SRCTN47823388
Oct 2011, Issue 7

# TARDIS NEWS

**Newsletter for the Triple Anti-platelets for Reducing Dependency after Ischaemic Stroke Trial**

Web: www.tardistrial.org Email: tardis@nottingham.ac.uk Tel: 0115 8230210

## 578

### Recruitment at 31 Oct 2011

| | |
|---|---|
| Aberdeen Royal Infirmary | 9 |
| Barnsley District Gen. | 9 |
| Basildon University Hosp. | 2 |
| Basingstoke | 6 |
| Blackpool Victoria | 1 |
| BRI, Bristol | 2 |
| Chesterfield Royal | 12 |
| Colchester General | 5 |
| Countess of Chester | 28 |
| Croydon, London | 9 |
| Dewsbury & District Hosp. | 4 |
| Dorset County Hosp. | 1 |
| Eastbourne General | 10 |
| Forth Valley Royal,Stirling | 2 |
| Gateshead, QElizabeth | 2 |
| Glasgow RI | 8 |
| James Paget, Gt Yarm | 1 |
| Kettering General Hosp. | 1 |
| King's College, London | 33 |
| King's Mill, Sutton in Ash. | 11 |
| Leeds General Infirmary | 25 |
| Lincoln County | 1 |
| LRI, Leicester | 1 |
| Margate, QEQM | 10 |
| Monklands, Airdrie | 13 |
| NHS Fife | 3 |
| North Staffs, Stoke | 48 |
| North Devon District H. | 2 |
| Nottingham Univ Hosp. | 60 |
| Plymouth Hospitals | 1 |
| Princess Royal, H.Heath | 1 |
| Raigmore Hosp, Inverness | 1 |
| Rotherham Hospital | 2 |
| Royal Bournemouth | 8 |
| Royal Cornwall, Truro | 17 |
| Royal Derby Hosp | 26 |
| Royal Devon & Exeter | 24 |
| Royal Liverpool | 6 |
| Royal Preston | 10 |
| Royal Surrey, Guildford | 8 |
| Royal United H,Bath | 2 |
| RVI, Newcastle | 4 |
| Sheffield Teach Hosps. | 2 |
| Southend University NHS. | 3 |
| St Georges, London | 53 |
| Stepping Hill,Stockport | 1 |
| The Calderdale Royal | 19 |
| The Ipswich Hospital | 4 |
| Torbay District Hospital | 18 |
| Univ.Hospital Aintree | 21 |
| Watford General | 2 |
| Wansbeck & N.Tyneside | 3 |
| West Cumberland, Whitehaven | 7 |
| Whiston Hospital,Prescot | 7 |
| Yeovil District Hosp | 9 |

## Congratulations to... ***

Lincoln, Rotherham and Sheffield for randomising their first TARDIS patients

## Help, Tips, Clarifications

- All Stroke/TIA outcome events that occur after randomisation, require an ECG. Please fax this to the Co-ordinating Centre, together with any letters showing diagnosis etc (anonymised of course).

- If a relative or independent physician consent is taken prior to randomisation, then every effort must be made to obtain patient consent when they are well enough to do this for themselves before the Day 35 visit. Please remember to fax the new consent forms to the Coordinating Centre.

Trial Samples frozen at recruiting centres

- The TARDIS trial freezer log must be used to record all samples frozen at the recruiting centres. These samples will subsequently be transported to CC and the samples must match the log of samples received.

- Please do not use the tiny cryovials but pipette the serum and plasma into containers large enough to ensure full and correct labelling, i.e. full trial id; date sample taken; day 0, day 7 or day 35; and serum, plasma or DNA.

Antiplatelets prior to randomisation

- If a patient is taking clopidogrel prior to their randomising event, as long as they have not taken this or any other antiplatelet (except aspirin) between the time of their event and randomisation they can be included in the trial. (They must of course also fulfil all the other inclusion and exclusion criteria).

- We wish to express our thanks to all investigators for their help in answering the many data queries. It is imperative that the trial has good quality data and these queries will be continuing for some time.

- On looking through the recent automatic email reminders, it appears that most of them are due to FBC results not being entered for Days 7 and 35 – please don't forget to enter these once the results have been received.

- It is important at the Day 7 and 35 follow-up visits, that investigators take the Full Blood Count to ensure the continuing safety of all participants. Also if entering a bleed outcome event, any clinical FBC results relating to the event must also be submitted online.

British Heart Foundation
SRN Stroke Research Network
The University of Nottingham
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## Help, Tips, Clarifications (cont.)

- Please continue to fax over the consent form/s and patient contact details within 3 days of randomisation. Faxed radiology reports (CT/CTA/MRI/MRA/Ultrasound), proof that loading doses of trial antiplatelets have been taken, and any additional clinical radiology CRFs can be sent shortly after. For help please see our Fax header on the website.

## Funding from 1/4/2012

Application for further funding has been made to the HTA in order to continue recruitment from 1/4/2012. We will contact all sites once we know the outcome, hopefully by the New Year. Until that time please continue to randomise under V1.2 of the Protocol.

## Payments to sites for recruitment

If you feel that you should already have been paid for recruiting patients to TARDIS, it may be that we are still waiting for outstanding documentation, or answers to queries before this can be made. Please check through your recruits trial files to ensure all the necessary information has been sent to us and also entered on the website.

## New Facility

Investigators now have the added facility to reset their own password. Just follow the messages on the login page and subsequent emails if this is required.

## Time to randomisation

Only 13**%** of patients are being randomised in the first 12 hours of the 48 hour window for TARDIS. There is some evidence to suggest that the earlier treatment is received, the better the result. We encourage centres to recruit patients as early as possible within the 48 hour window. INTERACT and SOS compete with early recruitment, but IST3 has now finished, so there may be more patients available to randomise early.

## Reporting deaths

As soon as you know of a death of a TARDIS participant (prior to the D90 telephone call being completed), please report this immediately, first by email to tardis@nottingham.ac.uk with copies to clare.randall@nottingham.ac.uk, Patrick.cox@nottingham.ac.uk and margaret.adrian@nottingham.ac.uk - as well as reporting it on the website in the usual way.

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# Median Time to Recruitment