

**NEWS** 

Welcome to our third issue of the CHIP-BCIS3 newsletter. We hope everyone had an enjoyable festive period. Since our last newsletter, a further 6 patients have been recruited, bringing us to a total of 53. Thank you to the teams at Bart's, St Thomas', King's, St George's, Newcastle and Harefield. Special thanks to the teams at St George's and Harefield who recruited their first patients last month.

In the coming months, we'll be introducing new promotional material such as posters and trial merchandise to help increase awareness at your site. If there is anything you think would help to keep the trial visible and would help to keep your colleagues on board then do let us know.

We need your continued collective support in CHIP-BCIS3 to make 2023 a great year ahead, keep up the fantastic work!

#### CHIP-BCIS3 Investigators' breakfast meeting

If you are attending the BCIS ACI conference at the London Hilton Metropole we would like to invite you to a CHIP-BCIS3 Meeting on Thursday 19 January 2023 between 07:15-08:15am. This will be in-person attendance only for those already attending the BCIS ACI conference. We will hold additional events throughout the year for anyone not attending ACI.

Please get in touch if you would like to attend.

### eCRF updates

We're planning a few updates to the eCRF in the coming months, learning from our experiences in the REVIVED trial.

The Jeopardy Score (JS) will be moved from the post-randomisation baseline form to the randomisation site, and it will include a calculator to make entering the JS easier.

The criteria for complex PCI will also be moved to the randomisation site.

We'll be in touch by email with details of the upcoming changes to the eCRF. Please don't hesitate to contact us if you have any questions.



We have further simplified the **Screening Log (V2)** to make it simpler and quicker to complete. To help us understand the patient population at your site, please complete the Screening Log and include as much detail as you can.

In addition to screening data it would be enormously helpful to understand how Impella is used outside of the trial within the UK, so we have developed a **pLVAD use log**. We have made this form as simple and easy to complete as possible.

This really is crucial information and so for the **next three months** we will have a big focus on the logs, so do please complete and return to us as it will be an enormous help.

To show our appreciation we will send **prizes** to those sites that submit a full and detailed screening log and pLVAD use log for January, February and March. Let us know if you have any questions or comments on the screening process.

## Site updates



There are now **12 sites** open to recruitment, with a big welcome to **St George's** and **Harefield** who were issued the green light in December.

Thanks to all sites for their ongoing effort and continued effort to identify, screen and enrol patients into the study.



We would like to get to know the teams at each site a bit better, so in future newsletters we will be adding a Q&A section where we can find out how the trial works at your site.



# **PPI Representative blog - Lynn Laidlaw**



#### **Reflections on research**

My name is Lynn Laidlaw and I am patient and public representative on the CHIP-BCIS3 TMG. I live with a couple of cardiac conditions secondary to my rare, auto immune, Rheumatic disease and like the participants in CHIP-BCIS3 I am often described as complex! Research results enable evidence based, shared decision-making conversations which take into account what matters to people. Just like clinical consultations, Patient and Public Involvement in research involves working in a values and principles led way founded on relationships, conversations and collaboration.

The CHIP-BCIS3 team worked together to co design a PIS that was understandable, accessible and thought about what potential participants in CHIP-BCIS3 would want to know, not what we thought they should know! We are working to develop a video PIS to enable choice in how participants would like to receive information about the trial. Other plans include a yearly participant newsletter as research tells us that participants value being kept up to date, and we are already thinking about how to disseminate the trial findings to participants and clinicians.

It's a privilege to be involved in this trial and work towards answering an important research question to both clinicians and patients. I have been impressed by the dedication of the core CHIP-BCIS3 team and the participating sites, overcoming numerous challenges. Research is hope to me and others living with cardiac conditions. Thank you for your effort, dedication and willingness to collaborate with people who live with heart disease.

CONTACT



If you have any questions, please don't hesitate to contact the CTU

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