# Transfusion Alternatives Pre-operatively in Sickle cell disease

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### Plain English summary of protocol

http://www.ctu.mrc.ac.uk/research\_areas/study\_details.aspx?s=36

### Study website

http://www.ctu.mrc.ac.uk/studies/taps.asp

# Contact information

# Type(s)

Scientific

#### Contact name

Dr Lorna Williamson

### Contact details

National Blood Service Long Road Cambridge United Kingdom CB2 2PT

# Additional identifiers

**EudraCT/CTIS** number

**IRAS** number

ClinicalTrials.gov number

NCT00512577

# Secondary identifying numbers

BS02/4/RB31

# Study information

#### Scientific Title

### Acronym

**TAPS** 

### **Study objectives**

The trial aims to investigate whether the administration of a blood transfusion preoperatively to patients with sickle cell disease (Hb SS or Hb SB thal) increases or decreases the overall rate of peri-operative complications. The proportions of patients with peri-operative complications in two randomised groups of transfused and untransfused patients will be compared.

Amended as of 12/01/2012

Countries of recruitment: USA was deleted and Netherlands, Canada and Ireland were added.

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

London Multicentre Research Ethics Committee on 04/12/2006 (ref: 06/MRE02/43).

### Study design

A phase III, multicentre, parallel group, group-sequential randomised controlled trial

# Primary study design

Interventional

# Secondary study design

Randomised controlled trial

### Study setting(s)

Hospital

# Study type(s)

Treatment

## Participant information sheet

# Health condition(s) or problem(s) studied

Sickle Cell Disease

#### Interventions

Patients will be randomised to one of two arms:

Arm A will not receive a pre-operative blood transfusion.

Arm B will receive a pre-operative blood transfusion (top-up or exchange depending on Hb level).

The follow-up period is 30 days post surgery with a blood sample taken additionally at three months post surgery.

As of 17/01/2012, the trial was stopped prematurely because of an excess of SAEs in one or the two arms.

### Intervention Type

Other

### Phase

Phase III

### Primary outcome measure

The frequency of all clinically significant complications in sickle cell patients (Hb SS or SB thal) undergoing low or medium risk planned surgery between day of randomisation and 30 days post surgery, inclusive.

### Secondary outcome measures

- 1. Complications included in the primary outcome, plus red cell alloimmunisation at three months post surgery
- 2. Total days in hospital up to 30 days post surgery, to include hours/days spent having preoperative transfusion, days on intensive care and high dependency units, and other wards
- 3. Re-admission or failure to discharge within 30 days post surgery
- 4. Number of red cell units received (intra and post-operatively)
- 5. Health Economic Analysis incorporating the following elements:
- 5.1. Differential health service costs of routine transfusion relative to control
- 5.2. Differential benefits of routine transfusion in terms of quality adjusted survival
- 5.3. The cost-effectiveness of the two forms of management based on differential costs
- 5.4. Benefits and quality-adjusted life years

### Overall study start date

05/06/2007

### Completion date

05/06/2012

### Reason abandoned (if study stopped)

Objectives no longer viable

# **Eligibility**

### Key inclusion criteria

Current inclusion criteria as of 12/01/2012

- 1. Patient is one year of age or more
- 2. Sickle cell disease, either Hb SS or Hb SB thal, confirmed by Hb electrophoresis, deoxyribonucleic acid (DNA) analysis or high performance liquid chromatography (HPLC)
- 3. At least 24 hours and no more than 28 days before surgery and a date for surgery has been given
- 4. Surgery to be low or medium risk
- 5. Surgery to be with general or regional anaesthesia

- 6. Written informed consent from patient/parent/guardian is given
- 7. More than six months since previous TAPS trial surgery

### Previous inclusion criteria

- 1. Patient is one year of age or more
- 2. Sickle cell disease, either Hb SS or Hb SB thal, confirmed by Hb electrophoresis, deoxyribonucleic acid (DNA) analysis or high performance liquid chromatography (HPLC)
- 3. At least 24 hours and no more than 14 days before surgery and a date for surgery has been given
- 4. Surgery to be low or medium risk
- 5. Surgery to be with general or regional anaesthesia
- 6. Written informed consent from patient/parent/guardian is given
- 7. More than six months since previous TAPS trial surgery

### Participant type(s)

Patient

### Age group

**Not Specified** 

#### Sex

**Not Specified** 

### Target number of participants

As this is a sequential trial the exact number cannot be anticipated but it is predicted that approximately 400 patients will be recruited to the study.

### Key exclusion criteria

Current exclusion criteria as of 12/01/2012

- 1. Having a procedure involving intravascular contrast radiography or an imaging procedure
- 2. On a regular blood transfusion regime
- 3. Had a blood transfusion within the last three months
- 4. The planned procedure involves local anaesthetic only
- 5. Haemoglobin level at randomisation less than 6.5 g/dL
- 6. Children with a clinical history of stroke (history of silent infarcts would not preclude randomisation)
- 7. Acute chest syndrome within the last six months, or patient has ever required intubation and mechanical ventilation for treatment of acute chest syndrome which is still relevant to their condition.
- 8. Oxygen saturation at randomisation less than 90%
- 9. Patient is on renal dialysis
- 10. Already entered twice into the TAPS trial
- 11. The physician is unwilling to randomise the patient (such patients will be entered into a trial log)

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### Date of first enrolment

05/06/2007

### Date of final enrolment

05/06/2012

# Locations

### Countries of recruitment

Canada

England

Ireland

Netherlands

United Kingdom

Study participating centre National Blood Service Cambridge United Kingdom CB2 2PT

# Sponsor information

### Organisation

NHS Blood and Transplant (NHSBT) (UK)

# Sponsor details

Professor Marion Scott Bristol Institute of Transfusion Services Southmead Road Bristol United Kingdom BS10 5ND

### Sponsor type

Government

### Website

http://www.nhsbt.nhs.uk/

### **ROR**

https://ror.org/0227qpa16

# Funder(s)

### Funder type

Government

### **Funder Name**

The National Blood Service (UK) (ref: BS02/4/RB31) - an operating division of NHS Blood and Transplant: project grant

# **Results and Publications**

# Publication and dissemination plan

Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

# IPD sharing plan summary

Not provided at time of registration