



NHS
**National Institute for
Health Research**

Issue 8

West Midlands Stroke Research Network Newsletter

Welcome to the eighth edition of the WMSRN Newsletter!

This quarter we report on our Acute Stroke Stakeholder Event in January 2010.

We will be meeting Brin Helliwell, a stroke survivor from the West Midlands, who has taken part in some research locally.

We also have our latest recruitment figures to share with you and our Trial in Focus in this edition is Past BP.

We hope you enjoy our newsletter and would very much appreciate your feedback.

Kind Regards to All

Kate Wilde

West Midlands Stroke Research Network Manager

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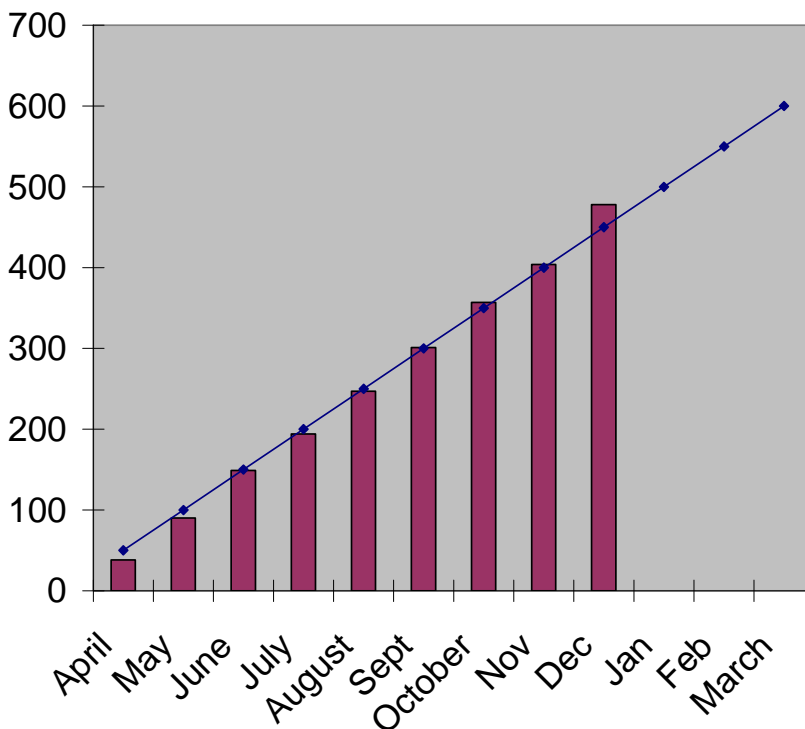
The West Midlands Stroke Research Network is part of the National Institute for Health Research and is funded by the Department of Health

Recruitment In WMSRN



This financial year we have the new challenge to face of recruiting 600 patients to our approved list of studies. We have faced many challenges during the year, not least of which the 'Credit Crunch' which has made it difficult to appoint new staff to temporary contracts and secondments. Many Trusts have experienced staff recruitment freezes this year but we are seeing a steady improvement now. Despite these difficulties we are on track to meet target at the moment. Well done to all those involved!

NUMBER OF PATIENTS RECRUITED QUARTERS 1, 2 & 3



month to month Accrual
 month to month predicted

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Trials in WMSRN Area

ENOS (Efficacy of Nitric Oxide patches and blood pressure reduction regimens after Stroke).

- This study questions whether blood pressure should be actively reduced after a stroke but additionally explores whether a Nitric Oxide patch is more efficacious than use of an oral antihypertensive. This patch can be used even when a patient has swallowing difficulties.
- There are five hospitals participating in this trial in the West Midlands and we are hoping more will in 2009/10

IST3 (International Stroke Trial 3)

- This trial is looking at extension of the time frame and the age range for use of alteplase (Clot busting drug) in thrombolysis of cerebral infarcts. The drug is currently only licensed to be used up to 3 hours after the onset of stroke symptoms. This trial looks at the merit of extending this to 6 hours.
- There are now seven hospitals participating in this trial in the West Midlands.

BUCS (The Birmingham Cognitive Screen)

- This research is looking into a questionnaire tool that assesses attention and executive brain function after brain injury.
- This study currently takes place at seven hospitals in the West Midlands and we are hoping another 3 will join in soon

RETURNS

- This study explores rehabilitation concentrating on turning co-ordination.
- Patients are recruited through Birmingham University from the local Primary care community.

DNA Lacunar

- This study collects genetic material on lacunar type strokes
- Patients are recruited from University Hospital Coventry and Warwickshire and University Hospital North Staffordshire at present.

LOTS care and LUNS

- These studies explore long term planning and treatment for stroke patients after discharge.
- The LUNs project is evaluating the questionnaire used to evaluate unmet needs in the LOTs Care trial.
- Three centres are recruiting patients to LUNs and 3 are recruiting patients to LOTS in the West Midlands

SOS

- Is routine oxygen supplementation beneficial in the first few days after stroke?
- This study is running at seven centres across the West Midlands but we are hoping participation will increase greatly in 2009/10.

PAST BP

- A randomised controlled trial of different blood pressure targets for people with a history of stroke or transient ischaemic attack (TIA) in primary care
- This study is running at primary care centres across Birmingham and is hopefully opening in Warwickshire

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Stroke-inf

- A cluster randomised controlled trial to see if prophylactic prescription of antibiotics to stroke patients with swallowing difficulties results in a better outcome than treating infection as it arises.
- This study is running at University Hospital North Staffordshire

ARC study

- A Study of the Effect of ARC1779 Injection on Cerebral Microembolism in Patients Undergoing Carotid Endarterectomy
- This study is running at University Hospital Coventry and Warwickshire and is being considered at University Hospital North Staffordshire

Coming Soon!

OTCH

- This study explores the benefits of providing Occupational therapy to stroke survivors who are resident in care homes.
- In our region, the study is opening first in the Birmingham area, then will expand into Stoke-on-Trent.

TARDIS

- A Study on stroke and TIA to see if triple anti-platelet therapy (aspirin, clopidogrel and dipyridamole) is more effective than aspirin and clopidogrel alone
- Expressions of interest have been shown by University Hospital Coventry and Warwickshire, University Hospital North Staffordshire, Hereford Hospital and Telford hospital so far.

GRABIT

- A Study on the grip and grasp response of patients recovering from particular types of stroke lesions
- This study is recruiting patients from various rehabilitation setting across Birmingham

Trial In FOCUS



PAST BP

The National Institute of Health Research (NIHR) has funded this study which will explore whether more intensive blood pressure (BP) targets for people who have had a stroke or transient ischaemic attack (TIA) can be achieved in a Primary Care setting, and whether more intensive therapy is associated with adverse effects on quality of life.

Computerised searches of GP clinical systems will be used to identify patients with a validated history of stroke/TIA who are not already on 3 or more anti-hypertensive agents. Patients will be excluded from the study if their systolic BP is < 125mmHg or if they are being treated for diabetes mellitus with microalbuminuria or other condition for which a lower BP target is specified.

The intervention will be a systolic BP target of 130mmHg (or a 10mmHg reduction, whichever is lower) versus a systolic BP target of 140mmHg (as recommended by current national guidelines).

The primary outcome will be change in systolic BP over 6 months; however patients will be monitored for 12 months. Secondary outcomes will include quality of life, adverse events and clinical outcomes such as stroke and other vascular events.

Researchers will follow up patients over the course of a year and they will be seen by practice nurses and GPs every one to three months. In order to maintain patients' BP within their target, GPs will use a study algorithm to titrate their BP medication accordingly. Researchers will also be measuring 24 hour BP in all study participants at the beginning and end of the study.

We have received a lot of interest in this study and have already recruited and trained 14 practices across Birmingham and Solihull, Warwickshire and Worcestershire. The feedback from patients taking part in the study has been very positive so far and they feel it is a "good thing" to have their BP monitored regularly and maintained within a specific target. We would be very interested to hear from practices across Birmingham and Solihull, Warwickshire and Worcestershire, who would be interested in taking part.

**Principal Investigator:
Professor Jonathan Mant**

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5

Events Feedback



Acute Stroke Conference

Research and Improvement
22nd January 2010

Aston University Business School Conference Centre

A BIG thank you to all those who attended our stakeholder event. Feedback from this event has been extremely positive and many of you felt you had learnt a lot from the day.



About 150 people were able to join us.

We had stands available for viewing from The Stroke Association, Schering-Plough, ENOS, TARDIS and Podcast, SOS, BUCS and WMSRN. Many of our delegates were particularly positive about the presentation made by Owen Wyn-Jones. Owen was thrombolysed after a stroke in January 2009. He shared his experiences, good and bad and his progress so far.

Professor Bath, our

Key note speaker, was very well received. It was extremely useful to hear about the stroke research and the research team at the University of Nottingham.

After coffee, we enjoyed a selection of short updates from Service and Research development. Carol Williams came down from Edinburgh to give us the latest advice regarding DVT prevention in stroke patients from the results of the CLOTS study.



We had a sumptuous lunch and plenty of time to chat, network and look at the displays and stands.

After lunch everyone broke into workshops. The four workshops were:

- Involving Black and Minority Ethnic communities in research
- Reading scans
- Telemedicine: what's the future?
- TIA: the role of the GP

Peter Mayer closed the day with thanks to all.

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My Personal Restoration Project

Brin Helliwell (51 Yr old Stroke Survivor)

I was a very fit and healthy 47 year old biology teacher and a keen recreational cyclist. At 7:10 a.m. on 31st August 2005, whilst cycling to work on a bright clear morning, I was faced by my worst nightmare. A car pulled out of a junction directly in my path and I collided with the side of the vehicle, bouncing back into the road with a badly gashed shoulder. Later that day when back at home I felt very tired and assumed that I had started to suffer from shock. My wife became concerned that my speech had become slurred and phoned our GP who immediately advised us to call an ambulance. The Paramedics arrived in about 10minutes. It was now just after 4:00p.m. When I tried to get up from my chair I was paralysed down my left side. I had suffered a right hemispherical ischaemic stroke. As a teacher I was used to targets but never had I been faced with such personal challenges. My first one was to go to the toilet unaided, achieved within a month. My next target was very personal, I wanted to stand up unaided and give my son a hug on his 17th birthday. This was achieved on 4th October 2005. Next target: going for a shower independently. This was achieved in November 2005 and allowed me to have some home leave for my wife's birthday at the end of November. Next target: walk out of hospital. I left the ward in early December in a wheel chair for safety reasons, much to my annoyance. In September 2006 I had an offer that I couldn't refuse. The National Centre for Conductive Education in Moseley Birmingham had been granted funding for a pilot project with Stroke survivors. I was in the first cohort of 20 to be given an intensive week of therapy followed by 22 weeks of 2hr therapy sessions on a weekly basis. My employer agreed to my leave of absence for a week and I returned to work rejuvenated and inspired. I was still only doing 2 half days per week at work. I then responded to an advertisement for volunteers to participate in a stroke rehabilitation project at Birmingham University, School of Psychology. It was advertised as roller skate therapy that appealed to the inner child I suppose. I started my role as a human lab rat in October 2006. I was more interested in the physical outcome of the research but, in truth, I probably benefited more psychologically from the wisdom, experience and support of the physiotherapist who was assisting with the research. At this point I was unaware of the psychological mountain that I was climbing whilst trying to juggle getting back to work with my physical recovery. As the year progressed I felt frustrated with having additional support at work and wanted to become fully independent again. I started work full time on August 16th 2007. The start of term is always manic with the enrolment of 2000 students before the teaching even starts. I resolved to push myself through my tiredness but I started to make mistakes. I was having great difficulty managing the volume of administrative work. I couldn't use spreadsheets or process word documents and often sat in my office in tears. I couldn't make sense of what was going on. I reached the end of the Autumn term totally exhausted and emotionally broken. At this point I contacted my Union and decided to apply for early retirement on health grounds but it was November 2008 before I was granted this. My experiences in 2008 were not all negative despite my fight to get early retirement. I knew that I had to keep my mind stimulated if I was to improve my cognitive capacity, so I started to work as a volunteer at a local Stroke Association Communication group. I was completely exhausted after each 2 hour session with the group but I quickly learnt that when my new aphasic 'students' became anxious or frustrated their capacity to speak vanished, just like the muscle function in my left side. By working at the stroke club once a

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7

week I started to regain my self confidence and more importantly I was getting a better understanding of what was wrong with me. In September 2008 I joined a local Headway group. The group was run by an occupational therapist who specialised in acquired brain injury rehabilitation. She was the first person who gave me permission to have stroke fatigue. A chance meeting with a GP on my 50th birthday marked the next phase of my recovery. He told me about a gym that was attached to his practice that was run by an experienced physiotherapist. I signed up in September 2008. The gym was kitted out with bespoke motor-therapy machines. This was a perfect environment for me to self manage



my rehabilitation now that I had exhausted my allocation of NHS physiotherapy. I continually looked for additional opportunities to apply my knowledge and experience throughout 2009, getting formally involved in the West Midlands Stroke Research Network management group and occasional guest appearances for Skills for Health NHS training days. In March 2009 I achieved an important personal goal by completing a charity abseil off Fort Dunlop for the Stroke Association. This had a huge impact on my motivation and self esteem as it marked a return to an activity that I would have readily participated in pre-accident. So now all I have to do is get back on my bike and do the London to Paris bike ride for the Stroke Association. I may have to do it on a tandem, but I have a sneaky suspicion that I'll achieve it in the next 2years. Who said Life begins at 40!

Competition Time

During February we are running a competition for ENOS to see who can recruit the highest number of patients.

The PI in the West Midlands recruiting the highest number of patients onto the ENOS trial in February will win a reimbursed registration fee for the European Stroke Conference 2010 in Barcelona 25-28th May. This will include reimbursement of travelling costs and accommodation with the ENOS team. If you are lucky enough to win this prize you can use it yourself, or give it to member of your team.

GOOD LUCK!



News Links

Strokes and chocolate research

<http://www.telegraph.co.uk/health/healthnews/7213514/Chocolate-can-help-prevent-stroke.html>

Stem Cells

<http://www.telegraph.co.uk/finance/newsbysector/pharmaceuticalsandchemicals/7206321/ReNeuron-stem-cell-trial-gets-go-ahead.html>

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8

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STAFF NEWS



- Welcome to Sam Stafford, Andy Carter and Cathy Stretton, all at Heart of England Foundation Trust.
- Also welcome to Jon Anderson and Steven Hurdowar who have joined the team at the Birmingham hub. Jon will be working mostly at Worcester to start with and Steven will split his time between City Hospital and Walsall.
- Welcome also to Karla Preece, appointed as a Stroke Research Nurse at Wolverhampton in January.
- Welcome also to Sarah Owens at Hereford. Our first therapist in the team!
- Last but not least, welcome to Lucy Aldridge at Coventry



So many of our team are planning to get married! Michelle Dean, Emily Jones, Julie Smith and old friend Kathryn Law. Congratulations to you all and let us know when the Big Day happens.

HALL OF FAME – EMPLOYEE OF THE MONTH

Scheme introduced May 2009

May – Emily Jones & Kathryn Law

June- Claire Randall

July – Emily Jones

August – Julie Smith

September – Claire Randall

October- Michelle Dean

November- Kay Finney

December – Jo McCormack

January- Cathy Stretton

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Other News & Up and Coming Events



If you fancy a day out with the family or a walk with friends, what better way than to Step out for stroke and to do your bit to help those affected by stroke. Join us on Sunday 16 May 2010 on our walk around Cannon Hill Park, in Birmingham, an event to suit all abilities.

Can't make it to an organised walk? Why not organise your own? Contact us for more details.

For more information, email robert.jinks@stroke.org.uk call 0121 441 1042 or visit www.stroke.org.uk/stepout

The Stroke Association is registered as a Charity in England and Wales (No.211015) and in Scotland (SC037788). Also registered in Isle of Man (No.943), Jersey (NPO 338) and in Northern Ireland.



Contact Details **Tell Us About Your Event!**

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XIX. European Stroke Conference

Barcelona, Spain

25 - 28 May 2010

West Midlands (South) CLRN Second Annual Conference

Thursday 18th March 2010

**Hilton Warwick Hotel, J15 of the M40, West
Midlands**

Conference Aim

The event aims to promote the benefits of research to Trusts and healthcare professionals, as well as showcasing CLRN successes and initiatives such as collaboration with Topic Specific Research Networks, the Research Champion Scheme and the benefits of delivering commercial research.

Speakers include:

- **Professor Mark Smith**, Pro-Vice Chancellor, University of Warwick
- **Peter Spilsbury**, Director of Strategy and Regulation, NHS West Midlands
- **Dr Mark Lewis**, Health Management and Clinical Research Consultant, Mark Lewis Consulting
- **Malcolm Stamp CBE**, Chief Executive, University Hospital Coventry & Warwickshire NHS Trust
- **Donna Halliman**, Network Manager, Arden Cancer Research Network
- **Dr Gavin Perkins**, Sub-Lead for Injuries and Accidents & Critical Care, West Midlands (South) Comprehensive Local Research Network
- **Professor Steve Thornton**, Clinical Director, West Midlands (South) Comprehensive Local Research Network

Registration

To book your place at the event please complete and return the attached booking form. Attendance is free of charge, however places are limited.

For further information contact Sarah Sutton on 02476 965140 or email

sarah.sutton2@uhcw.nhs.uk.

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10