

# Pregnancy ANtihypertensive Drugs: which Agent is best?

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last six months and this month we collectively randomised **76 participants!** This demonstrates that when we work as a team, we can make it fly. 26 sites randomised at least one participant and 11 sites randomised three or more! Whatever you are doing, please keep doing it! We need to keep this momentum going through December and January... and beyond! Ahuge well done and thank you to all involved. We hope you have a joyful holiday period. Cheesy rewards for consistency! If you randomise at least two

the more will say 'yes'! We had averaged about 44 randomised participants per month over the



## participants per month in **December** and **January**, you

will receive a cheesy reward to share! Introducing... Jenie Sparkes We would like to Jenie, our new full-time giant PANDA midwife. As many of you all already aware, Jenie is an extremely experienced (as well as lovely) coordinating midwife. She has worked with Lucy for a



Aneurin Bevan

Cardiff Bay

**Bradford Teaching Hospital** 

Chelsea & Westminster

tional challenge for the woman.

often a prescribing lottery

**CAREFULLY** 

Recruitment

Sites

Birmingham Women's and Children's NHS Foundation Trust

Bradford Teaching Hospitals NHS Foundation Trust

Buckingham Healthcare Trust (Stoke Mandeville)

Aneurin Bevan University Health Board

Burnley General Teaching Hospital

Chelsea and Westminster Hospital

Cardiff Bay Hospital

Mid Yorkshire NHS Trust

Royal Cornwall Trust

Royal Preston Hospital

Salisbury District Hospital

Southmead Hospital

Whittington Hospital

**Grand Total** 

Royal Wolverhampton NHS Trust

South Tees NHS Foundation Trust

North West Anglia NHS Foundation Trust

Nottingham University Hospitals NHS Trust

Oxford University Hospitals NHS Foundation Trust

Royal United Hospitals Bath NHS Foundation Trust

Sheffield Teaching Hospitals NHS Foundation Trust

South Tyneside And Sunderland NHS Foundation Trust

St George's University Hospitals NHS Foundation Trust

Somerset NHS Foundation trust (Musgrove Park)

South Warwick University Foundation Trust

В.

West Middlesex

### working on closing PARROT2 so we shall be easing her into taking on this new role between now and January. Jenie will be working closely with Lisa, Abbie, Dani and Hannah.

long time, coordinating PHOENIX, PHOEBE, PARROT and PARROT2. She even worked on the original PANDA study! She is currently

NOVEMBER PRIZE FOR SCREENING Just Eat voucher for sites who screen x2 their monthly target in November on REDCap Mid Yorkshire Chesterfield Somerset NHS Foundation trust Birmingham Women & Childrens Oxford University Hospitals Doncaster and Bassetlaw Southmead

Guys & St Thomas'

Kingston

Leeds

Homerton University Hospital



Checklist to ensuring you are maximizing your potential for conversion:	Chec
(i.e. proportion of eligible women approached who say 'YES' to randomisation)	(i.e. pr
Identify and approach as many eligible women as possible, ideally (!) all eligible women who are booked at your maternity unit	
Engage and teach your consultants, trainees and triage midwives about why the giant PANDA study is important and why randomisation should not be viewed as risky	
Consider your pathways of care for women with hypertension in your maternity unit. Is there	

### any way these can be optimized to channel the woman under particular consultants or on particular days? Women with pre-pregnancy diabetes have specialist clinics, so why not those with pre-pregnancy hypertension? Pregnancy outcomes are comparable, if not poorer.

Do you and your team feel confident about the rationale for the study and talking to women? If you feel you would benefit from extra training, please get in touch with the giant PANDA team

Royal Preston

Sheffield

Royal United Bath

Enquire with doctors directly as to why they may not feel a woman is 'right' for the study. "Can I tell you a bit more about the giant PANDA study?" "Do you mind if I ask why you think this woman is not appropriate to be offered participation and randomisation?"

Switching when there is no indication to change meds (i.e. stable control) is always going to be more challenging, as additional contacts are likely to be necessary and potentially an addi-

Approaching women already on medication and well-controlled BP:

For the woman, please try and discuss the following possibilities:

Discuss the following with your health care professional colleagues:

and/or come along to the teleconferences to hear our CIs Lucy and Jenny discuss the study.

No change in meds but making her experience count – 'win win' A switch that may actually suit her better and provide better control over pregnancy A switch that might cause side effects and / or inadequate control – this is the least likely option, but even if does happen that experience has counted and will help women in the future, and she can switch straight back.

The fact that she is on one or other medication already is usually not evidence based – it is

If a change, you may have to adjust clinical care in the short term, but be confident - we don't know which is the better option for this woman during her pregnancy, a switch

may be beneficial in the long run (or may not) but either way we'll be one step nearer to answering the question.

If no change in medication, you have a randomisation – 'win win'

arms, the database always asks you whether she wants to join the randomised arm first. If she verbally declines to be randomised and this is recorded, the database will then ask you if she wants to join the observational arm.

opened

21-06-22

26-05-21

25-08-21

30-09-21

29-09-21

09-11-21

21-07-21

30-08-22

17-02-22

30-08-22

14-12-21

16-06-21

11-06-21

09-11-21

03-02-22

22-09-21

07-09-22

15-02-22

25-11-22

25-10-22

04-02-22

13-09-22

21-04-22

SCREENED

Total

11

131

57

26

12

35

55

20

13

36

174

28

86

68

160

18

6

9

71

7

31

1810

Nov-22

12

13

8

6

3

21

2

14

12

Chesterfield Royal County Durham and Darlington NHS Foundation Trust Doncaster and Bassetlaw East Suffolk and North Essex NHS Foundation Trust - Ipswich Guy's and St Thomas' NHS Foundation Trust Homerton University Hospital NHS Foundation Trust Hywel Dda Health Board Kingston Hospital NHS Foundation Trust Leeds Teaching Hospitals NHS Trust Liverpool Women's NHS Foundation Trust Manchester University NHS Foundation Trust

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Read the screening & eligibility form on REDCap carefully as this is what decides which consent form (i.e. randomised or

observational) is opened. When a woman is eligible for both

Nov-22

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(last 3 months)

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RANDOMISATION

Total

19

20

14

6

22

5

3

12

77

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124

11

1

20

5

13

OBSERVATIONAL

Total

35

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10. We are due to

DMC meetings in

hold TSC and

<u>Spring 2023.</u>

Helen Perry Co-PI - Princess Anne Hospital Southampton "Helen is enthusiastic and proactive in identifying and referring potentially suitable participants for Giant PANDA. Despite having a very busy clinical role she will always make time to discuss recruitment progress, suggest new ideas to help screen women

her input and feel Helen deserves recognition for her support of the study."

Want to nominate? Please email a.evans.10@bham.ac.uk with details of whom you would like to nominate and why!

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11. In the new year, a

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6. Our most command 7. If a blood pressure

and works hard to promote research to obstetric colleagues. We are very grateful for

8. Queries are sent

on a monthly basis.

12. Look out for any

a.evans.10@bham.ac.uk

for your query up-

emails from

dates!

**Professor Lucy Chappell, Chief Investigator** Professor Jenny Myers, Co-Chief Investigator Hannah Wilson, Lead Research Midwife Mon/Weds/Thurs

Monday-Friday giant-panda@trials.bham.ac.uk | 07779 445 367 Danielle Ashworth, NIHR Clinical trials fellow

danielle.c.ashworth@kcl.ac.uk | 07894336088

Mon/Weds/Thurs

Hannah.1.Wilson@kcl.ac.uk | 07921317891 Lisa Leighton, Senior Trial Manager (BCTU) Abbie Evans, Senior Data Manager (BCTU)