###   *(Form to be printed on local headed paper)*

# **General Practitioner Letter**

**(Final version v1.0: Date 17 May 2022)**

**REC ref: [TBC] CTA ref : [TBC]**

**INFORMATION FOR THE GENERAL PRACTITIONER Date [Insert date]**

Dear Colleague,

Your patient , born

and living at

has agreed to participate in a randomised controlled trial calledMAnnitol for Cerebral oEdema after IntraCerebral Haemorrhage (MACE-ICH).

This is a prospective, randomised, multi-centre, open-label trial to assess the feasibility of administering mannitol in those at risk of, or with cerebral oedema, in acute intracerebral haemorrhage.

Mannitol is an osmotic diuretic that can be administered intravenously and used in traumatic head injury and hepatic encephalopathy to reduce cerebral oedema. Patients will be randomised 1:1:1 to one of three groups: 1 g/kg 10% single dose mannitol infusion at 10ml/min; 1 g/kg 10% mannitol at 10ml/min followed by a second dose 1 g/kg repeated at 24 hours; or standard care alone.

The primary outcome of this trial focuses on determining the feasibility for researchers and clinicians to identify acute intracerebral haemorrhage patients presenting along different pathways in the UK, with or at risk of cerebral oedema, to recruit, administer mannitol and complete follow-up assessments. The treatment consists of a 1g/kg of 10% intravenous Mannitol solution infused at 10ml/min according to your patient’s body weight, started within 72 hours of stroke onset. As part of this study your patient will have undergone an additional CT brain scan in an attempt to assess the effect of treatment on cerebral oedema, and they will be under active follow up from the research team for 180 days.

Prior to performing a 180-day follow up, we will contact your surgery to confirm the patient is not deceased.

If problems have arisen in connection with this study or if you have any further questions please do not hesitate to contact me on:

(Add Local Clinician details).

Yours faithfully

[Insert local clinician details]

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