

# Pro PT

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## Summary of the main results of the ProMPT research study

**THANK YOU** for taking part in the ProMPT study. Without you the study would not have been possible. This leaflet contains a summary of the results of the ProMPT study.

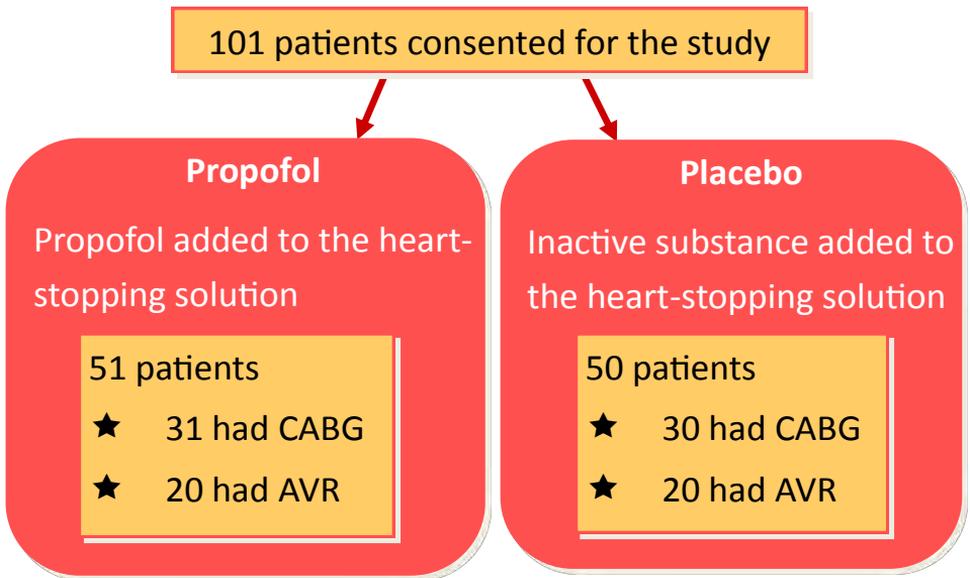
### Aims of the ProMPT study

During cardiac surgery a heart-stopping solution is injected into the heart which allows the surgeon to operate whilst the heart is still and free of blood. During the operation the heart can become short of oxygen and when blood is allowed to flow through again, this can cause damage.

Previous research suggested that the anaesthetic 'propofol' could protect the heart. In this study we wanted to assess whether adding propofol to the heart-stopping solution protected the heart during cardiac surgery.

## Design of the ProMPT study

- ★ 203 patients having either a Coronary Artery Bypass Graft (CABG) or an Aortic Valve Replacement (AVR) were considered for the study between February 2010 and October 2012.
- ★ 101 patients gave their consent to take part in the study. These patients had either propofol or a placebo added to their heart-stopping solution.



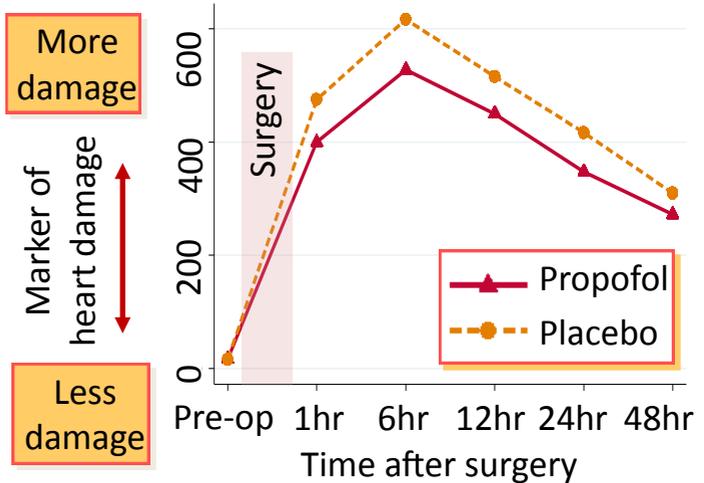
**At ALL times the surgeon could withdraw the patient from the study if he/she felt it was required**

The study measured a marker of heart damage in the blood in the 2 days following surgery. The study also measured, markers of stress on the heart and the kidneys, the length of stay in hospital and serious complications following surgery.

## ProMPT study results

Before the operation all patients had similar characteristics. This allows us to make a fair comparison of the effect of adding propofol on the heart and the whole body.

The marker of heart damage was lower in patients who received propofol than in patients who received placebo.



**This suggests there was less damage to the heart when propofol was added to the heart-stopping solution.**

We also found differences between the different operations (AVR and CABG) which we did not expect. AVR patients who received propofol experienced slightly more kidney damage and stayed in hospital on average 1 day longer than AVR patients who received placebo. This was not the case for patients having CABG surgery.

There were no other major differences between the patients who received propofol and those who received a placebo.

## Impact of the ProMPT study

- ★ The ProMPT study results suggest that addition of propofol to the heart-stopping solution does protect the heart from damage during cardiac surgery.
- ★ The protective effect of propofol may be different depending on the operation; it seems to be more beneficial for CABG surgery than for AVR surgery. It is not clear why this is the case.
- ★ The results are very useful and we are planning more research to make firm recommendations for future patients having cardiac surgery.

## For further information

- ★ Contact: **ProMPT Research Team**, Clinical Trials and Evaluation Unit, Level 7, Queen's Building, BRI, Bristol. BS2 8HW. (Email: [prompt-trial@bristol.ac.uk](mailto:prompt-trial@bristol.ac.uk); Tel: 0117 342 3564)
- ★ For **general advice on heart disease** and its treatment go to: British Heart Foundation ([www.bhf.org.uk](http://www.bhf.org.uk), Tel: 08450 708070).
- ★ For **general information on clinical research** go to: UK Clinical Research Collaboration (UKCRC) who produce a booklet called 'Understanding Clinical Trials' ([www.ukcrc.org/patients-and-public/public-awareness-of-clinical-research/information-resources-on-clinical-research/](http://www.ukcrc.org/patients-and-public/public-awareness-of-clinical-research/information-resources-on-clinical-research/), Tel: 020 7395 2271).
- ★ The study results have been published in: The Journal of Thoracic and Cardiovascular Surgery (JTCVS; 2015; 150; 1610-9).

## Thank you for your participation in the study

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