



# OHSU SIREN NETWORK NEWS

Issue: Sept 2019

## CALENDAR

9/10 1pm EDT SIREN Study  
Coordinator – Bluejeans  
conference link in e-mail

9/12 3pm EDT Finance  
Committee meeting

9/18 1pm EDT [Journal Club](#)

9/25 12pm EDT SIREN  
Steering Committee -  
Bluejeans link in e-mail

10/1 1pm EDT SIREN Study  
Coordinator – Bluejeans  
conference link in e-mail

For working group meeting  
times visit:

[SIREN CCC Events Calendar](#)

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[OHSU SIREN Website](#)

Follow our research team on  
Twitter: [@OHSU\\_CPREM](#)

## BOOST 3 NEWS AND UPDATES

- 4 sites are now open for enrollment!
- New material:
  - Two examples of EFIC Reports are posted to the [Getting Started page](#) under EFIC Resources. Please take the time to review these before you begin to create your site's EFIC Report.
  - **If you're having trouble completing a milestone – please reach out to us for assistance and advice. Getting sites up and running this year is a grant required milestone. Please help us all stay compliant. All tasks for you to receive your first milestone payment should be complete at this time.**
  - Opt out Bracelets: bracelets are sent out when sites have requested review of their completed CC/PD forms (CC forms at least). Please contact the BOOST3 e-mail when you are ready for bracelets: [boost-contact@umich.edu](mailto:boost-contact@umich.edu)
  - Is your study planning to participate in BioBOOST? (an ancillary study to BOOST-3 which will fund the collection of blood and CSF for analysis of proteomic biomarker studies and other future uses.) Please e-mail Jenny if your site has been contacted about participating, has plans, or is interested in participating in BioBOOST.
  - cIRB site review – Please be sure you are doing your due diligence when it comes to EFIC pre-study activities. Specifically they really want to see that your EFIC activities encompass your entire community and are not solely conducted at your institution. Have you included community groups?, the elderly? Marginalized groups? The UCSF team shared they had good success reaching out to social service organizations, community groups at their police stations, and veterans.
    - The cIRB has requested that the CCC 'pre-review' the EFIC study packet sites are submitted prior to sending it to the cIRB to confirm completeness and diligence. The CCC will be testing this process with the next round of EFIC submissions. If you are submitting soon, please be aware the CCC may review your packet and request edits prior to sending it into the cIRB.
    - [OHSU hosted BOOST3 webpage](#): As part of our SIREN Network information, we have added a page with BOOST 3 resources. Let us know if there are additional resources, links or information you would like to see added to this site. Feel free to share this resource!

- **Contracts:** The NIH has asked that BOOST 3 contract be put into a no cost extension for year 1. The CCC is working to make this happen and will be in touch with sites to amend your contract once the details are approved.

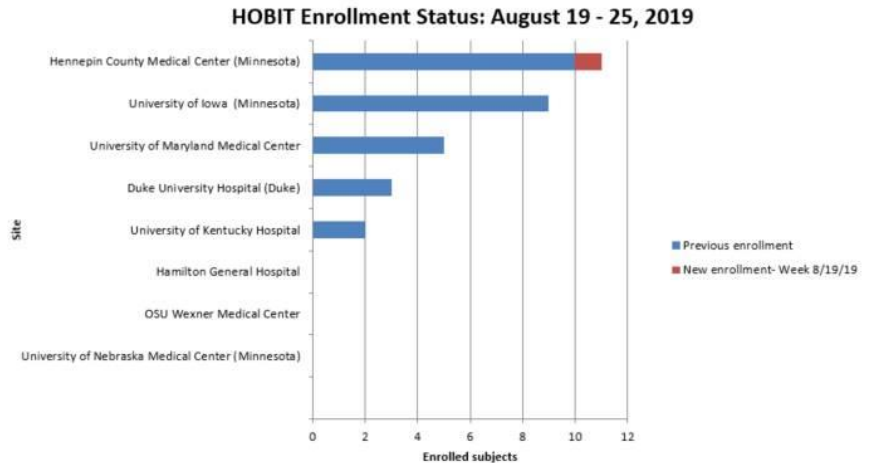
## JOURNAL CLUB – EARLY CAREER INVESTIGATORS NEEDED

Do you have an early career investigator on your team who would be interested in presenting at an upcoming journal club meeting? Everyone is welcome to join, and presenters are always needed. Let us know if you'd like to present!

## ONGOING TRIALS

### HOBIT – Hyperbaric Oxygen Brain Injury Treatment Trial

- Enrollment: 30 subjects (Goal:200)
- 8 Active sites – 5 have enrolled at least 1 subject to date
- A number of HOPIT study resources were updated over the summer. Make sure you've got the most up to date info at your site by visiting the Toolbox, and FAQ pages
- DSMB for HOBIT meets in September. Study is currently under its enrollment to date target
- CCC needs to have 12 sites up and running by the end of the year. Currently 8 sites are released to enroll.



## WORKGROUP SPOTLIGHT

### EMS working group:

- A R27 Planning Grant for post-ROSC care was submitted.
- A Stroke systems of care survey for SIREN communities has been reviewed by the WG
- There are ongoing discussions about biomarker collection for OHCA and how to accomplish this.

### Electronic Data Capture group:

- There is a group working on an ancillary grant for ICECAP specifically to collect additional data points, with the goal of creating patient phenotypes. Data points and collection parameters are being discussed, but the list has not been finalized.
- There was discussion of some new technologies in development and potential opportunities for some synergistic studying of these devices with upcoming trials (as applicable).

### Human Subjects Protection

- Dr. Michelle Biros chairs this committee, and gave a brief overview of the committee's purpose and history on the steering committee call in August.
- This committee has been tasked with reviewing ethical dilemmas that come up surrounding human subjects research, and specific trial cases that warrant further investigation.
- HSP has published a number of papers over the years, and the CCC is going to work on creating a website where those committees papers can be referenced as needed.
- Dr. Silbergleit on a funding proposal with the assistance of the HSP group to look at the EFIC review process.

## WEBDCU TRICK OF THE MONTH

Did you know the columns in WebDCU are sortable? Just click on the word in the blue column header you want to sort by. 1 click =A-Z sort; click again= Z-A sort. Below you can see that the CC form list has been sorted by "hub" and then by "site" – the up arrows = A-Z sort. (see example on next page)

#	Hub	Site	Secondary Site 1	Secondary Site 2	Name of Event	City	Start date of event	Type of event	Date First Entered	Last Updated	Locked
61	North Shore	North Shore University Hospital, Manhasset, NY	North Shore University Hospital, Manhasset, NY		Northwell Health Walk-Tanger outlet	Riverhead	19-May-2019	A: Investigator staffed booth/table event (where surveys are completed)	16-May-2019 2:09PM	29-May-2019	No
62	North Shore	North Shore University Hospital, Manhasset, NY			Stroke Support Group	NYC	26-Apr-2019	A: A focus group (moderated, small group sessions)	24-Apr-2019 9:30AM	29-May-2019	No
63	OHSU	Oregon Health & Science University Hospital, Portland, OR			Neurological Surgery Grand Rounds @ OHSU	Portland	22-Apr-2019	A: A presentation at a regular meeting with an existing group	22-Apr-2019 4:16PM	30-May-2019	No
64	OHSU	Oregon Health & Science University Hospital, Portland, OR			Distracted Driver Classes	Portland	07-May-2019	A: A presentation at a regular meeting with an existing group	12-Apr-2019 1:29PM	13-Jun-2019	No

## UPCOMING TRIALS

### ICECAP = The Influence of Cooling duration on Efficacy in Cardiac Arrest Patients

Brief summary: ICECAP study will enroll comatose adult survivors of out of hospital cardiac arrest that have already been rapidly cooled using a definitive temperature control method. Those with and without initial shockable rhythms will be studied as distinct populations (maximum of 1800 subjects over four years). ICECAP will determine if identifying an optimal duration of cooling can improve outcomes, and if development of a duration response curve can substantiate efficacy in a wider patient population.

- 8/13- trial has been approved for funding.

### OHSU SIREN network sites

- The following sites from our network are anticipated to participate in ICECAP
  - University of Alabama
  - University of Utah
  - The Ohio State University
  - OHSU
  - University of Wisconsin
  - University of Rochester

If your site is interested in participating in ICECAP, but is not listed, please fill out the survey on the ICECAP webpage: <https://siren.network/clinical-trials/icecap>

From the ICECAP leadership team (Will Meurer, Romer Geocadin, Robert Silbergleit)

### Here is what we know about some next steps:

- Protocol:
  - The ICECAP website <https://siren.network/clinical-trials/icecap>, on the SIREN website <https://siren.network/>, includes links to the trial protocol and other material.
  - Please take a moment to re-familiarize yourself with these posted study materials (since it's been a long time).
  - We already have an IDE from the FDA for this protocol.
  - The SIREN DSMB will review the protocol next.
  - Start thinking about implementation at your site now. How will eligible patients be rapidly identified? Is initiation of cooling as standard care in your system efficient enough to meet the eligibility criteria? Who are the key clinical team members from whom you need to get buy in?
- Notice of Award:
  - We have not received a Notice of Award yet.
  - When we do, we will start the site contracting process.
  - The site contracting process will include a new rider for SIREN Hubs that already have a master agreement.
  - The site contracting process will include new subcontracts to SIREN Spokes from their SIREN Hubs.
  - Some of you are unsure of whether your site is a SIREN Hub or Spoke, and are unsure how to proceed.
  - Your site may already be involved with SIREN but through different investigator groups, unbeknownst to you.
  - We will work with each of you, one by one, to help understand your situation.

- **Central IRB:**
  - ICECAP will use the SIREN Emergency Research Central IRB (run by Advarra). Per NIH single IRB policy.
  - Most of your institutions have a pre-existing reliance agreement with Advarra.
  - Reliance agreements allow the CIRB to review for your institution in general, not for a specific trial.
  - We'll confirm existing reliance agreements and work on new ones for any sites where these are missing.
  - After the SIREN DSMB review and Notice of Award, we will submit the protocol to the ER-CIRB.
  - Sites will submit information to the SIREN CCC needed for site IRB applications.
  - Sites will submit an application to their local IRB's asking to cede review of this specific trial to the CIRB.
  - After CIRB approval of the protocol, the SIREN CCC will submit applications to CIRB on behalf of each site.
- **Investigators Meeting:**
  - Will be looking for dates and a location for a kick-off Investigator Meeting as soon as practical. Depending on the timing of the Notice of Award and other steps mentioned above, this might be late Fall or early Winter.
  - Stay tuned.
- Our email list for ICECAP investigators is imperfect. Please excuse duplicates of this email due to use of overlapping SIREN lists. Similarly, please feel free to forward this message to any overlooked ICECAP investigators or collaborators we inadvertently missed on our current list.

## STEERING COMMITTEE CALL NOTES

- SHINE (Stroke Hyperglycemia Insulin Network Effort) data is available for secondary analyses - if you are interested in utilizing this data set, submit your proposal here: <https://nett.umich.edu/clinical-trials/shine/data-analysis-publication-application-form>

## FUTURE POTENTIAL TRIALS

### **KETOSIS = Ketogenic Emergency Treatment of Status epilepticus In Siren**

This is a proposal for a phase II multicenter, double-blind, placebo-controlled, restricted Bayesian response adaptive randomization clinical trial designed to determine the ketogenic formula specifications needed to safely induce ketonemia ( $\geq 1$  mmol/L blood  $\beta$ -hydroxybutyrate) within 24 hours in patients with established refractory status epilepticus (requiring general anesthesia to suppress ongoing status epilepticus), as an adjunct to standard medical care.

- Submitted in June 2019 for review.

### **There are plans to submit/resubmit 2 grants in the winter funding cycle:**

- **Chest Pain= Comparative Health Effectiveness of Strategies Testing Pain Assessment of Ischemia Noninvasively** : <https://siren.network/clinical-trials/chest-pain>
- **HAT-TRIC=Dose finding trial of Fibrinolytics for Acute Pulmonary Embolism:** HAT-TRIC will find the lowest effective dose of fibrinolytic that provides adequate treatment effect for acute submassive PE. With a PE, acute pulmonary hypertension causes dilation of the right ventricle (RV) relative to the left ventricle. We will use the ratio of RV/LV diameters at 24 hours as an endpoint to see if fibrinolytic is producing its intended biological effect. Normal RV/LV ratio is  $<0.9$ , but during an acute PE, RV/LV ratio may be 1.3 or higher. Patients will only be enrolled in HAT-TRIC if RV/LV ratio is elevated.

## GLOSSARY OF FREQUENTLY USED ABBREVIATIONS

CCC = Central Coordinating Center (i.e. University of Michigan)

EFIC= Exception from informed consent

CC = Community Consultation

PD = Public Disclosure

cIRB = Central IRB (in this case Advarra)