

Paramedics to be recruited in new 'fast response' stroke trial

26 May 2015, by Emma Rayner



Paramedics from seven ambulance services across the UK are to be recruited to help trial a new 'rapid response' treatment for stroke patients.

Researchers at The University of Nottingham have been awarded funding from the British Heart Foundation to carry out a clinical trial to use medicated [skin patches](#) to [lower blood pressure](#) quickly after a suspected [stroke](#), before the patient gets to hospital.

The study follows a large international trial called [ENOS \(Efficacy of Nitric Oxide in Stroke\)](#), led from Nottingham, which indicated that early [treatment](#) with skin patches containing [blood-pressure](#)-lowering glyceryl trinitrate (also known as nitroglycerine) had a beneficial effect on a patient's recovery, depending on the type of stroke suffered.

There are around 152,000 people who suffer a stroke every year in the UK according to the Stroke Association. Some treatment is only effective if given within a short period of time after the event and this early intervention can limit the severity of the symptoms and longer term effects of the stroke.

Leading the new RIGHT-2 (Rapid Intervention with Glyceryl trinitrate in Hypertensive stroke Trial-2) study, Professor Philip Bath, said: "This new trial is

a logical extension of our previous studies which suggested that the earlier a patient was given glyceryl trinitrate, the better their chances of a full recovery from stroke. We are very grateful for the cooperation of UK Ambulance Services, including the East Midlands Ambulance Service (EMAS) who are coordinating the ambulance part of the trial, whose paramedics will lead on identifying patients who are suspected of having a stroke. More than 30 hospitals, including Nottingham University Hospitals' Trust, will care for the patients once they arrive and help with follow up."

Intervention on the move

The trial aims to recruit 850 [patients](#) over the next three years and paramedics will administer the first dose of the treatment either in the patient's home or in the ambulance. Patients who agree to take part when they are first taken ill will be randomly selected to receive either a 5mg glyceryl trinitrate skin patch, repeated over three more days, or a blank skin patch, but they will not know which they are given.

Follow-ups will be carried out by telephone three months and one year after their stroke to determine the patient's recovery. In addition to lowering blood pressure, the patches may open up blood vessels in the brain to improve blood flow, and may help brain cells survive the stress of reduced blood flow.

Potential new protocols

Niro Siriwardena, Associate Medical Director of East Midlands Ambulance Service, said: "In the RIGHT-2 trial ambulance services are at the forefront of cutting edge research into treatment of stroke. Following a positive feasibility study at EMAS, this major trial will provide new evidence for paramedic treatment of stroke, with potential to change treatment protocols worldwide."

Jeremy Pearson, Associate Medical Director at the

British Heart Foundation (BHF), said: "The BHF funds research into stroke as well as heart disease because the main cause (blocking of small blood vessels in the brain or the heart with a clot) and the main risk factors are the same. Current treatment for stroke includes the use of clot-busting drugs, but unless used quickly their effect is limited. This new trial will use a simple treatment that can be applied rapidly by paramedics as soon as they reach the patient, with the hope that by intervening as quickly as possible patient outcomes can be improved."

Provided by University of Nottingham

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