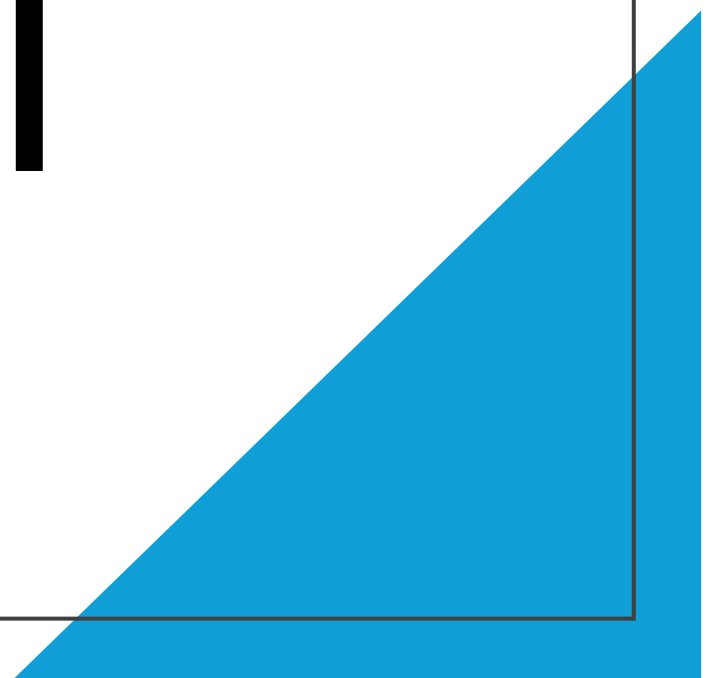


MIND SMART

The Role of the Research Nurse & the patient
experience





MND SMART

Motor Neurone Disease Systematic Multi-arm Adaptive Randomised Trial

Sponsor ACCORD (University of Edinburgh & NHS Lothian)

Previous arms Memantine & Trazodone

Currently looking at Amantadine Vs Placebo

Plan to add in Tacrolimus arm (likely Jan 2025)

875 participants recruited nationally



The Role of the Research Nurse in MND- SMART

Patient Identification & Pre-screening

Close working relationship with Neurologists and MND coordinator

Database of patients interested in clinical trials

Review of patients notes

Pre-screening telephone call

Booking screening visit



The Role of the Research Nurse in MND- SMART

Coordination of the study & study visits

Main point of contact for patients, investigators, study sponsor, pharmacy, research labs

Visit Prep

Performing assessments on the study e.g. ECAS, ALS FRS, bloods, ECG, vital signs etc.

Follow up visits

Monitoring medication titration, adverse events and reactions and any changes for the patient



The Role of the Research Nurse in MND- SMART

Data collection and query
resolution

Maintenance of site files

The Patient Experience of MND SMART

Possibly discuss research at their clinic visit

Initial phone call to assess interest

Sent PIS and given time to read/digest

Follow up pre-screen phone call/chance to ask questions

The Patient Experience of MND SMART

Attend the CRF for a screening visit (bloods, ECG, Neuro Exam, C-SSRS)

Re-attend the CRF within 4 weeks for Baseline visit (FVC, ECAS, ALS-FRS, King's Staging, randomisation)

Week 1, 2, 3 follow up phone calls, titration of study medication

Two Monthly phone calls checking AE's, Medication changes & ALS-FRS

Clinic visits at Month 6, 12, 18 (FVC, ECAS, ALS-FRS, King's Staging)



The Patient Experience of MND SMART

Study medication is all liquid

Couriered to patients' home

Visits can be done remotely if accessing site becomes impractical