82	Investigator name:		Site name:	
	Multi-centre Randon	mised Controlled Trial of	Angiotensin Converting Enzyme in	hibitor (ACEi) /	Angiotensin Receptor Blocker (ARB)
Study title:		ced renal disease; The S	• • • •	(g ()

Please record details of all participants that have been recruited onto the STOP-ACEi trial.

Trial Number	Participant Name	Participant DOB	Hospital Number	Date of Informed Consent (dd/mmm/yyyy)	Date of Randomisation if different (dd/mmm/yyyy)	Consented to giving biomarker samples? (yes/no)	Consented to giving access to central NHS data? (yes/no)

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STOP-ACEi Participant Identification log for <insert site name> EudraCT number: 2013-003798-82

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Trial visits and procedures

- Screening, baseline and randomisation
- Telephone follow-up at 4-6 weeks post-randomisation
- 3-monthly follow-up visits for 3 years

Baseline	Informed consent	Randomisation	Demographics
	Medical history	CKD aetiology	Lifestyle indicators
	Baseline medications		
Telephone follow-up	Compliance	Medication changes	AEs
3-monthly visits	Blood pressure	eGFR	Biochemistry
	FBC	ESA dose	AEs
	Compliance	Medication changes	
Annual visits	QOL questionnaire	Weight & BMI	6-minute walk test
	ECG	CRP	Cystatin-C
	NT-proBNP	ACE/renin levels	Biomarker samples



Casenote documentation

- See guidelines in ISF
- When patient is approached
 - Name of trial
 - Date approached about study or PIS given
 - Copy of PIS
 - Date of consent + record of discussion to show patient is 'informed'
 - Copy of signed consent form
 - Trial ID number
 - Arm they've been randomised to
 - Name of PI to contact about the study if any issues
- For each visit
 - Date and study visit number e.g. STOP-ACEi baseline visit
 - Any clinically relevant information e.g. medical history, changes to treatment/prescriptions, results of any medically relevant trial assessments
 - For AEs, a brief description of the event inc. start/stop dates and results of any clinically pertinent assessments made relating to the AE



QoL questionnaires

- Completed by participant
- Ideally alone to prevent influence
 - research nurse
 - family
- RN can check for completeness or causes for concern
- Should be done before randomisation on 1st visit
- Should be done before assessments on subsequent visits
- While patient is waiting to be seen



	What will be tested	Where analysed	When samples taken
Routine tests	Biochemical profile eGFR Full blood count Urinary PCR CRP	Locally, at your site.	Baseline Every 3-monthly trial visit (CRP taken annually)
Standard Trial Samples	Cystatin-C NT-proBNP ACE Renin levels	Centrally, at Hull lab	Baseline, Month 12, Month 24, Month 36
Optional Biomarker Samples	unknown biomarkers in future analysis	Centrally, at Hull lab	Baseline, Month 12, Month 36

- See protocol for details of BCP and FBC
- Centrally analysed samples
 - Prepare according to SOP in site file
 - Store at -80°C until sent to central lab in Hull
 - BCTU to arrange transport approx. annually



CRFs and data entry

- CRFs are in your site file or can be downloaded from the trial website
 - CRF01 Randomisation Form
 - CRF02 Baseline assessment
 - CRF03 Telephone follow-up
 - CRF04 3-monthly visits
 - CRF05 Additional clinical visits
 - CRF06 Lab results used by central lab staff
 - CRF10 SAE form
- Participant diaries are there to help fill in the AE and clinic visit parts of the CRFs
- Don't forget KDQOL-SF questionnaires



CRFs and data entry

Completed paper CRFs can be submitted to BCTU by post or fax





• Can enter data directly into online system – will check for errors / omissions



- Please keep originals of CRFs at site.
- Please contact BCTU if you have queries



Pharmacy considerations

- Choice of drugs used is at clinician's discretion
 - ACEi/ARB
 - Other antihypertensives
- Standard Pharmacy stocks used
- No need for additional pharmacy management
 - Accountability logs
 - Study-specific prescription
 - Normal checks and clinical governance

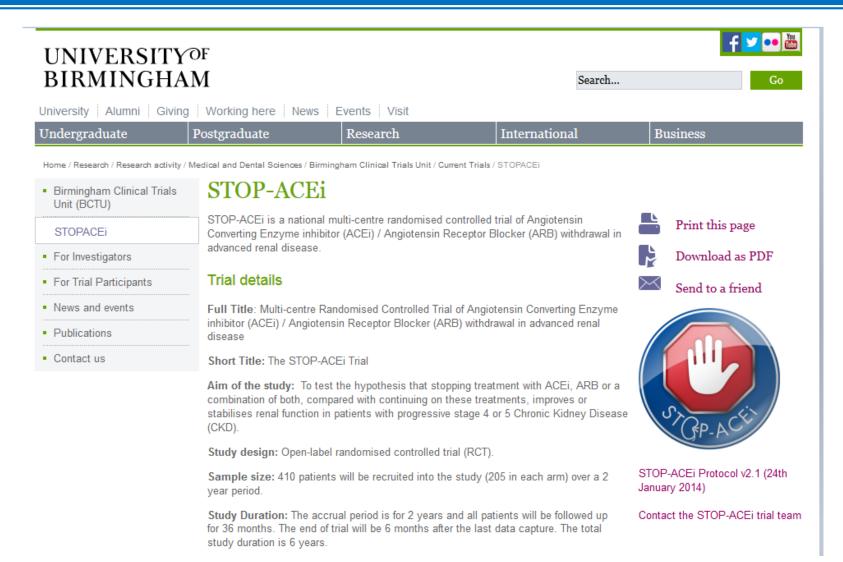






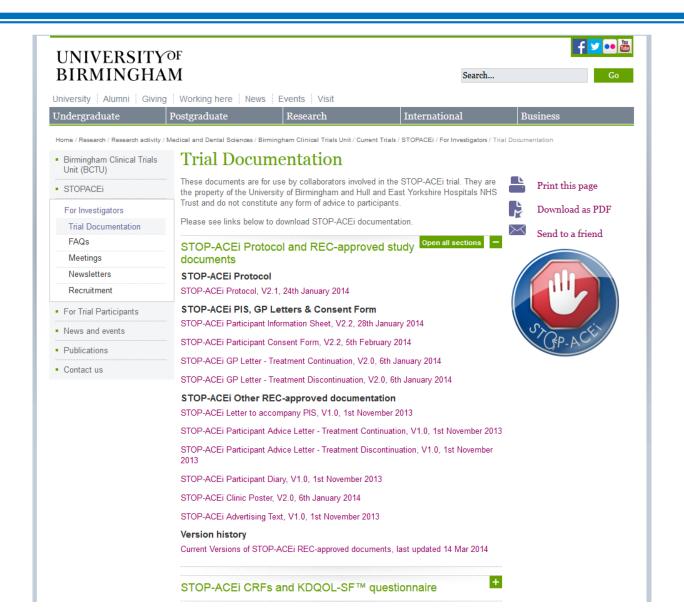


STOP-ACEi website





STOP-ACEi website





Contact details

Trial website: www.birmingham.ac.uk/STOPACEi

Online Randomisation and data

entry system:

Post:

www.trials.bham.ac.uk/STOPACEi

E-mail: <u>STOPACEi@bham.ac.uk</u>

Telephone: 0121 415 9132

Fax: 0121 415 9135

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STOP-ACEi staff:

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Liz Brettell, Renal Trials Manager

Before you leave

- Thank you for coming
- Slides will be made available online
- Certificates
- CPD credits
- Feedback forms
- TMG meeting Bourneville room