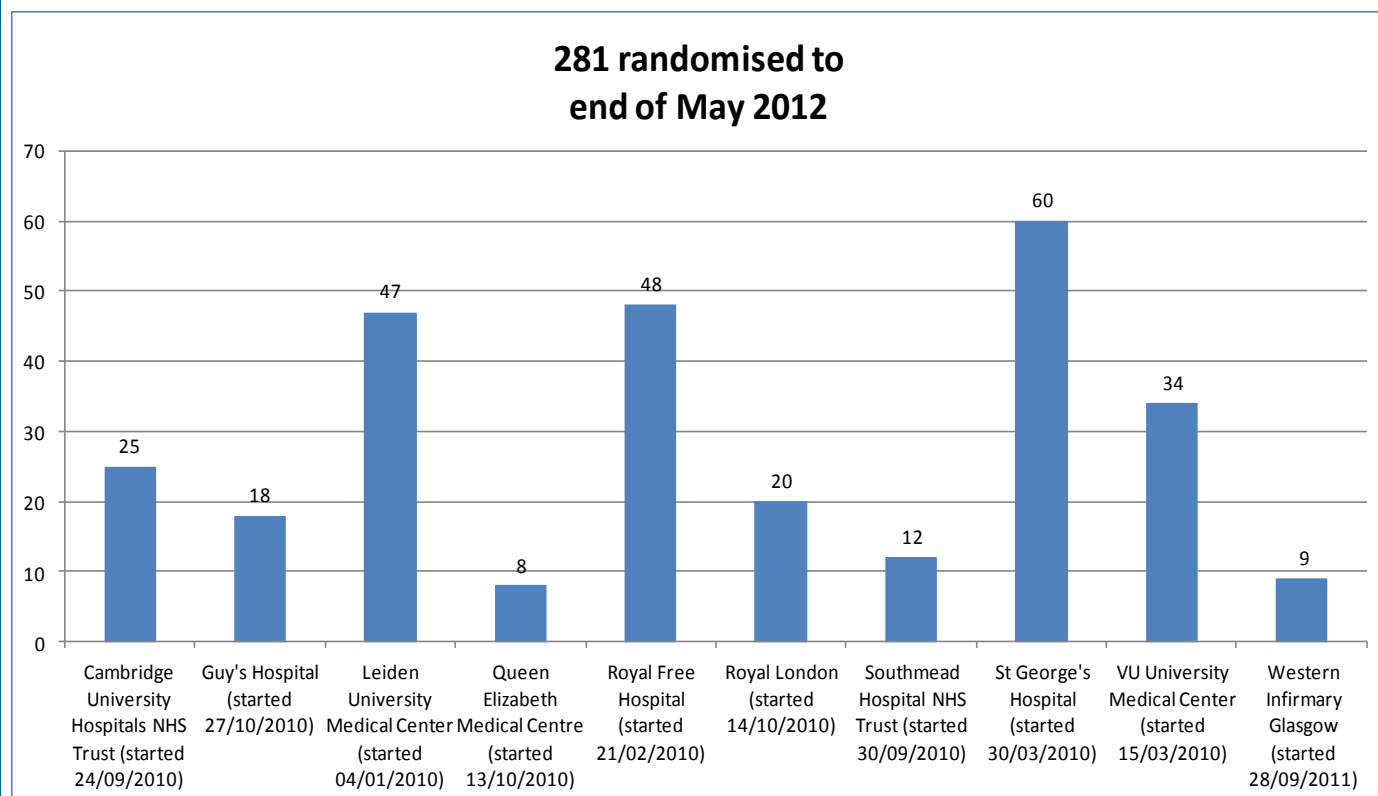


REPAIR Trial Newsletter



Issue 27, June 2012

Recruitment update



Following on from the investigator meeting in April recruitment for May has been excellent, the best since October 2011 with **13** pairs recruited. So a big thank you to everyone for making the extra effort both with recruitment and follow-up. It would be fantastic if this level of recruitment could be maintained for the remaining months so that we reach the target of 400. We also have 5 new sites coming onboard from Belgium and France which will help make this target achievable and there will be more details of these sites in the next newsletter.

Iohexol factsheet

A factsheet aimed at patients about the 1 year iohexol test is currently being developed. When this has received approval (a protocol amendment will be submitted shortly) we will distribute to all the centres so that they can be given to all patients. Please ensure patients are reminded of the iohexol test and what it involves at all opportunities including, where possible, discharge, 3 month follow-up and shortly before the due date when the letter is sent out.

The factsheet is designed to allay any fears the patient has about coming for the test such as whether having the test can damage the kidney, how long will it last and whether they will be reimbursed for any expenses incurred as a result of coming for the test.

Please let the trial office know of any questions that are regularly asked by patients so they can be included.

Frequently Asked Question

Question:

If a patient is randomised but for some reason (e.g. staffing issues) the interventions are not carried out but the transplant goes ahead should the patient be followed-up?

Answer:

If this happens the patient should be followed up as normal including blood samples and io-hexol at one year. This is because the REPAIR analysis will be an intention to treat analysis and therefore as the intention was to give the interventions the patient should be followed up. However, if the patient specifically asks to withdraw, then no further data should be collected, but data collected up to that point should be retained for analysis.

David Muchemi a patient's perspective

We were delighted to welcome David Muchemi to the meeting. David is a former Royal Free renal transplant patient who gave a fascinating and very personal perspective on the process of waiting for a transplant and being approached to participate in REPAIR. Here are some of David's experiences:

David was very active with playing sport and had just finished his masters degree when he became unwell. He started dialysis from November 2010 when the issue of kidney transplant was raised. Dialysis was difficult due to the differences in diet and also only being able to drink half a litre of water each day. David comes from a close family and approached both his sisters with the idea of donating one of their kidneys. His older sister came forward and offered her kidney if there was an appropriate match. In April 2011 it was discovered that his older sister would be an ideal match and in August 2011 his sister was given the all clear and the transplant could go ahead.

During the planning for the transplant it was an extremely worrying time for the whole family with both David and his sister undergoing surgery. However, David explained that they were both kept well informed by their hospital during the process. When the doctor approached David about the trial he had no problems agreeing. It was nothing invasive, such as having more injections, and he was just grateful for having the opportunity to give something back.

David was next to his sister for the application of the 24 hour intervention. She was done first without too much discomfort. When it was David's turn all he felt was some tingling and a bit of numbness but it was bearable.

David felt grateful that he was part of such an important study and glad to help future kidney transplant patients.



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 io-hexol 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

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