Continue Or Stop post-Stroke Antihypertensives Collaborative Study

Prospectively registered Submission date Recruitment status 28/05/2010 No longer recruiting [X] Protocol [] Statistical analysis plan Registration date Overall study status 28/05/2010 Completed [X] Results Individual participant data **Last Edited** Condition category 27/04/2015 Circulatory System

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

2134

Study information

Scientific Title

A multicentre, prospective, randomised, open, blinded-endpoint study to assess whether existing antihypertensive therapy should be continued or discontinued within 24-hours of stroke onset and for the subsequent two weeks

Acronym

COSSACS

Study objectives

Up to 40% of acute stroke patients on hospital admission are already taking antihypertensive therapy, and most will develop elevated blood pressure levels as an acute complication of the stroke. However, no guidelines exist as to whether antihypertensive therapy should be continued or discontinued following acute stroke. The Continue Or Stop post-Stroke Antihypertensives Collaborative Study (COSSACS) is a multicentre, prospective, randomised, open, blinded-endpoint study to assess whether existing antihypertensive therapy should be continued or discontinued within 24-hours of stroke onset and for the subsequent two weeks.

A study population of 2900 patients with both cerebral infarction and haemorrhage on antihypertensive treatment at hospital admission will be recruited giving the study a 90% power at the 5% significance level to detect a relative reduction of 10% (absolute risk reduction of 6%) in death and dependency between continuation and discontinuation groups at two weeks. Non-dysphagic, hospital-admitted stroke patients will be recruited within 24 hours of stroke onset and also within 24 hours of last dose of pre-existing antihypertensive therapy.

Baseline investigations will include: blood pressure measurement using UA-767 monitor, modified Rankin Score, Barthel Index, National Institutes of Health Stroke Score and Oxfordshire Community Stroke Project Classification. Patients will be centrally randomised by telephone to continue or discontinue pre-existing antihypertensive treatment for a two-week period. Blood pressure, modified Rankin Score, Barthel Index and National Institutes of Health Stroke Score will be repeated at 2 weeks by an observer blinded to the randomised group. Mortality and health-related quality of life outcomes will be centrally recorded at 6 months.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Trent Research Ethics Committee, 22/08/2002, ref: 02/4/051

Study design

Multicentre randomised interventional treatment 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

Topic: Stroke Research Network; Subtopic: Acute Care; Disease: Therapy type

Interventions

Baseline investigations include blood pressure measurement using UA-767 monitor, modified Rankin Score, Barthel Index, National Institutes of Health Stroke Score and Oxfordshire Community Stroke Project Classification.

Patients will be centrally randomised by telephone to continue or discontinue pre-existing antihypertensive treatment for a two-week period.

Blood pressure, modified Rankin Score, Barthel Index and National Institutes of Health Stroke Score will be repeated at 2 weeks by an observer blinded to the randomised group. Mortality and health-related quality of life outcomes will be centrally recorded at 6 months.

Follow-up length: 6 months

Study entry: single randomisation only

Intervention Type

Other

Phase

Phase III

Primary outcome measure

Death or dependancy (modified Rankin Score greater than 3) at 2 weeks post-randomisation

Secondary outcome measures

Early outcomes, measured at 2 weeks and 6 months:

- 1. Neurological deterioration
- 2. Functional status
- 3. Blood pressure changes from admission and discharge

Late outcomes:

- 4. Death and dependency
- 5. Fatal and non-fatal stroke recurrence
- 6. Functional status
- 7. Health-related quality of life

Overall study start date

01/01/2001

Completion date

31/03/2009

Eligibility

Key inclusion criteria

- 1. Aged greater than or equal to 18 years, either sex
- 2. Stroke onset greater than or equal to 48 hours (for suspected stroke, onset time is last time patient was asymptomatic)
- 3. Clinical diagnosis of suspected stroke by neuroimaging before or after study entry to exclude non-stroke diagnoses and define stroke type
- 4. Currently receiving antihypertensive treatment and within 48 hours or last dose
- 5. Informed patient consent or relative/carer consent

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

Planned sample size: 3000; UK sample size: 3000

Key exclusion criteria

- 1. Hypertensive encephalopathy
- 2. Hypertension greater than 200/120 mmHg in association with intracerebral haemorrhage
- 3. Co-existing cardiac or vascular emergency
- 4. Contraindications to stopping antihypertensive therapy
- 5. Impaired conscious level
- 6. Dysphagia
- 7. Premorbid dependence
- 8. Co-existing life-threatening condition with life expectancy less than 6 months
- 9. Females of child-bearing potential
- 10. Non-stroke diagnoses

Date of first enrolment

01/01/2001

Date of final enrolment

31/03/2009

Locations

Countries of recruitment

England

Study participating centre University of Leicester Leicester United Kingdom

Sponsor information

Organisation

LE2 7LX

University Hospitals of Leicester NHS Trust (UK)

Sponsor details

Leicester Royal Infirmary Infirmary Square Leicester England United Kingdom LE1 5WW

Sponsor type

Hospital/treatment centre

Website

http://www.uhl-tr.nhs.uk/

ROR

https://ror.org/02fha3693

Funder(s)

Funder type

Charity

Funder Name

Health Foundation (UK)

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

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Protocol article	protocol	01/02/2005		Yes	No
Results article	results	01/08/2010		Yes	No
Results article	results	01/06/2015		Yes	No