

NOTTINGHAM CENTRE UPDATE—MARCH 2014

Recruitment Progress

Number of Practices —14

Number of Patients Recruited—21

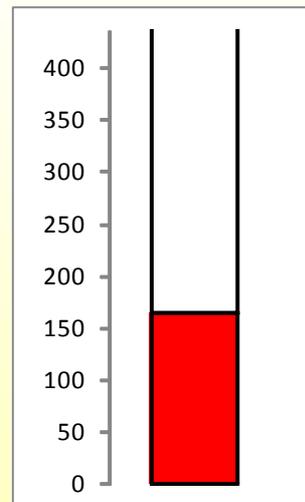
Number of Patients Needed—100

While the Trial Management Group has been pleased with progress so far, only 43% of our practices have started recruiting patients.

If your practice hasn't been able to start recruiting yet, we may be able to help. Below are some examples of what is working well in other practices in this newsletter and we will contact you over the next few weeks to talk to you about how we might support you further.

Recruitment idea: Some practices have been using the flexibility of Next Day Recruitment to identify patients the day before their protected research time, so that they can use those days more effectively.

Recruitment idea: We've found repeated reminders to fellow GPs to keep an eye out for cough patients that OSAC clinicians can screen works in some of our more prolific practices.



Above: Total Trial Recruitment

Below: Nottingham Recruitment

Incentives

We're looking to reward practices that recruit at least 5 patients with chocolate goodies for the team and a special mention in the Newsletter. Practices that reach 10 will receive a bumper pack of caffeinated treats for improved tea breaks for the whole practice.

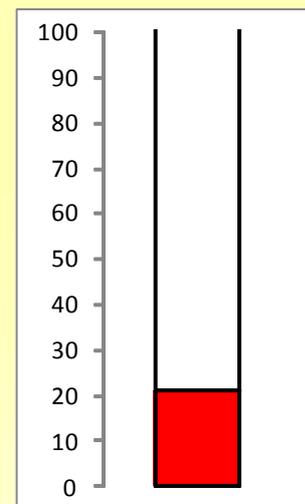
Therefore, a lot of thanks to Dr. Amar Ali and Kay Holden at **Oakenhurst Medical Practice** and Dr. William Lumb and Lynn Siddle at **Sedbergh Medical Practice**, who have recruited 5 patients, and should be receiving their chocolates shortly!

Antibiotics, Deterioration and Symptom Diaries

We would like to emphasise that even if your patient worsens, or if you advise them to stop taking the trial medication, or you prescribe emergency antibiotics at a later date, **this does not exclude the patient from the trial**. As long as they are still able and willing to fill in the Symptom Diary and receive phone calls we'd like to keep them enrolled.

Therefore, we'd like to repeat the advice that patients are to fill in their **symptom diary for at least 7 days**, and then continue until 28 days after recruitment or until they are symptom free for at least 2 days. This applies with or without the trial medication, antibiotics or if they deteriorate as long as they are still willing to be in the trial.

As always, we also want to emphasise that non-urgent **antibiotic prescriptions should be dated for at least Day 2** of the trial (i.e., the day after the baseline, consent and first dose of trial medication). Our hypothesis is that if they feel better from the prednisolone (or placebo!) the next day, they won't feel the need for the antibiotics.



Meet Natasher

Natasher Lafond has joined the team as a Research Associate. In addition to working on OSAC, she is finishing off her PhD in Non-Medical Prescribing at Nottingham. You can contact her on **01158468312** and natasher.lafond@nottingham.ac.uk.



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Information Sharing Teleconference

We are looking to have a teleconference with as many practices as possible to share information between OSAC sites. We have successfully done this in the Cumbria & Lancashire region before, but we would like to extend the conference to the Trent and Leicestershire, Northamptonshire & Rutland practices too.

The aim of this is to share different recruitment methods that the various practices across the country have adopted successfully. In addition, if you are facing challenges in your practice we would like you to share them during the call, as one of the others may have already encountered the same issues and have a suggestion about how you can address them.

We will use a Doodle poll to decide on the date that suits the majority of practices and then will circulate teleconference details.

Alastair Hay on Inside Health



Trial Chief Investigator **Alastair Hay** was recently on Radio4's **Inside Health** programme talking about over-prescribing of Antibiotics for coughs.

[Click to Listen Now and Read the Transcript](#)

Reminders/Clarifications

Screening Logs

Remember to send all screening logs to Bristol each week on **0117 928 7341**.

CRF3s

Please remember to stick the yellow patient ID sticker to the top of the front sheet. Also, the form must be faxed to Bristol, and the data entered within 24hrs (preferably on the day of recruitment) if the paper form is completed.

Temperature Logs

We have learned that one practice wasn't completing their temperature logs, and when eventually checked, found a temperature deviation. Luckily, this wasn't a serious deviation and the IMP could still be used.

The medication we are using for the trial doesn't have a listed minimum temperature, but we use **15°C as a guideline** for low temperature. However, **the 25°C for the upper limit is very important**, and deviations in this direction become more likely as we get into the (supposedly) warmer weather.

Therefore, please make sure you monitor the temperature closely and keep filling in the weekly Temperature Log.

Medicine Packs

It is important that the packs you issue to patients be used in sequential, ascending numerical order, so that the randomisation is preserved. This is why packs were initially issued in batches of 4, so that there would be 2 placebo and 2 prednisolone in each batch assigned by University Hospital Bristol's Pharmacy.

Since we had to send some practices 2 packs to ensure consistent recruitment while the manufacturer caught up we had to take into account unusual distribution between practices, but it is important that each practice uses the packs in order.

Site Files

We will be asking you to set aside some time to go over your site file with us on the telephone, and ensure you have the correct versions of documents which have been recently updated. We are expecting an MHRA inspection whilst OSAC is running so we need to make sure everything is up to date!