

# Comparing anti-epileptic treatments for seizures following traumatic brain injury

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		<input type="checkbox"/> Protocol
<b>Registration date</b> 20/10/2020	<b>Overall study status</b> Ongoing	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
<b>Last Edited</b> 09/03/2021	<b>Condition category</b> Nervous System Diseases	<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

### Background and study aims

The majority of patients who suffer a traumatic brain injury (TBI) do not need to stay in hospital overnight. However, some require admission to a specialist hospital, as their injury is more serious. Seizures can be harmful or even fatal, if not treated appropriately. Medications that reduce the risk of seizures are called anti-epileptic drugs (AEDs). However, AEDs have side effects, which can affect patients' quality of life, memory, concentration and general health. Patients with seizures after TBI are typically prescribed an AED to prevent further seizures, most commonly phenytoin or levetiracetam. Some doctors favour a short course, whereas others favour a longer course. The first part of the study aims to answer if one approach is better than the other (MAST-DURATION). The second part of the study aims to answer if a 7-day course of either phenytoin or levetiracetam should be used for patients with a serious TBI to prevent seizures from happening (MAST-PROPHYLAXIS).

### Who can participate?

#### MAST-DURATION:

Patients aged 10 and over, with a traumatic brain injury, managed in a neurosurgical unit, who have started on phenytoin or levetiracetam due to an acute symptomatic seizure during acute hospitalisation.

#### MAST-PROPHYLAXIS:

Patients aged 10 and over, with a traumatic brain injury, managed in a neurosurgical unit, without an acute symptomatic seizure.

### What does the study involve?

#### MAST-DURATION:

Patients will be randomly allocated to receive to a maximum of 3 months or a minimum of 6 months course of phenytoin or levetiracetam.

#### MAST-PROPHYLAXIS:

Patients will be randomly allocated to receive either phenytoin, levetiracetam or no anti-epileptic drug for a period of 7 days.

Current international guidelines for traumatic brain injury recommend the use of phenytoin for the prevention of early post-traumatic seizures, when the benefits are thought to outweigh the risks. In practice, alternative anti-epileptic drugs such as levetiracetam are being used clinically

as they are associated with fewer risks.

Patients will be assessed for seizures during hospital admission and will also be asked to complete follow-up questionnaires at 6,12, 18 and 24 months.

What are the possible benefits and risks of participating?

**MAST-DURATION:**

The study drugs patients will be provided with are standard anti-epileptic drugs, used to control seizures. The researchers expect seizures to be reduced as a result of taking the study drug.

**MAST-PROPHYLAXIS:**

There is no guarantee that patients will benefit from taking part in this trial.

Apart from the potential side effects from the study drugs, there are no additional risks or disadvantages involved with taking part in this study. Patients will continue to receive the standard care for their condition.

Where is the study run from?

Addenbrookes Hospital (UK)

When is the study starting and how long is it expected to run for?

January 2020 to March 2026

Who is funding the study?

National Institute for Health Research (NIHR) (UK)

Who is the main contact?

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## Contact information

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Scientific

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**Additional identifiers****Clinical Trials Information System (CTIS)**

2020-000282-16

**Integrated Research Application System (IRAS)**

276415

**ClinicalTrials.gov (NCT)**

NCT04573803

**Protocol serial number**

CCTU0235, IRAS 276415, HTA - NIHR128226, CTA 24551/0044/001-0001

**Study information****Scientific Title**

Pharmacological management of seizures post traumatic brain injury (MAST trial)

**Acronym**

MAST

**Study objectives**

MAST-DURATION: There will be a significant difference in the rate of late post-traumatic seizures (PTS) within 24 months post-traumatic brain injury between a longer course of phenytoin or levetiracetam (at least 6 months) and a shorter course (up to 3 months) in traumatic brain injury patients with early seizures.

MAST-PROPHYLAXIS: There will be a significant difference in the rate of post-traumatic seizures within the first 2 weeks post-traumatic brain injury between a 7-day course of phenytoin, levetiracetam or no anti-epileptic drug.

**Ethics approval required**

Old ethics approval format

### **Ethics approval(s)**

Approved 11/01/2021, Cambridge East (East of England - Cambridge East Research Ethics Committee, The Fulbourn Centre, Home End, Fulbourn, Cambridgeshire, CB21 5BS, UK; +44 (0) 207 104 8102; cambridgeeast.rec@hra.nhs.uk), ref: 20/EE/0252

### **Study design**

MAST-DURATION: Phase III randomized multicentre pragmatic parallel-group trial  
MAST-PROPHYLAXIS: Phase III randomized multicentre pragmatic parallel-group trial

### **Primary study design**

Interventional

### **Study type(s)**

Prevention

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

Post-traumatic seizures in traumatic brain injury patients

### **Interventions**

MAST-DURATION: Patients will be randomized 1:1 to a maximum of 3 months OR a minimum of 6 months duration of a clinically prescribed AED (phenytoin or levetiracetam).

MAST-PROPHYLAXIS: Patients will be randomized 1:1:1 to phenytoin, levetiracetam or no AED for a period of 7 days.

Dosing for both parts of the trial will be as clinically prescribed and administered as per routine practice.

### **Intervention Type**

Drug

### **Phase**

Phase III

### **Drug/device/biological/vaccine name(s)**

Phenytoin, levetiracetam

### **Primary outcome(s)**

MAST-DURATION: Occurrence of late PTS measured using self-report questionnaire within 24 months after TBI

MAST-PROPHYLAXIS: Occurrence of PTS measured using clinical observation/self-report questionnaire within 2 weeks after TBI

### **Key secondary outcome(s)**

1. Occurrence of PTS measured using self-report questionnaire up to 2 years (MAST-PROPHYLAXIS only)
2. Levels of disability measured using Extended Glasgow Outcome Scale at 6, 12, 18 and 24 months
3. Cognitive function measured using Neurobehavioural Symptom Inventory at 6, 12, 18 and 24

months

4. Quality of life measured using EQ-5D-5L at 6, 12, 18 and 24 months
5. Adverse events measured using Liverpool Adverse Events Profile at 6, 12, 18 and 24 months
6. Economic evaluation using the EQ-5D-5L questionnaire at 6, 12, 18 and 24 months
7. Frequency of PTS measured using self-report questionnaire within 24 months post traumatic brain injury
8. Mortality measured using data from the Spine for patients in England, nurse telephone calls outside England at 6, 12, 18 and 24 months
9. Adverse events of special interest measured using reports from sites and self-report during treatment

### **Completion date**

01/03/2026

## **Eligibility**

### **Key inclusion criteria**

#### **MAST-DURATION:**

1. Patients aged  $\geq 10$  years with TBI managed in an NSU who have started on phenytoin or levetiracetam due to an acute symptomatic seizure during acute hospitalisation
2. Patient or Legal Representative is willing and able to provide informed consent or in the absence of a legal representative, an Independent Healthcare Professional provides authorisation for patient enrolment

#### **MAST-PROPHYLAXIS:**

1. Patients aged  $\geq 10$  years, with TBI managed in an NSU without an acute symptomatic seizure
2. Patient or Legal Representative is willing and able to provide informed consent or in the absence of a legal representative, an Independent Healthcare Professional provides authorisation for patient enrolment

### **Participant type(s)**

Patient

### **Healthy volunteers allowed**

No

### **Age group**

Mixed

### **Lower age limit**

10 years

### **Sex**

All

### **Key exclusion criteria**

#### **MAST-DURATION:**

1. Un-survivable injury
2. Previous history of epilepsy
3. Patients who are on an AED pre-TBI

4. Patient who has been clinically prescribed an AED to treat PTS (other than phenytoin or levetiracetam) since current admission
5. Any hypersensitivity to study drug selected or any of its excipients

**MAST-PROPHYLAXIS:**

1. Post-traumatic seizures
2. Unsurvivable injury
3. Previous history of epilepsy
4. Patients who are on an AED pre-TBI
5. Pregnancy or breastfeeding
6. Any hypersensitivity to study drug (or hydantoins or pyrrolidone derivatives) or any of its excipients
7. Time interval from the time of admission to NSU to randomisation exceeds 48 hours

**Date of first enrolment**

05/03/2021

**Date of final enrolment**

01/03/2024

## **Locations**

**Countries of recruitment**

United Kingdom

England

Northern Ireland

Scotland

Wales

**Study participating centre**

**Addenbrookes Hospital**

Cambridge University Hospitals NHS Foundation Trust  
Hills Road  
Cambridge  
United Kingdom  
CB2 0QQ

**Study participating centre**

**Freeman Hospital**

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PR2 9HT

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# Sponsor information

## Organisation

Cambridge University Hospitals NHS Foundation Trust

## Organisation

University of Cambridge

# Funder(s)

## Funder type

Government

## Funder Name

National Institute for Health Research

## Alternative Name(s)

National Institute for Health Research, NIHR Research, NIHRresearch, NIHR - National Institute for Health Research, NIHR (The National Institute for Health and Care Research), NIHR

## Funding Body Type

Government organisation

## Funding Body Subtype

National government

## Location

United Kingdom

# Results and Publications

## Individual participant data (IPD) sharing plan

The data-sharing plans for the current study are unknown and will be made available at a later date

## IPD sharing plan summary

Data sharing statement to be made available at a later date

## Study outputs

<b>Output type</b>	<b>Details</b>	<b>Date created</b>	<b>Date added</b>	<b>Peer reviewed?</b>	<b>Patient-facing?</b>
<a href="#">HRA research summary</a>			26/07/2023	No	No
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes
<a href="#">Study website</a>	Study website	11/11/2025	11/11/2025	No	Yes