

# Heart Revascularisation Trial - UK

<b>Submission date</b> 30/07/2010	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 30/07/2010	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 13/06/2019	<b>Condition category</b> Circulatory System	<input type="checkbox"/> Individual participant data

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**Protocol serial number**  
2995

## Study information

**Scientific Title**  
Heart Revascularisation Trial - UK

**Acronym**  
Heart Revascularisation Trial - UK

**Study objectives**

Patients with heart failure, left ventricular systolic dysfunction and definite coronary disease in whom angina is not the predominant symptom will be identified. Cardiac nuclear techniques or stress echocardiography will then be used to identify patients with substantial stress-induced ischaemia or myocardial hibernation/stunning. Patients with either of these problems will be randomised to best medical treatment alone versus best medical therapy and angiography with the intention of, where possible, revascularisation. Revascularisation may be by whichever conventional means the attending cardiologist and cardiac surgeon agree is advisable. Patients will be followed until 90% of patients in the worst performing group have died to determine the effect of the above interventions on all-cause mortality, symptoms, quality of life and recurrent hospitalisation.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

MREC, ref: 0/3/35

**Study design**

Multicentre randomised interventional process of care and treatment trial

**Primary study design**

Interventional

**Study type(s)**

Treatment

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

Topic: Cardiovascular; Subtopic: Cardiovascular (all Subtopics); Disease: Cardiovascular

**Interventions**

1. Optimal medication plus angiography with, if appropriate, CABG
2. Optimal medication

Follow-up length: 60 months

Study entry: single randomisation only

**Intervention Type**

Mixed

**Primary outcome(s)**

Survival

**Key secondary outcome(s)**

Determine whether coronary revascularisation reduces all-cause and cause-specific hospitalisation

**Completion date**

20/11/2006

# Eligibility

## Key inclusion criteria

1. Heart failure (in the investigators opinion) requiring chronic diuretic therapy
2. Coronary disease as the cause of heart failure as evidenced by a history of previous myocardial infarction, previous revascularisation or previous angiography
3. Left ventricular systolic dysfunction (ejection fraction less than 35%)
4. Stress-induced myocardial ischaemia or evidence of myocardial hibernation/stunning affecting five or more left ventricular segments in a 16-segment model
5. Male and female, lower age limit of 18 years

## Participant type(s)

Patient

## Healthy volunteers allowed

No

## Age group

Adult

## Lower age limit

18 years

## Sex

All

## Total final enrolment

138

## Key exclusion criteria

1. Inability to give written informed consent. No age limits are stipulated but patients will have to be over 18 years to give consent and some patients may be considered too frail to survive surgery and would be excluded.
2. Patients who are not candidates for coronary artery bypass graft (CABG) surgery because of frailty or serious co-morbidity, e.g., severe lung disease, metastatic carcinoma. N.B. Some patients will be candidates for percutaneous transluminal coronary angioplasty (PTCA) but prior to randomisation (i.e. prior to doing an angiogram for study purposes) the investigator should be willing to send the patient to CABG surgery in case that is the preferred mode of revascularisation.
3. Unstable angina, myocardial infarction or stroke within the preceding 2 months
4. Patients being considered for revascularisation for the relief of chest pain (angina) or for valve surgery

## Date of first enrolment

07/03/2003

## Date of final enrolment

20/11/2006

# Locations

**Countries of recruitment**

United Kingdom

England

**Study participating centre**

Hull and East Yorkshire Hospitals NHS Trust

Cottingham

United Kingdom

HU16 5JQ

**Sponsor information****Organisation**

Hull and East Yorkshire Hospitals NHS Trust (UK)

**ROR**

<https://ror.org/01b11x021>

**Funder(s)****Funder type**

Research council

**Funder Name**

Medical Research Council (MRC) (UK)

**Alternative Name(s)**

Medical Research Council (United Kingdom), UK Medical Research Council, MRC

**Funding Body Type**

Government organisation

**Funding Body Subtype**

National government

**Location**

United Kingdom

**Funder Name**

Arthritis Research UK

**Alternative Name(s)****Funding Body Type**

Private sector organisation

**Funding Body Subtype**

Other non-profit organizations

**Location**

United Kingdom

## Results and Publications

**Individual participant data (IPD) sharing plan****IPD sharing plan summary**

Not provided at time of registration

**Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/02/2011	13/06/2019	Yes	No
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes