

Number of enrolments (TARGET 1184)

0 2 0 2

Participating Sites

- Ambulance Victoria
- The Alfred Hospital
- The Royal Melbourne Hospital
- Queensland Ambulance Service
- Royal Brisbane and Women's Hospital
- Gold Coast University Hospital
- South Australia Ambulance Service
- Royal Adelaide Hospital
- Flinders Medical Centre
- St John Ambulance NZ
- Auckland City Hospital
- Middlemore Hospital
- Wellington Free Ambulance
- Wellington Hospital

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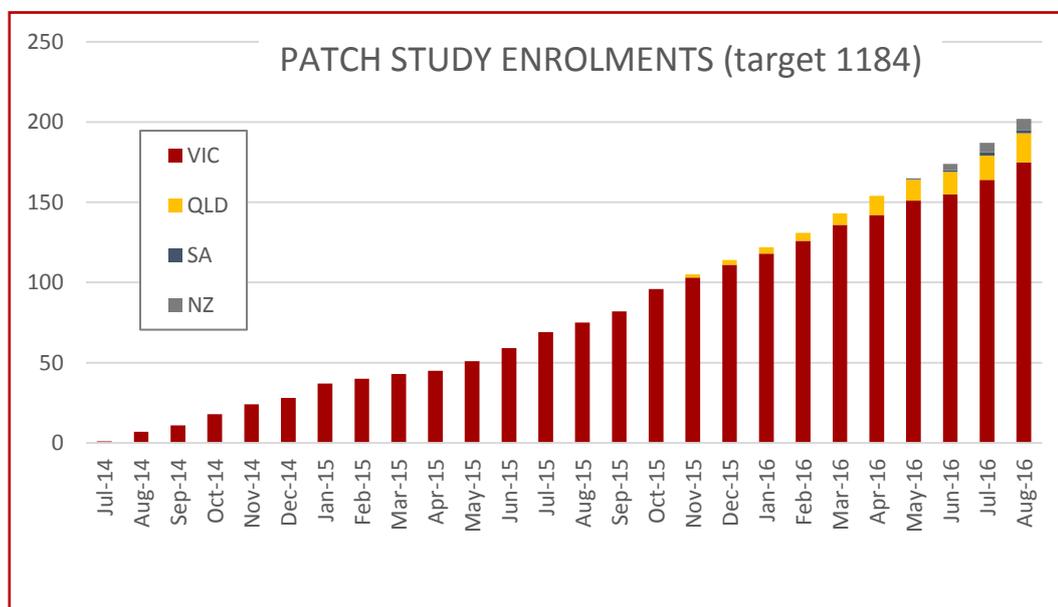
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200 ENROLMENTS!!!!

Welcome to the 2016 edition of the PATCH newsletter. We are delighted to announce that we have enrolled over 200 patients into the PATCH study! Thanks to all of our participating sites that have been part of the PATCH journey so far (14 sites and still more to come). Special mention to the team at HEMS 4 and Royal Melbourne Hospital for the 200th enrolment. We are currently enrolling approximately 13-15 patients per month and anticipate this number will increase significantly by 2017 as additional sites commence across Australia and New Zealand. See Figure below for cumulative monthly enrolments.



PATCH New Zealand

Congratulations to the NZ PATCH investigator team led by Colin McArthur (pictured) who were awarded HRC funding to support participation of NZ sites in the PATCH study. Sites across Auckland (St John Ambulance, Auckland City Hospital, Middlemore Hospital) and Wellington (Wellington Free Ambulance, Wellington Hospital) commenced the study in May 2016 with start-up funding provided by the NZ Lottery Grants Board. Congratulations to Andy Swain and the team at WFA and Wellington Hospital for the first enrolment in NZ!

HRC funding will enable participation of all major hospitals across NZ. We look forward to new sites commencing soon.





Pre-Hospital Anti-fibrinolytics for Traumatic Coagulopathy and Haemorrhage

South Australia commences PATCH study

Site activations across Australia have continued in 2016. In July we welcomed the participation of South Australia Ambulance Service, Royal Adelaide Hospital, and Flinders Medical Centre. We are grateful to Stefan Mazur and the MedSTAR team for kicking it all off in SA and thanks to Chris Clarke and the team at RAH for receiving the first patient enrolled in SA.

..... and there's more to come

Welcome to the QAS High Acuity Response Unit (HARU) for Gold Coast and the Gold Coast University Hospital who commenced the PATCH study this **Monday 5 September!** We look forward to working with all of you. Special thanks to Elizabeth Wake for all of her hard work to get us to the launch date. Further site activation plans are in process for New South Wales, Queensland, Tasmania and Northern Territory. Investigator meetings and training rollout for emergency medical services clinicians and hospital staff will be conducted prior to enrolling patients in these jurisdictions.

Want to get involved?

Trauma centres across Australia and New Zealand are invited to participate in this important study.

Expressions of interest are also invited from international sites interested in participating in the PATCH study.

Enquiries can be directed to the PATCH study investigators or the Project Manager.

Please refer to the front page of newsletter for contact details.



Substudy to investigate coagulation, fibrinolysis and inflammatory response

A substudy investigating the effects of TXA on coagulation, fibrinolysis and inflammation commenced in July 2016 (led by Professor Robert Medcalf, Head of Molecular Neurotrauma and Haemostasis Laboratory, Australian Centre for Blood Diseases, Monash University). This substudy provides a unique opportunity to determine the effectiveness of TXA to reduce fibrinolysis in severely injured adults and gain valuable information regarding how the fibrinolytic system is altered following severe trauma. The sub-study will explore non-

fibrinolytic effects of plasmin that may also provide valuable insights as to how plasmin modulates the inflammatory response following trauma. All patients enrolled in the PATCH study and received at The Alfred Hospital in Victoria will be included in the substudy.

Substudy to investigate TXA levels

The PATCH study uses the same TXA dosage as the CRASH-2 study. Both studies administer an intravenous bolus dose of 1g TXA followed by intravenous infusion of 1g TXA over 8 hours. However, in Australian cardiac and orthopaedic surgery, TXA is used at much higher doses. While the dose regime in CRASH-2 was shown to be effective, most patients did not have substantial bleeding, and half of the study population did not require a blood transfusion. It is possible that severely injured adults enrolled in the PATCH study might exsanguinate much of the TXA administered to them, or large volumes of resuscitation fluid might dilute the TXA to sub-therapeutic levels. The TXA levels substudy will investigate whether PATCH patients received an adequate dose of TXA and aims to improve our understanding of potential dose effects of TXA in patients at risk of acute traumatic coagulopathy. The substudy is being led by Professor Michael Reade with funding support from the Intensive Care Foundation. All sites are encouraged to participate in this important study. Please contact Veronica Pitt (veronica.pitt@monash.edu) for further information.