**Edinburgh Critical Care Research Group**

X26396

07585882835

[edcriticalcare@nhslothian.scot.nhs.uk](mailto:edcriticalcare@nhslothian.scot.nhs.uk)

**Current Studies in ICU**

**A2B**

Alpha 2 agonists for sedation to produce better outcomes from critical illness (A2B Trial)

Primary objective to determine whether IV sedation with the a2-agonist agents, dexmedetomidine or clonidine, can decrease the time to successful extubation from mechanical ventilation among adult critically ill patients.

**ADAPT-sepsis**

BiomArker-guided Duration of Antibiotic treatment in hospitalised PaTients with suspected Sepsis

Multi-centre RCT to determine whether treatment protocols based on monitoring daily CRP or PCT safely allow a reduction in duration of antibiotic therapy in hospitalised adult patients with suspected sepsis.

**GenoMICC**

Genetic of Susceptibility and Mortality in Critical Care

To systematically identify host genetic variants associated with susceptibility to, and mortality from, life-threatening infection and sterile injury. Patients with: Influenza, emerging infections (incl. COVID), cellulitis, burns, RSV, CAP or Pancreatitis.

**SNAP-IT**

Sensing using Neutrophil Activation Probe on the Intensive Therapy Unit

Phase II Clinical Trial using optical molecular imaging and a bespoke chemical probe administered in micro doses directly into the distal lung to detect activated neutrophils, cells that are implicated in the development of ARDS, to develop a bedside test to diagnose, monitor and stratify patients with the condition in the future.

**ARDS – Neut**

Investigating the biosynthetic properties of ARDS neutrophils

To ascertain whether the circulating white blood cells, in particular the neutrophils and monocytes, of patients with ARDS (COVID and NON-COVID) differ from those of healthy controls in terms of their capacity to sense and respond to metabolic and physiological stress signals.

**VACIRiSS**

Pneumococcal Vaccination to Accelerate Immune Recovery in Sepsis Survivors

The aim of VACIRiSS trial is to evaluate the immunogenicity and heterologous effects of single dose 13-valent conjugate pneumococcal vaccine (PCV-13) in preventing infection related rehospitalisation in sepsis survivors and to collect outcome event data with necessary precision to inform future definitive trial design.

**PHIND**

Clinical evaluation of a point of care assay to identify PHenotypes IN the Acute Respiratory Distress Syndrome

Assess the clinical outcomes in patients with ARDS according to their prospectively defined inflammatory phenotype determined using a POC assay.

**HEMOTION**

HEMOglobin transfusion threshold in Traumatic brain Injury OptimazatioN: The HEMOTION TRIAL

To evaluate the effect of red blood cell (RBC) transfusion thresholds on neurological functional outcome.

**EFFORT**

The Effect of Higher Protein Dosing in Critically Ill Patients: A Multicentre Registry-based Randomized Trial. The EFFORT Trial

To determine the effect of prescribing a higher dose (>2.2 grams/kg/day) of protein/amino acids compared to a lower dose (<1.2 gram/kg/day) on 60 day mortality in critically ill patients with nutrition ‘risk factors’.

**REMAP CAP**

Randomized, Embedded, Multifactorial, Adapted Platform trial for Community Acquired Pneumonia

Randomised controlled platform trial of multiple treatments currently being trialled for COVID 19. Patients recruited within 24 hours of ICU admission.

**REALIST**

Repair of Acute Respiratory Distress Syndrome (ARDS) by stomal cell administration

A study to determine the effect of a single intravenous infusion of mesenchymal stromal cells in patients in acute respiratory distress syndrome and ARDS.

**TARDIS**

Traumatic Brain Injury (TBI) associated radiological DVT incidence and significance study.

This study aims to find out how often blood clots form in the legs after brain injury and see if this affects recovery..

**ABC Trial**

Anaemia management with red Blood Cell transfusion to improve post-intensive care disability: a randomised controlled trial

To determine whether correcting anaemia from the time of ICU discharge using blood transfusions results in an improvement in self-reported quality of life 3 months after ICU discharge, compared with current usual care.

**BIS-TBI**

The use of Bispectral Index monitoring to assess depth of sedation in patients with TBI

This observational study uses BIS to: assess the level of sedation of TBI pts, describe the sedation practice used for them &, assess whether BIS-predicted depth of anaesthesia is associated with other factors e.g. use of vasoactive medication, osmotherapy etc.

Clinical team blinded from the BIS values recorded

**SOS**

Sugar or Salt (SOS) Trial: Hyperosmolar therapy in traumatic brain injury

To compare the effectiveness of hypertonic saline versus mannitol (as measured by the GOS-E questionnaire at 6 months) following TBI with raised ICP

Coming Soon in ICU

**PANGEA**

PresSura Assessment of NK1 inhibition in

traumatic brain injury in a Global Efficacy and Safety trial

Open-label pilot phase: To assess the safety of EU-C-001

in the target population of the highest dose to be tested in the double-blind phase Double-blind phase: To assess the effect of EU-C-001 on intracranial pressure (ICP) in patients with moderate to severe traumatic brain injury.

**SIGNET**

Statins for improving Organ Outcome in Transplantation

To see if giving donors 80mg of Simvastatin prior to organ retrieval improves organ function for recipients.

**Anaesthetic/Peri-operative studies**

**Optimise II**

Optimisation of Perioperative Cardiovascular Management to Improve Surgical Outcome II Trial

Open, multi-centre, randomised controlled trial of cardiac output-guided fluid therapy with low dose inotrope infusion compared to usual care in patients undergoing major elective gastrointestinal surgery

**FLOYD**

A Prospective, Single-Arm Multi-Centre Study of the ENSEAL® X1 Curved Jaw Tissue Sealer and Generator G11 in Upper GI, Lower GI, and Gynaecological Procedures

The device will be used for a vessel transection during upper GI, lower GI, or gynaecological procedures. Subjects will be followed post-op for approx. 6 weeks.

Coming Soon in theatres

**RESULT-HIP**

The impact of REstrictive versus LIberAl Transfusion strategy on cardiac injury and death in patients undergoing surgery for Hip Fracture (RESULT-Hip)

Anaemic patients (Hb ≤90 g.L-1 from enrolment until 7 days post-op will be randomised to either restrictive (triggered at Hb ≤75 g.L-1) or liberal (triggered at ≤Hb 90 g.L-1) transfusion strategy. After randomisation they will remain in this transfusion group for the duration of hospital stay (or 30 days whichever is less)