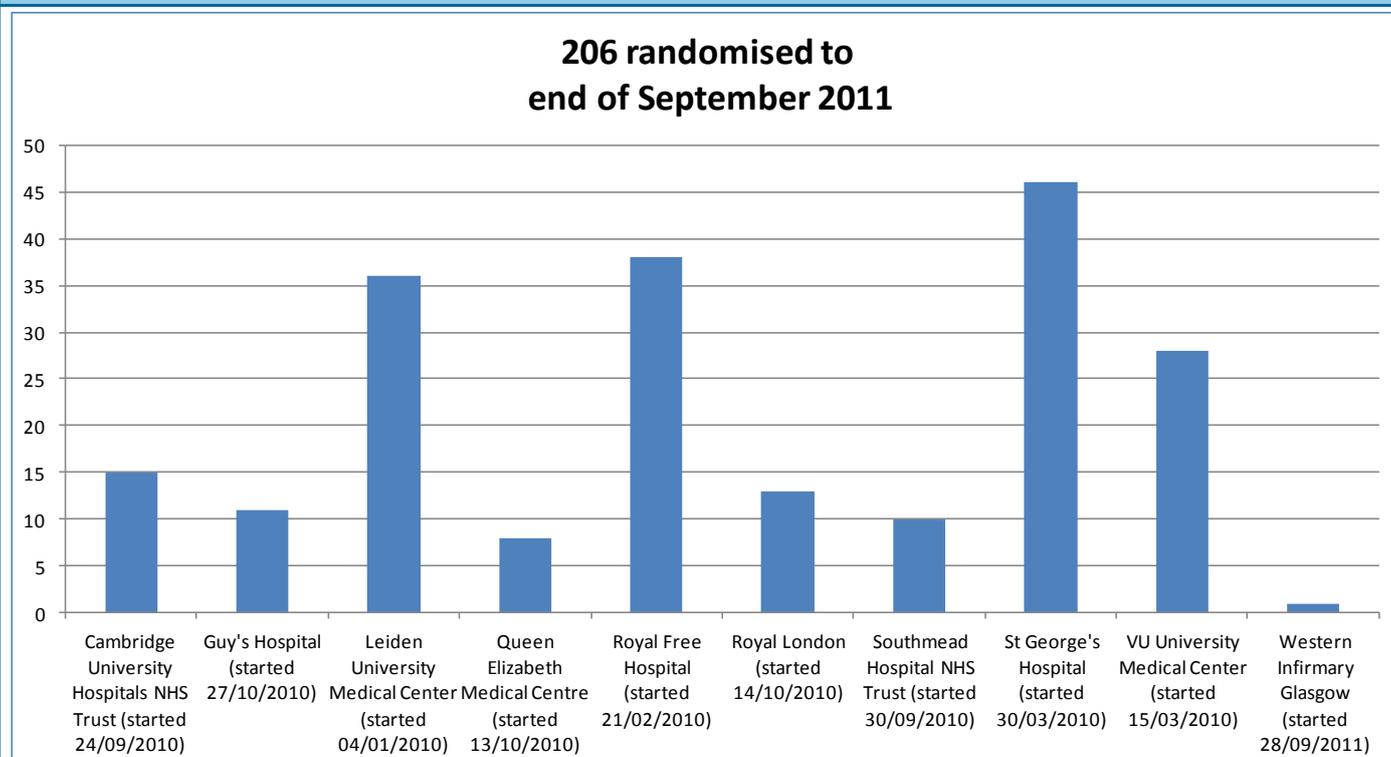


# REPAIR Trial Newsletter



Issue 19, October 2011

## Recruitment update



We are now more than half way there! **206** pairs now recruited with **14** recruited in September. Congratulations to Western Infirmary Glasgow who came on board this week and have already recruited their first pair. Many thanks to everyone for all the help with screening, randomising and following up the patients.

## Carrying out the intervention (unblinded staff)

Just as a reminder that staff performing the randomised procedure should be fully aware of treatment allocation when carrying out the intervention or sham. The REPAIR randomisation is slightly more complicated than for most trials, as you know, due to the fact that there can be 1 of 4 different treatment allocations. It is a good idea to print off the randomisation email to ensure that you have a record of the allocation. Please also ensure that only unblinded staff see the email. As a reminder the recipient and donor both receive the same allocation at both 24 hours and pre surgery. Only people who have been trained in carrying out the intervention and have signed the appropriate forms should randomise the patients. Passwords must not be shared with other staff and should be kept confidential. If anyone would like further information on carrying out the intervention or needs reminding of the procedure then please do not hesitate to contact the REPAIR office.

## 1 year monitoring visits

Successful visits were completed at Leiden and VU Amsterdam on 15th August and Royal Free Hospital on 23rd September. Many thanks to all teams involved for helping ensure these went smoothly. Monitoring at St George's will also be arranged in the near future.

## Frequently Asked Questions

**Question:** Why does the trial use iohexol GFR as the primary endpoint, rather than a nuclear medicine GFR?

**Answer:** The iohexol GFR test is reliable, inexpensive and easy to carry out, and additionally avoids exposure of the recipient to radioactive compounds for the purpose of a clinical trial.

**Question:** Could the function of the transplanted kidney be affected by iohexol (which is a contrast agent)?

**Answer:** The dose of iohexol used is very small compared with that used for a CT (5ml vs 100+ ml) and therefore will not affect the function of the transplanted kidney.



## Eligibility

### Inclusion criteria

- Patients undergoing living donor transplantation
- Patients aged 18 years and above

### Exclusion criteria

- Patients on ATP-sensitive potassium channel opening or blocking drugs
- Patients on ciclosporin
- Patients with a known iodine sensitivity (who cannot undergo iohexol clearance studies)
- Patients with ABO incompatibility
- Any patient requiring HLA antibody removal therapy

Please ensure these criteria are checked and confirm patient is eligible **before** completing the randomisation process

## REPAIR profile—Kristin Veighey



I am a Nephrology Specialty Registrar and Research Fellow at the UCL Centre for Nephrology. I became involved in REPAIR first locally at the Royal Free Hospital, and then on a central basis through my research, for which Raymond MacAllister is my supervisor.

At the Royal Free I screen and identify possible patients for REPAIR, helped by our fantastic live donor nurses. I then approach the patients to explain more about the trial and see if they would like to take part. My experience of this has been mainly positive - most kidney donors are altruistic individuals by nature and so are keen to participate in research, especially as the risk to them in this particular study is low. I have even been approached by patients wanting to find out if they can take part. We are fortunate that our patients and donors in the main live relatively close to the hospital and so are usually happy to come in early on the day before the transplant. If they agree to come in early for the intervention they have their admission clerking, bloods and consent done at that stage, leaving them free for the rest of the day, and are then readmitted in the evening. This gives them more of the day to spend with family and friends.

I have also been involved in training staff in the intervention, trial centre initiation and helping centres with the primary endpoint iohexol testing. I have found my involvement in REPAIR both interesting and valuable, and have learnt a lot about the process and pitfalls of running a clinical trial.

## Contact details

**Tel: 020 7927 2473**

**Fax: 020 7927 2189**

**Email: [repair@lshtm.ac.uk](mailto:repair@lshtm.ac.uk)**

**Web: <http://repair.lshtm.ac.uk/>**