

Research in privately funded satellite HD units

Paul Cockwell

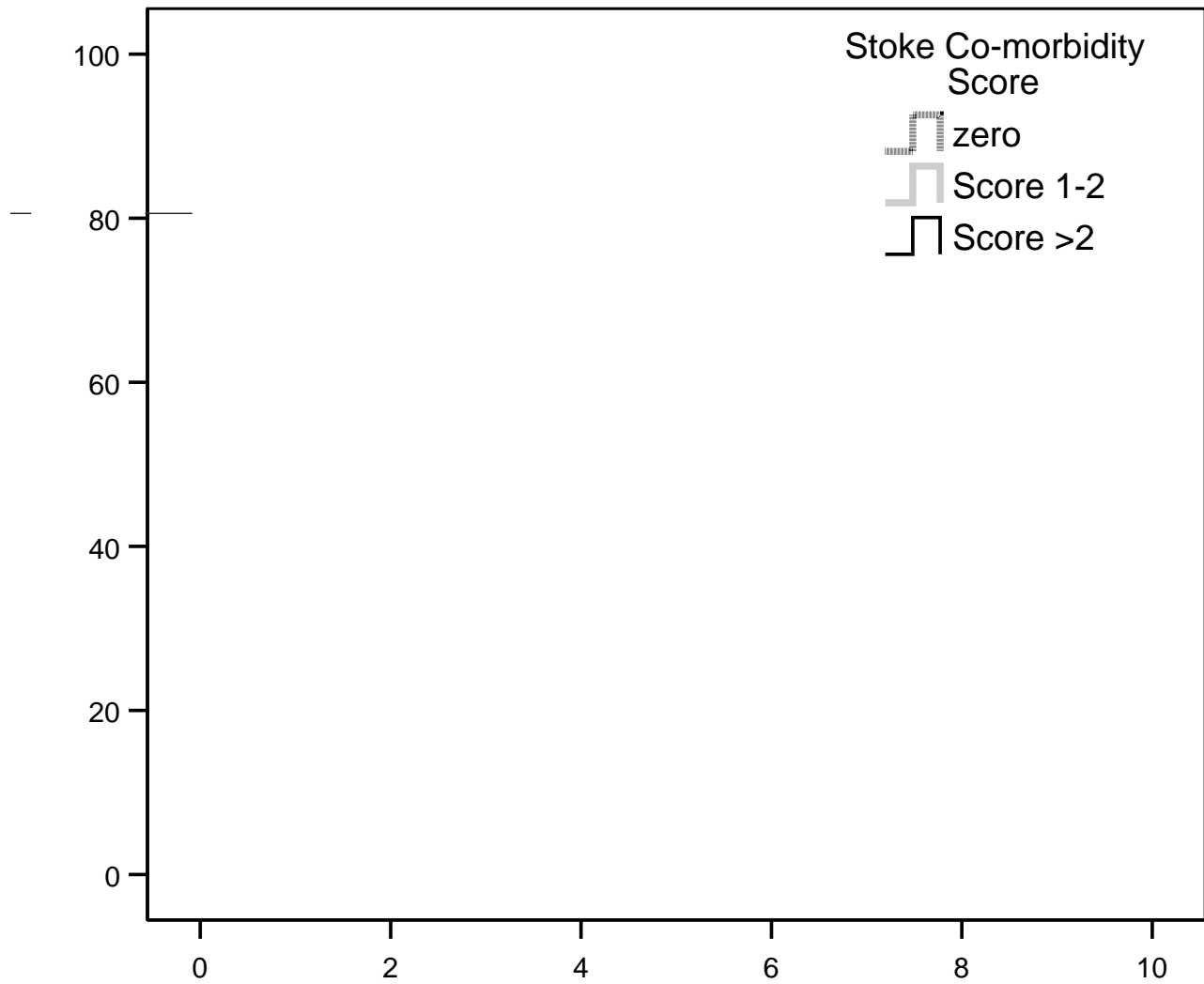
Consultant Nephrologist

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Conflicts of interest

- Chief investigator on EuLITE (part funded by Gambro)
- Working up a chronic dialysis study with a protein permeable dialyser
- CLRN Executive Board member

Survival in ESRD – A prospective study – 884 patients – Four UK Renal Units



Evolving research environment

- Funding infrastructure; directives
- New collaborations
- Dialysis specific initiatives

Many patients receiving HD in the UK
are receiving their treatment in
privately run dialysis units through
contracts with NHS purchasers

CRN view 'where NHS patients receive treatment in private centres through a contract with the NHS'

- CLRN resources (such as the service support costs or CLRN nurses) can be deployed to support the research
- funding would be requested from the CLRN at an appropriate NHS rate by the relevant Trust, who would then pass it on to the centre.
- Analagous to research undertaken in an NHS department, where the Trust requests the support and passes it to that department

However some clinical studies may represent a clear conflict of interest for private dialysis providers

Relevant studies may include

- Bioclinical risk stratification
- Drugs
- Devices

J Am Soc Nephrol 16: 2421–2430, 2005. doi: 10.1681/ASN.2005010070

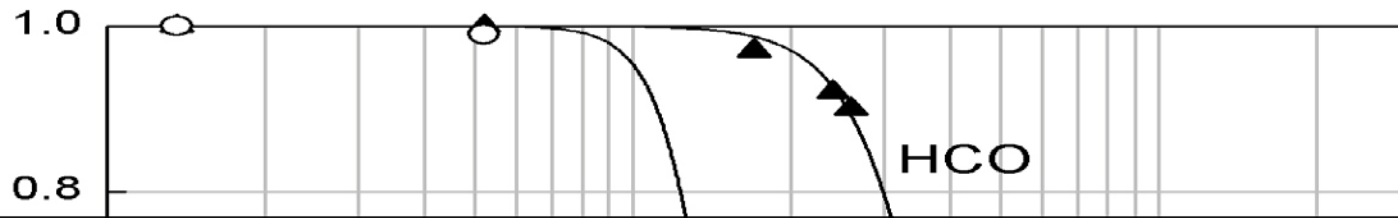
Disease of the Month

Protein-Leaking Membranes for Hemodialysis: A New Class of Membranes in Search of an Application?

Richard A. Ward

Department of Medicine, University of Louisville, Louisville, Kentucky

HCO dialysers - increased permeability for mid-molecules



Convective permeability

Study protocol

Open Access

European trial of free light chain removal by extended haemodialysis in cast nephropathy (EuLITE): A randomised control trial

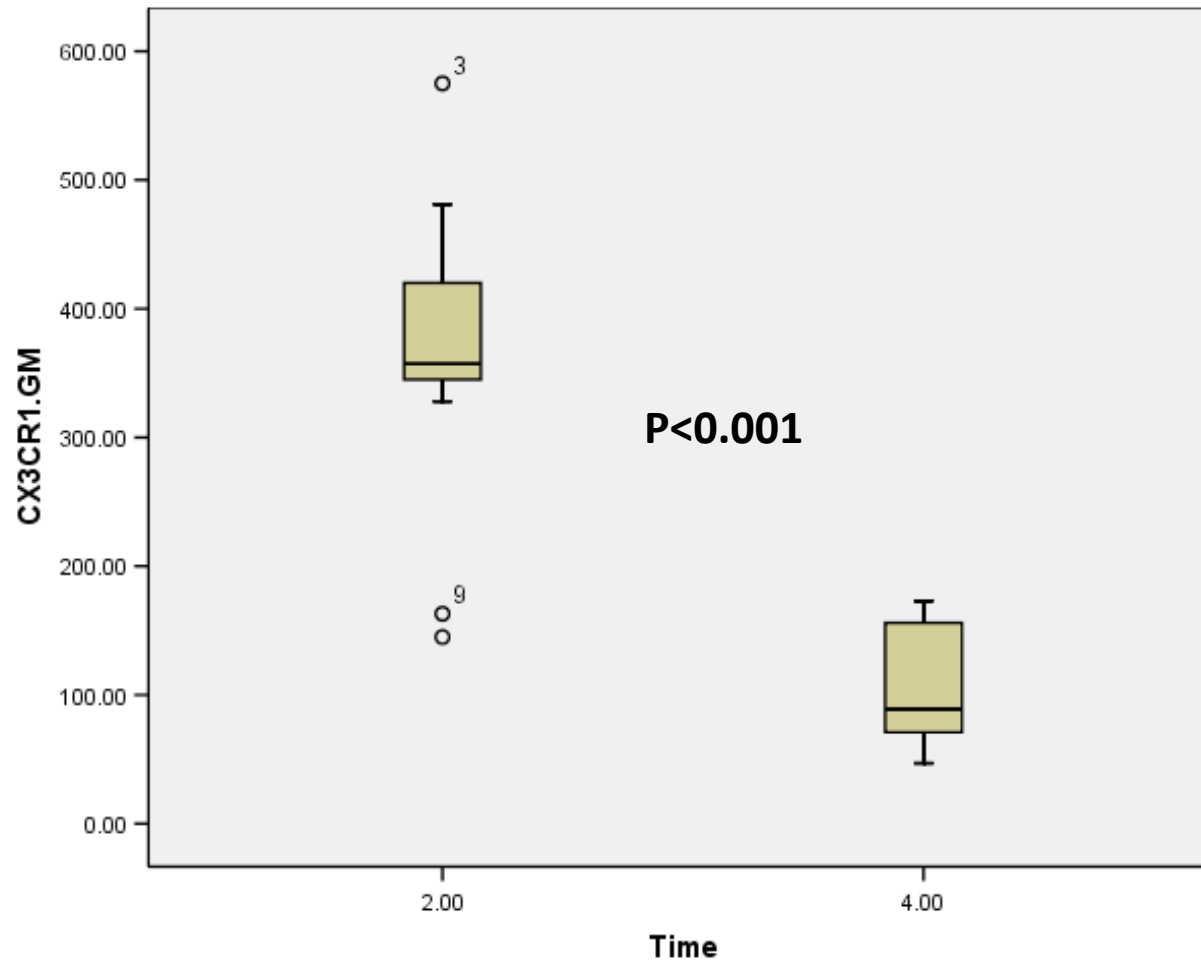
Colin A Hutchison*^{1,2}, Mark Cook³, Nils Heyne⁴, Katja Weisel⁵,
Lucinda Billingham⁶, Arthur Bradwell⁷ and Paul Cockwell^{1,2}

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This article is available from: <http://www.trialsjournal.com/content/9/1/55>

Cross over study in chronic haemodialysis CX3CR1 before and after two weeks HCO-HH



Clinical study design – optimal for outcomes in HD

- ‘Pick a winner’ methodology
- 40 week RCT – 120 patients - surrogate outcomes
- Then continue with original cohort and further recruitment powered for mortality

Key Considerations

- Should the renal community work to ensure equivalence of access to clinical trials for all NHS dialysis patients?
- Such access may be essential if we are to maximise effective clinical research
- The framework to establish equity of access will need careful dialogue with private partners