



A placebo controlled r**A**ndomised trial of
intravenous **L**idocaine in acce**L**Erating
Gastrointestinal **R**ecovery after c**O**lorectal surgery

PARTICIPANT INFORMATION SHEET

**The ALLEGRO trial: A placebo controlled
r**A**ndomised trial of intravenous **L**idocaine in
acce**L**Erating **G**astrointestinal **R**ecovery after
c**O**lorectal surgery**

INVITATION TO TAKE PART

You are being invited to take part in a research study. Before you decide whether or not to take part, it is important for you to understand why the research is being done and what it will involve.

Please take time to read the following information carefully. Talk to others about the study if you wish. Contact us if there is anything that is not clear, or if you would like more information. Take time to decide whether or not you wish to take part.

WHAT IS THE PURPOSE OF THE STUDY?

A common problem in about 40% of patients having bowel surgery is that their bowel takes longer than normal to start working again. In most patients the bowel will start working after surgery in 3-4 days, but in some it takes a week or more. We call this **delayed recovery of gut function**. This delayed recovery causes nausea, vomiting, complete constipation, tummy pain and tummy swelling (distension). As a result, patients cannot eat or drink until gut function returns, their recovery is slower and they have to stay longer in hospital. There is no immediate cure, and although it gets better on its own in most cases, it can take from 3-7 days to do so. During this time patients have to have a continuous intravenous drip and often insertion of a nasogastric tube to empty the stomach to reduce vomiting (most patients find this very unpleasant).

One of the common drugs used in hospitals is the local anaesthetic **Lidocaine**, used to “freeze” parts of the body, for example for minor skin operations or dental procedures. Recently lidocaine has been used intravenously (through the vein) as part of a general anaesthetic. It reduces pain and inflammation caused by surgery, and seems to help other aspects of recovery that may be important for return of gut function, for example reducing nausea and vomiting, and shortening the time from surgery to first bowel movement. However, previous studies were small and the true benefit of Intravenous (IV) lidocaine is uncertain. We hope to find out if giving IV Lidocaine improves recovery of gut function after colorectal surgery for NHS patients.

WHY HAVE I BEEN INVITED TO TAKE PART?

You have been asked to take part as you are due to have an operation to remove part of your large bowel (bowel resection).

DO I HAVE TO TAKE PART?

No, it is entirely up to you to decide whether to take part. If you do decide to take part you will be given this information sheet to keep. Use the information in this leaflet to help you decide and discuss with family members, friends, your doctors and research staff.

If you decide to take part we will ask you to sign a consent form confirming your agreement. You are free to change your mind and withdraw at any time and without giving a reason. Deciding not to take part or withdrawing from the study will not affect the healthcare that you receive, or your legal rights.

Before participating you should consider if this will affect any insurance (for example health or travel insurance) you have and seek advice if necessary.

Please let the researcher know if you are currently or have been previously involved in any another research project(s).

WHAT WILL HAPPEN IF I TAKE PART?

Sometimes we don't know which way of treating patients is best. In this clinical trial we aim to find out whether giving IV Lidocaine can help improve the recovery of gut function after bowel surgery.

If you decide to take part in the study we will establish that you are eligible to take part, by asking you questions and checking your medical notes. We will then ask you to sign the trial consent form for ALLEGRO. If you are a female who could potentially be pregnant then a pregnancy test will be done.

After you have signed the consent form you will be randomly assigned (by a computer) to receive an infusion of either IV Lidocaine or placebo (saline) during and immediately after surgery. You will receive the drug or placebo (you won't know which) for between 6 and 12 hours through a drip. We then measure the time to gut recovery in each group to see if IV Lidocaine has any effect.

Regardless of which group you are in there will be no other differences to the bowel surgery or hospital care you receive, and you will always be able to get extra painkillers or other drugs if you need them. In order that the results are completely unbiased, neither you nor any of the team caring for you will know which treatment you have received (what we call a 'blinded' study). Patients in both groups will be asked to complete the same questionnaires and will receive the same follow-up.

We will also ask you to complete short questionnaires at the start, during (daily) and at the end of your hospital stay. We will contact you by telephone at home after you have been discharged from hospital at 7, 30 and 90 days after the operation. We will also ask for your permission to check on your progress for up to 10 years using routine NHS data records. We will seek your consent for this follow-up now but will not need to contact you to obtain this information.

The study visits are explained in more detail below:

Screening and baseline:

Information such as your age, gender, ethnic origin, medical history and what medicines you are currently taking will be collected. We will ask you to complete some short questionnaires. This data will be collected at the preoperative assessment clinic, which is part of normal care.

At the operation:

Half of the study participants in the study will get IV Lidocaine and half will get a dummy infusion (placebo) this will be decided at random.

The IV Lidocaine or placebo will be given during your operation and continued for 6 or 12 hours, depending on which hospital you have your operation in. All other care, including treatment for pain, nausea etc will be according to normal practice in your hospital.

While you are in hospital:

During your recovery, we will collect data on pain, nausea, ability to eat and drink, bowel function and other aspects of recovery. We will ask you to complete some short questionnaires about how you are feeling. You will remain in the hospital to recover for the standard amount of time for patients who have had your type of operation.

Day 7, 30 and 90 Telephone Calls:

If you have been discharged from hospital, a member of the research team will contact you by telephone 7 days, 30 days and 90 days after your operation. We will ask some short questions about your recovery, health and how well your pain has been controlled. The telephone call on day 90 will be the final contact the research team will make with you.

Medical Record Follow-up

For up to 10 years after your operation, we would like to check how you are. To do this we will use routine NHS data records. With your permission we will contact NHS national registries (Information Statistics Division (Scotland) and NHS Digital (England)) and provide them with your

details. From this we will get data back that will inform us about your long term recovery. These NHS databases are highly confidential and all data is treated with the highest possible level of security. We will not need to make contact with you to obtain this information.

WHAT WILL HAPPEN NEXT? IS THERE ANYTHING I NEED TO DO OR AVOID?

If you are happy to take part in the ALLEGRO study you will be asked a series of questions to make sure that your particular circumstances make you suitable for inclusion in the study. If you are suitable you will sign a consent form and complete the first questionnaire.

We will capture demographic data (e.g. name, address, DOB) and CHI numbers (unique patient identifiable number, Scotland only) and patient hospital numbers (England) and this information will be passed to the University of Edinburgh and/or Aberdeen Trials Unit for administrative purposes.

You will then be randomly be assigned to receive the IV Lidocaine or the placebo. You will be asked to complete study questionnaires on appropriate days with the help of the research nurse throughout the study.

If you take part in the study, you would come into hospital as normal for your bowel surgery. You should follow the advice given to patients having bowel surgery – you do not need to do, or avoid, anything else.

Please make the research team aware if you are approached to take part in any other research projects.

WHAT ARE THE POSSIBLE BENEFITS OF TAKING PART?

We hope that IV Lidocaine may help to prevent gut problems after surgery, leading to faster recovery and discharge from hospital. However, there may be no medical benefit to you from participation in this study. This study will help to determine whether IV Lidocaine can help gut recovery in patients having bowel surgery. The information we get from this study may help us to improve treatment of future patients requiring bowel surgery.

WHAT ARE THE POSSIBLE DISADVANTAGES OF TAKING PART?

It is not thought that there are many disadvantages of taking part in this research study.

You are undergoing scheduled bowel surgery. Any bowel surgery has possible risks and discomforts. Your doctor will explain these risks to you. Participation in the ALLEGRO study will not change these risks.

We do not anticipate that IV Lidocaine will have any adverse effects in your overall recovery.

When taking any medicine there is always a very small risk of side-effects or allergies. Local anaesthetics such as Lidocaine have been used every day in NHS hospitals and dentist practices for decades. Adverse reactions to Lidocaine are rare but may include:

- Allergic reaction (including rash, swelling and blistering)
- Dizziness, light-headedness, confusion, drowsiness
- Numbness of the mouth and/or tongue
- Blurred or double vision
- Breathlessness
- Hearing disorders (e.g. ringing in the ear)
- Nausea and vomiting

The signs and symptoms of toxicity (overdose) are well known and treatable. If toxicity occurs during the infusion, you will be in the operating room or recovery room and under very close monitoring as part of normal care. There are no known late side-effects of lidocaine.

WHAT IF THERE ARE ANY PROBLEMS?

If you have a concern about any aspect of this study please contact the local study team who will be pleased to answer your questions. Contact details for the local study team are given at the end of this leaflet.

In the unlikely event that something goes wrong and you are harmed during the research due to negligence of someone, then you may have grounds for a legal action for compensation but you may have to pay your legal costs. The normal National Health Service complaints mechanisms will still be available to you.

WHAT WILL HAPPEN IF I DON'T WANT TO CARRY ON WITH THE STUDY?

Participation in the study is voluntary. As such, you are free to withdraw at any point without the need to give a reason. This will not have any effect on the care you receive before, during or after your operation. We will use the data that we collect until the point you leave the trial unless you request otherwise.

If you wish to withdraw from completing questionnaires in the study, we would ask that we can still access your clinical notes to collect data on your long-term recovery at 90 days, 1 year and 3 years following your operation using NHS national data.

If for some reason you are unable to provide continued consent to participate in the trial, or you become confused and not able to make decisions for yourself, then we will continue to collect data from your medical notes and may contact your GP to follow your recovery.

WHAT HAPPENS WHEN THE STUDY IS FINISHED?

The last contact from the study team will be at 90 days following your operation. Following this, we will access your medical records for up to 10 years post-surgery to monitor your progress.

We will analyse the information gathered to see whether IV Lidocaine provides any benefits over the placebo.

WILL MY TAKING PART BE KEPT CONFIDENTIAL?

All the information we collect during the course of the research will be kept confidential and there are strict laws which safeguard your privacy at every stage. Study researchers will ask your permission to access your medical records to carry out this research project. Your personal information will be protected at all times and stored securely according to the Data Protection Act and local guidelines on data protection in research studies.

Study data will be stored on secure computer servers held at the University of Aberdeen – personal data (such as your name, address, telephone number and date of birth) is encrypted, and access to all study data is password protected. Only certain members of the research team will have access to your information. A paper copy of your signed consent form (which will contain your name and signature) will also be held at the University of Aberdeen.

Study researchers will need access to your medical records to carry out this research. To ensure that the study is being run correctly, we will ask your consent for responsible representatives from the Sponsor (University of Edinburgh and NHS Lothian) to access your medical records and data collected during the study, where it is relevant to you taking part in this research. There may also be occasion where the regulatory authority requires access to your medical notes.

The statistical analysis of the study is being conducted at the University of Aberdeen, and to maintain confidentiality, the statistical team will only analyse completely anonymous data. (Anonymous data does not include names or addresses, and it is not possible to identify

individual participants from anonymous data). Any reports or publications arising from the study will contain totally anonymous data so that you cannot be recognised from it.

There is often a requirement for the research team to share the data generated from a trial. This may be with the funder of a trial, collaborators and/or as part of the publication process. In all cases, any data shared would be anonymised (you would not be identifiable from the data) and we will only do so with your consent.

In the future, the results of this study may be used for further analysis, which at this time cannot be anticipated. An example of this would be a meta-analysis, which is when the results of several similar studies are combined together. Study data would be anonymised for this type of analysis. This means that your name, address, date of birth and any other information that might identify you would be removed before analysis. Analysis may be done by the ALLEGRO research team or by other researchers from the UK or elsewhere.

With your consent, we will inform your GP that you are taking part.

All records of your participation in the study will be handled, stored and destroyed in compliance with the Data Protection Act of 1998.

WHAT WILL HAPPEN TO THE RESULTS OF THE STUDY?

When the study is finished, the results will be analysed and published in a medical journal and an online clinical trials database. The data published are anonymised so that no individual can be identified. We will send you a summary of the study results unless you tell us you do not wish to receive it.

WHO IS ORGANISING AND FUNDING THE RESEARCH?

This study has been designed and organised by the Colorectal Research Team and sponsored by the University of Edinburgh and NHS Lothian.

The study is being funded by the National Institute for Health Research (NIHR) Health Technology Assessment programme (HTA), the research branch of the UK NHS.

WHO HAS REVIEWED THE STUDY?

Patients and the public have been involved in the development of this study through collaboration between bowel surgeons and patients within the Association of Coloproctology of Great Britain and Ireland (ACPGBI) and the Bowel Disease Research Foundation (BDRF).

All research in the NHS is looked at by an independent group of people called a Research Ethics Committee. A favourable ethical opinion has been obtained from West of Scotland Research Ethics Service. NHS management approval has also been given by the hospitals taking part in the study.

RESEARCHER CONTACT DETAILS

If you have any further questions about the study please contact:

Local PI:
Local Study Nurse/Fellow:

Independent Contact Details

If you would like to discuss this study with someone independent of the study please contact

<insert contact details>

Complaints

If you wish to make a complaint about the study please contact:

< Insert local NHS complaints details >

THANK YOU

Thank you for taking the time to read this information leaflet. We hope that it has been helpful in enabling you to decide if you would like to participate in the ALLEGRO study. Please ask us if you have questions or would like more information about the study.