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## **Graduated compression as an Adjunct to Pharmacoprophylaxis in Surgery**

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### **PATIENT INFORMATION SHEET AND INFORMED CONSENT DOCUMENT**

*You have been invited to take part in a research study called GAPS. Before you decide whether to accept, we would like to explain why the research is being done and what it will involve.*

*Please read this information carefully, and discuss it with others if you wish. Ask us if anything is unclear, or if you would like more information.*

- *Part 1 tells you the purpose of this study and what will happen to you if you take part.*
- *Part 2 gives you more detailed information about the conduct of the study.*

*Take time to decide whether or not you wish to take part.*

**Thank you for reading this information sheet.**

## **Part 1**

### **What is the purpose of the study?**

All patients attending hospital for surgery are at risk of developing blood clots in the legs (this is called a deep vein thrombosis or DVT). These blood clots can occur for a number of reasons, for example lying down in bed for long periods of time, changes occurring in the blood and any damage to the veins in which the blood travels.

Blood clots can lead to swelling of the leg or future problems with the skin of that leg, including a leg ulcer. Importantly, the blood clots can move and travel up to a patient's lungs (this is called a pulmonary embolism or PE) which can result in difficulties in oxygen entering the bloodstream from the lungs and can put strain on the heart. PEs can be very serious and can even cause death. DVTs and PEs can be known together as venous thromboembolism or VTE. From now on we will refer to these as VTE. About 6 out of 100 patients undergoing surgery will have a VTE within 3 months of the surgery.

Doctors have known about the risks of patients developing VTE after operations for many years and use two main ways to prevent this:

- Thinning the blood with regular injections, and
- Wearing elastic stockings to help stop blood sitting in the leg veins where it can clot.

Doctors are not sure if wearing elastic stockings on top of blood thinners reduces the risk of VTEs any more than if the blood thinners are given on their own. This study is being done to find out if this is true.

### **Why have I been chosen?**

You have been invited to consider this study because you are a patient about to have surgery in hospital and you have been identified as being medium or high risk of having a VTE. The doctors and nurses looking after you have calculated your risk of VTE (this is done for all patients coming into hospital). You would usually be offered

both blood thinning injections and elastic stockings during your time in hospital to reduce your risk of VTE. We hope that about 2236 people like you from across the UK will take part in this study.

### **Do I have to take part?**

No, participation in this study is entirely voluntary. If you do decide to take part you will be given this information sheet to keep. You will be asked to sign a consent form, but you are still free to withdraw at any time and without giving a reason. If you decide not to take part in the study, your doctor will be happy to talk through how he/she will treat you outside of the study. You do not have to give a reason for not taking part and your treatment and care will not be affected in any way.

### **What will happen to me if I take part?**

If you agree to enter the trial, you will be allocated by computer to either the 'elastic stockings plus blood thinner' group or the 'blood thinner alone' group. There is an equal chance of either treatment being the one you will receive. Neither your doctor nor you will choose which treatment you receive. In this way, a fair comparison between the two groups can be made.

If you choose to be involved in the research, your participation will last for 90 days after your surgery.

### Your first visit

If you decide to participate in the study, the following steps will be taken:

- You will first sign the consent form to confirm you would like to be included (you may keep a copy of this).
- Some information about your medical history and current medical condition will be collected to check that you are able to take part.
- If you are female and of childbearing age, a pregnancy test will be performed to confirm that you are not pregnant.
- A computer programme will randomly select whether you will receive either 'elastic stockings plus blood thinners' or 'blood thinners alone'.
- You will complete a questionnaire about your quality of life.

- You will be given a diary where you can record any symptoms, and a contact and reminder card.
- If you have been allocated to the group that will receive stockings, you will also be given a stocking diary to 'tick' when you have been wearing your stockings during your time in hospital.
- At this visit you will be also asked to complete a confidential questionnaire about your quality of life.

These assessments and questionnaires will take approximately 1 hour.

#### During your stay in hospital

During your time in hospital, you will be observed for the development of blood clots. You will also be monitored for your use of and any side effects of blood thinning medicines and stockings (if you have been selected to receive stockings). This would occur normally, whether you took part in the study or not. If you have been selected to receive stockings, we will also ask you to record when you have worn the stockings by ticking boxes in a stocking diary.

#### First follow-up

At the time that you leave hospital or at 1 week from your surgery (whichever is first), you will be assessed for blood clots, and for any side effects of blood thinning medicines and stockings (if you have been selected to receive stockings). At this time, you will be asked to complete the same quality of life questionnaire that you answered at the first visit. These assessments and questionnaires will take approximately 1 hour.

#### Second follow-up

Between 2 and 3 weeks after your surgery, you will be invited for an additional scan of the veins in your legs to detect any blood clots that may have developed. Your diary (given to you at your first visit) will be reviewed to see if you have had any symptoms, other scans or appointments or conversations with health professionals since you left hospital. You will be asked to complete a quality of life questionnaire. This visit will take approximately 1 hour.

### Third follow-up

At 90 days from your surgery, you will be assessed for blood clots, and for any side effects of blood thinning medicines and stockings (if you have been selected to receive stockings). At this time, you will be asked to complete the quality of life questionnaires for a final time. Your diary will be reviewed to see if you have had any symptoms, other scans or appointments or conversations with health professionals since your second follow-up. This third visit could be in person, by telephone or online, according to your preference.

There are no restrictions on your activity when you are taking part in this study. You will continue with any other medical care or treatments, such as taking regular medication, as you would normally do. There are no limitations on you seeking other medical advice, if you need to, whilst you are taking part in this study.

### **What is the intervention that is being tested?**

If you agree to take part in this study you will either receive 'elastic stockings plus blood thinners' or 'blood thinners alone'.

### **What are the alternative forms of treatment?**

At present, all patients who would be eligible for this study would usually be offered both elastic stockings and blood thinners as standard care. Alternative treatments include no elastic stockings or blood thinners, higher doses of blood thinners, blood thinners for a prolonged period of time, elastic stockings for a prolonged period of time, or pneumatic pumps applied to the legs which inflate at regular intervals. People are usually offered these different treatments for specific reasons determined by their doctor and, if they require these alternative treatments they would not be eligible to participate in this study.

### **What is the standard treatment?**

If you decide not to take part in the trial, in most hospitals you will usually be offered both elastic stockings and blood thinners. In some hospitals, the standard treatment is blood thinners alone. Patients receiving standard care would not routinely have a scan to detect any potential VTEs unless they showed symptoms.

## **Unwanted effects of treatment**

Whilst elastic stockings and blood thinners are given very frequently, all medical procedures carry risks of complications. Possible complications of both elastic stockings and blood thinners are listed below. These are only the complications which could occur; we are not expecting them all to happen to you.

### **Blood thinners:**

Blood thinners are offered routinely to all patients who would be eligible to participate in this study. The main risks of blood thinners:

- bleeding
- allergy
- rash
- low numbers of platelets in the blood (platelets help your blood to clot)

### **Elastic stockings:**

Side effects of elastic stockings are uncommon. Whilst we do not anticipate any specific side effects as a result of taking part in this trial, in rare circumstances, some patients may be allergic to the materials that are contained within the stockings. If this is the case, we will use another product which does not contain that material. Other complications are:

- some discomfort
- blistering, or in rare cases, skin ulcers may be caused in patients with fragile skin or artery disease
- restricting the blood supply to the leg

### **Pregnancy:**

The risk of blood clots is higher in pregnant women. Pregnant women must therefore not take part in this study and neither should women who plan to become pregnant during the study. Women of child bearing age will be asked to have a pregnancy test before taking part to exclude the possibility of pregnancy. Women who could become pregnant must use an effective contraceptive during the course of this study. Contraceptive methods that can achieve a failure rate of less than 1% per year when

used consistently and correctly are considered as highly effective birth control methods. Such methods include:

- combined (estrogen and progestogen containing) hormonal contraception associated with inhibition of ovulation:
  - o oral
  - o intravaginal
  - o transdermal
- progestogen-only hormonal contraception associated with inhibition of ovulation
  - o oral
  - o injectable
  - o implantable
- intrauterine device (IUD)
- intrauterine hormone-releasing system (IUS)
- bilateral tubal occlusion
- vasectomised partner
- sexual abstinence

Any woman who finds that she has become pregnant while taking part in the study should immediately tell her research doctor.

### **How is my condition monitored?**

Participating in this study will not significantly affect how your condition is monitored or any other treatment you receive for it. You will be monitored for the risk of blood clots and any side effects of blood thinners or elastic stockings (if applicable), as you would normally be during your stay in hospital. The scan at 2 to 3 weeks following your surgery is to detect any potential blood clots. Patients not entered into the study would not normally be offered this scan unless they had symptoms.

The condition for which you are having surgery would continue to be monitored and treated in the same way and will not be affected by your enrolment in this study.

### **What are the possible disadvantages and risks of taking part?**

The reason we are carrying out this study is to investigate if the current treatment is burdensome or unnecessary. There is a chance that by not receiving stockings the

risk of blood clots may be higher. However, this risk is unclear and is the reason why this study is being performed. Additionally, receiving the stockings has potential disadvantages, as described above that include inconvenience, discomfort, allergy, skin damage and ulcers. This study also looks at how the risk of not using stockings compares with the risk of using the stockings.

### **What are the possible benefits of taking part?**

We cannot promise the study will help you but the information gained from the study may help doctors and patients make future decisions as whether elastic stockings offer an additional benefit to patients who are receiving blood thinners and could potentially improve patients' quality of life.

Participants in both arms of the trial will be monitored closely for any complications of stockings and blood thinners, so that any complications can be detected and acted upon.

Patients will have an extra non-invasive leg scan between 2 and 3 weeks after their operation. This will detect any blood clots in the legs that the patient did not know they had, so treatment for the blood clot can be started. Patients not entered into the study would not normally be offered this scan unless they showed symptoms.

### **What if I do not want to take part?**

If you do not wish to take part in the study your doctor or nurse will offer you the standard treatment to prevent blood clots while in hospital. In most hospitals you will usually be offered both elastic stockings and blood thinners. In some hospitals, the standard treatment is blood thinners alone.

### **What happens when the research study stops?**

The information from this study will be used to decide if elastic stockings offer any additional benefit to patients who are receiving blood thinners. In addition, the research team will also use the information collected to compare the safety and cost of the two types of treatment. We hope that the result of the study will help patients and doctors to decide whether stockings should be used to prevent blood clots in patients coming to hospital for surgery.



**What if something goes wrong?**

A group of independent researchers (called the Data Monitoring Committee) will closely monitor the study. If there are any problems then they will be detected as soon as possible so that the study can be changed or stopped if necessary.

**Will my taking part be kept confidential?**

If you decide to participate, the information collected about you will be handled strictly in accordance with the consent that you have given and also the 1998 Data Protection Act. Please refer to Part 2 for further details.

**This completes Part 1 of the Information Sheet. If the Information in Part 1 has interested you and you are considering participation, please continue to read the additional information in Part 2 before making any decision.**

## **Part 2**

### **What if relevant new information becomes available?**

Sometimes during the course of a research project, new information becomes available about the treatment/drug that is being studied. If this happens, your research doctor will tell you about it and discuss with you whether you want to continue in the study. If you decide to withdraw your research doctor will make arrangements for your care to continue. If you decide to continue in the study you will be asked to sign an updated consent form.

### **What will happen if I don't want to carry on with the study?**

You can decide to leave the study at any time. You do not need to give a reason.

If you leave the study before your treatment then your doctor will discuss with you what type of treatment he will use outside the study.

If you decide to leave the study after the treatment, any data collected up until that time will remain on file and will be included in the final study analysis and follow up information will continue to be collected from your medical records.

If you decide to leave the study and do not wish for any further data to be collected about you, you should inform your clinical care team of this in order that no further follow up information is collected from your medical records.

In line with Good Clinical Practice guidelines, at the end of the study, your data will be securely archived. In this study, data will be archived for a minimum of 10 years after which arrangements for confidential destruction will be made.

### **What if something goes wrong?**

#### **Complaints:**

If you wish to complain, or have any concerns about any aspect of the way you have been approached or treated during the course of this study, the normal local complaints services are available to you. The normal National Health Service complaints mechanisms are also available to you. If you are still not satisfied with the response, you may contact the Imperial College London AHSC Joint Research Compliance Office (Room 221, Medical School Building, St Marys Campus, Norfolk

Place, London W2 1PG. Tel: 020 7594 9459).

### **Harm:**

Imperial College London holds insurance policies which apply to this study. If you experience serious and enduring harm or injury as a result of taking part in this study, you may be eligible to claim compensation without having to prove that Imperial College is at fault. This does not affect your legal rights to seek compensation.

If you are harmed due to someone's negligence, then you may have grounds for a legal action. Regardless of this, if you wish to complain, or have any concerns about any aspect of the way you have been treated during the course of this study then you should immediately inform the **Investigator (Tel: XXXXXXXXX)**. The normal National Health Service complaints mechanisms are also available to you. If you are still not satisfied with the response, you may contact the Imperial AHSC Joint Research Compliance Office.

### **Will my taking part in this study be kept confidential?**

All information which is collected about you during the course of the research will be kept strictly confidential. Any information about you which leaves the hospital will have your name and address removed so that you cannot be recognised from it.

With your permission, your data will be entered onto a secure database held at The Centre for Healthcare Randomised Trials (CHaRT), University of Aberdeen, in accordance with the 1998 Data Protection Act. Your relevant medical records may be inspected by authorised individuals from the research team, or Imperial College London (the study Sponsor). They may also be looked at by the relevant regulatory authorities to check that the study is being carried out correctly.

### **Involvement of the General Practitioner (GP) / Family Doctor:**

With your permission, your GP and other doctors involved in your clinical care will be kept informed of your participation in the study, but otherwise all information about you and your treatment will remain confidential.

### **What will happen if I lose mental capacity during the study period?**

This is expected to be a very rare occurrence. If this did occur we would like to continue to collect safety and follow up data about you from your medical records via your clinical care team and would like you to let us know on the consent form if you would be happy for this to occur.

### **What will happen to the results of the research study?**

When the study is complete, we plan to inform patients of the results of the study by letter, email, newsletter, social media or publication on the trial website. We may ask patients if there are any other methods they would prefer. The results will be presented at conferences and published in a medical journal. No individual participants will be identified.

### **Who has organised, reviewed and funded the research and who will be supervising it?**

This research has been supported by a National Institute for Health Research, Health Technology Assessment programme grant, which is funded by the National Institute for Health Research. The Sponsors of this study (Imperial College London) will pay your hospital to cover the costs of your participation in this study. You are able to claim the travel costs (e.g. bus / train / tube fare or parking costs and petrol) of your hospital visit for your scan at 2 to 3 weeks following your surgery. Please speak to the study nurse about how to make this claim.

The research is being co-ordinated by Imperial College London, in collaboration with The Centre for Healthcare Randomised Trials (CHaRT), University of Aberdeen, who have overall responsibility for coordination of the study. The research has been reviewed by the National Institute for Health Research, representatives from all of the participating hospitals and organisations, a representative from Thrombosis UK (a blood clot charity), and an independent National Research Ethics Committee, London City Road & Hampstead Research Ethics Committee

### **Contact Details**

If you have any further questions about your treatment, please discuss them with your doctor. You may also find it helpful to contact the research nurse on XXXXXX.

If you would like further information about clinical research, the UK Clinical Research Collaboration (a partnership of organisations working together on clinical research in the UK) have published a booklet entitled 'Understanding Clinical Trials'. Contact UKCRC: Tel: 0207 670 5452; website: [http://www.ukcrc.org/wp-content/uploads/2014/03/iCT\\_leaflet.pdf](http://www.ukcrc.org/wp-content/uploads/2014/03/iCT_leaflet.pdf)

**THANK YOU FOR READING THIS INFORMATION SHEET**



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Site ID:	Initials:
Participant Trial ID:	Principal Investigator Name:

**Graduated compression  
as an Adjunct to Pharmacoprophylaxis  
in Surgery**

**PATIENT CONSENT FORM**

*Please initial  
each box*

1. I confirm that I have read and understand the information sheet dated 04/02/2016 (Version 2.0) for the above study and have had the opportunity to ask questions which have been answered fully.
2. I understand that my participation is voluntary and that I am free to leave the study at any time without my medical care or legal rights being affected.
3. I understand that relevant sections of my medical records may be looked at by authorised individuals from the research team, from regulatory bodies, from the study Sponsor, or from the NHS Trust in order to check that the study is being carried out correctly. I give permission, provided that strict confidentiality is maintained, for these bodies to have access to my medical records for the above study.
4. I understand that even if I decide to leave the above trial, the data collected about me will be used in analysing the results of the study. I understand that my identity will remain anonymous.
5. I agree to allow any information or results relating to the safety and monitoring of this study to be used for healthcare and/or medical research purposes. I understand that my identity will remain anonymous.



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7. I agree to the imaging from my ultrasound being sent to an independent assessor for review. I understand that I will not be identifiable from the images. ☐
8. I understand that my personal data will be stored securely in facilities Imperial College London and The Centre for Healthcare Randomised Trials (CHaRT), University of Aberdeen, for a minimum of 10 years. ☐
9. I agree to my GP, or any other doctor treating me, being notified of my participation in this study. ☐
10. If during the study my clinical care team determine that I have lost capacity to provide informed consent, I will be withdrawn from the study and any identifiable data collected with consent would be retained and used in the study. ☐
11. I agree to be contacted in the future with regards to this study, should the study be extended. ☐
12. I agree to take part in the GAPS study. ☐

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Full Name of Participant

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Date

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Signature

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Name of Person Taking  
Consent

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Date

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Signature

(1 copy for participant; 1 copy for the patient's medical notes, 1 copy for the site file)

*This project is funded by the National Institute for Health Research HTA (project number 14/140/61)*