To understand the impact of rifaximin on the NHS hospital resource use associated with the management of patients with hepatic encephalopathy (HE)

Submission date 12/08/2014	Recruitment status No longer recruiting	Prospectively registered		
		Protocol		
Registration date	Overall study status	Statistical analysis plan		
29/08/2014	Completed Condition category	[X] Results		
Last Edited		Individual participant data		
19/05/2017	Nutritional Metabolic Endocrine			

Plain English summary of protocol

Background and study aims

Hepatic encephalopathy (HE) is a nervous system-related mental disorder for which symptoms include level of consciousness, slowing down of thoughts and movements, deterioration of mental status, confusion, and, in severe forms, coma. HE is a common complication of chronic liver cirrhosis caused by abnormal levels of toxins that accumulate in the blood, which are normally excreted in a healthy liver. We are carrying out a clinical study to understand the effect of a drug called rifaximin in treating patients with HE and how rifaximin is used in the management of HE in routine UK clinical practice.

Who can participate?

Patients who have been diagnosed with HE and are not taking rifaximin and patients on rifaximin for at least 12 months before the start of the study.

What does the study involve?

Details of all recorded inpatient (including critical care) and A&E episodes will be obtained for all patients, for the full 12-month periods before and after starting on rifaximin, even if rifaximin was discontinued prior to 12 months.

What are the possible benefits and risks of participating?

There is no additional risk to patients from taking part in this study since it only involves a retrospective review by a researcher of their medical records and electronic hospital admissions data.

Where is the study run from?

The study is run from tsecondary/tertiary care centres in the follwoing areas of the UK: Belfast, Bristol, Cambridge, Dundee, Durham, Edinburgh, Glasgow, Kings, Liverpool, Newcastle, Nottingham, Portsmouth, Royal Free, Southampton, Truro.

When is the study starting and how long is it expected to run for? July 2013 to September 2016

Who is funding the study? Norgine Ltd, UK (UK)

Who is the main contact?

1. Mr Robert Dew (public)
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2. Dr Sharmila Kar (scientific)
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Contact information

Type(s)

Scientific

Contact name

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers ZZ2013UK01

Study information

Scientific Title

The impact of rifaximin on the NHS hospital resource use associated with the management of patients with hepatic encephalopathy (HE): a retrospective observational study

Acronym

IMPRESS

Study objectives

Clinical trial data have demonstrated the potential of rifaximin to reduce overt hepatic encephalopathy (HE) episodes and hospitalisations. There is therefore a need by physicians, commissioners and other healthcare professionals caring for people with HE to understand the impact of management with rifaximin on NHS resource use in real world clinical practice. Currently available data is from evaluations undertaken in single UK centres. The study also aims to describe the characteristics of patients currently being managed with rifaximin and the associated patient pathways. It is hoped that these data will provide valuable information for physicians and commissioners to assist decision making and facilitate effective service provision and patient management in the NHS both acutely and long-term.

Ethics approval required

Old ethics approval format

Ethics approval(s)

West of Scotland, REC 3, 20/06/2014, ref. 14/WS/1017

Study design

Non-interventional multi-centre retrospective observational research study

Primary study design

Observational

Secondary study design

Case-control study

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

No participant information sheet available

Health condition(s) or problem(s) studied

Hepatic encephalopathy

Interventions

This study will involve a review of the secondary/tertiary care medical records and electronic hospital admissions data for patients with hepatic encephalopathy who have received rifaximin as part of normal clinical practice. Patients initiated on rifaximin will be identified by members of the routine care team from hospital pharmacy databases with 6 months pre- vs post-initiation of rifaximin (liver specific). Data is collected from medical records and will be recorded and collected for the period of 12 months pre- and post-initiation of rifaximin.

Intervention Type

Other

Phase

Primary outcome measure

Data collection for the 6 months pre- vs post-initiation of rifaximin (liver-specific), including number of hospital bed days per patient.

Secondary outcome measures

- 1. Comparison of resource use: 6 months pre- vs post-initiation of rifaximin (liver specific and all cause) mainly evaluating hospitalisation (and re-hospitalisation) rates and hospital length of stay including ITU/HDU admissions
- 2. Patients' demographics and disease-related characteristics
- 3. Patient pathway
- 4. Adverse drug reactions to rifaximin

Overall study start date

11/07/2013

Completion date

09/09/2016

Eligibility

Key inclusion criteria

- 1. Patients with a clinical diagnosis of hepatic encephalopathy
- 2. Hepatic encephalopathy diagnosed prior to initiation of rifaximin
- 3. Patients initiated on rifaximin for hepatic encephalopathy at least 12 months prior to the date of data collection
- 4. Both female and male, no restriction of age

Participant type(s)

Patient

Age group

Other

Sex

Both

Target number of participants

250-300 patients

Key exclusion criteria

- 1. Patients receiving rifaximin where subsequent clinical diagnosis excludes hepatic encephalopathy
- 2. Patients initiated on rifaximin at hospitals not taking part in the study
- 3. Patients for whom hospital records are unavailable

Date of first enrolment

12/08/2014

Date of final enrolment 24/06/2015

Locations

Countries of recruitment

England

Northern Ireland

Scotland

United Kingdom

Study participating centre Freeman Hospital

Freeman Road Newcastle upon Tyne United Kingdom NE7 7DN

Study participating centre Queen Alexandra Hospital

Southwick Hill Road Portsmouth United Kingdom PO6 3LY

Study participating centre Oueen's Medical Centre

Derby Road Nottingham United Kingdom NG7 2UH

Study participating centre Royal Free Hospital

Pond Street London United Kingdom NW3 2QG

Study participating centre Royal Liverpool University Hospital

Prescot Street Liverpool United Kingdom L7 8XP

Study participating centre King's College Hospital

Denmark Hill London United Kingdom SE5 9RS

Study participating centre Royal Cornwall Hospital

Penventinnie Lane Truro United Kingdom TR1 3LQ

Study participating centre Addenbrooke's Hospital

Hills Road Cambridge United Kingdom CB2 0QQ

Study participating centre Southampton General Hospital

Tremona Road Southampton United Kingdom SO16 6YD

Study participating centre Southmead Hospital Southmead Road

Bristol United Kingdom BS10 5NB

Study participating centre Ninewells Hospital Ninewells Avenue Dundee

United Kingdom DD2 1UB

Study participating centre Royal Victoria Hospital

Grosvenor Road Belfast United Kingdom BT12 6BA

Study participating centre University Hospital of North Durham

North Road Durham United Kingdom DH1 5TW

Sponsor information

Organisation

Norgine Ltd (UK)

Sponsor details

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Sponsor type

Industry

ROR

https://ror.org/046zgtw08

Funder(s)

Funder type

Industry

Funder Name

Norgine Ltd (UK)

Results and Publications

Publication and dissemination plan

Planned publication in a peer reviewed journal.

Intention to publish date

01/04/2017

Individual participant data (IPD) sharing plan

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

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/10/2017		Yes	No
HRA research summary			28/06/2023	No	No