

## Newsletter October 2022

We're over half way there! Keep up the good work. We need to recruit 6 participants per week to ensure we reach our target of 60 by **30**<sup>th</sup> **November 2022** 

### 

#### **Randomisations**

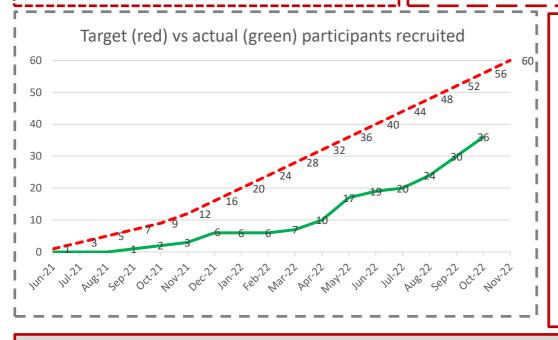
You have now randomised 36 participants. Thank you to all sites for your continued support and hard work.
Well done to the teams at Middlesborough and St George's on randomising their first participants this month. Thanks to the teams at Southampton and Edinburgh on randomising their 4th participants.

#### **Hull CARE pilot trial team**

Thanks to our 2<sup>nd</sup> top recruiting team!



Left to right: Emma Clarkson, Mr Mihai Danciut,
Anna Bjornson



# Screening and recruitment activity

- 36 participants randomised
- 20 sites have screened
- 3 sites still to start screening

Looking for guidance? <u>The CARE website</u> has been updated with more <u>"CARE Chats" videos</u>, which provide top tips for collaborators.

**Trial Coordinating Centre Contact Details:** 

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Website: www.ed.ac.uk/care-study ISRCTN41647111

National Institute for Health Research



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Site	Months open	Screened (n)	Recruited (n)
Royal Hallamshire Hospital, Sheffield	11	13	8
Hull Royal Infirmary	11	19	5
Royal Infirmary, Edinburgh	14	36	4
Wessex Neurological Centre, Southampton	10	18	4
King's College Hospital, London	7	37	3
Aberdeen Royal Infirmary	13	3	2
Bristol Royal Hospital for Children	11	2	2
University Hospital of Wales, Cardiff	11	4	2
Royal Preston Hospital	8	32	1
Alder Hey Children's Hospital, Liverpool	11	3	1
Bristol Southmead Hospital	10	2	1
NHNN (UCLH), London	12	30	1
Middlesborough	5	11	1
St George's Hospital, London	12	3	1
Birmingham Children's, Hospital	9	7	0
Great Ormond Street Hospital, London	11	6	0
Addenbrooke's Hospital, Cambridge	11	17	0
Salford, Manchester	7	2	0
Royal Manchester Children's Hospital	1	1	0
Stoke	1	0	0
Walton Centre, Liverpool	10	0	0
Charing Cross Hospital, London	7	0	0
Newcastle-upon-Tyne	6	0	0
TOTAL		246	36

TOP TIP!

#### **Avoiding crossovers**

We realise that some patients may have a preference for one or other intervention arm in CARE, yet at the same time are keen to support the study, so as to help other patients now and in the future. We're encouraging you to explore patient preferences. It can be difficult to gauge how strong a preference is. A helpful strategy is always to use the following question with every patient who has expressed a willingness to be randomly allocated within CARE, as a final check before proceeding to randomisation:



"Can I check that if you go forward with randomisation, you would be comfortable accepting allocation to either treatment with surgery or treatment without surgery?"

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