



Pharyngeal Electrical stimulation for Acute Stroke dysphagia Trial

PhEAST

Recruitment Update

- Poole & Bournemouth - University Hospitals Dorset - 3 Participants
- Nottingham - Queen's Medical Centre - 2 Participant
- Bath- Royal United Hospitals Bath - 1 Participant
- Sunderland - South Tyneside and Sunderland NHS Foundation Trust - 1 Participant

Recent Green Lights



Recruitment Updates: 1

Bury - Fairfield General Hospital

Trial Contact Details



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Amendments:

Approved amendments:

MA/01/22 - **Approved 16/02/2022**

MA/02/22 - **Approved 22/02/2022**

MA/03/22 - **Approved 11/03/2022**

SA/01/22 - **Approved 17/03/2022**

MA/04/22 - **Approved 17/03/2022**

SA/02/22 - **Approved 28/07/2022**

Common FAQs:

If a patient has already participated in the PhEAST trial, could they participate again if they had a recurrent stroke?

No - participants can only be enrolled into the PhEAST trial once.

Do SLTs who are only completing blinded bedside swallow assessments need to complete GCP training?

No - we have had confirmation from our sponsor that as they are only completing their clinical role they do not need to have GCP training. They should not complete any other trial tasks, and should be on the delegation log as a blinded assessor.

Who can deliver the PES treatment?

Anyone who has had the Phagenesis face to face training. This could be an SLT, research nurse or research coordinator.

Who can insert the Phagenyx catheters?

Anyone who is competent and trained in inserting standard NG Tubes. They do not need to be on the delegation log or attend the face to face training, although it would be helpful if a member of staff who had attended the face to face training is present at time of insertion.

How do we confirm catheter placement?

Please follow your local policies and procedures with regards to confirming NG placements (aspirate, X-Ray).

Can we treat two participants at the same time?

Yes, the catheters have special codes which when linked to the base station recognise which participant you are treating. Please follow your local policies and procedures with regards to cleaning the base station between participants.

How soon after consent should we randomise, and how soon after randomisation should we treat (if randomised to PES)?

Please randomise and treat (if randomised to PES) as soon as possible after the consent process. If a long gap is left between, then participants may return to oral food and drink, or deteriorate, and treatment will not happen.

Best practice tip:

When consenting a participant, please ensure you inform them that if they are randomised to receive PES, that they will need their standard NG tube replacing with a Phagenyx catheter, and that this will need replacing again with a standard NG tube at day 13 (if they are still requiring feeding).