



Desmopressin for patients with spontaneous intracerebral haemorrhage taking antiplatelet drugs (DASH): a UK-based, phase 2, randomised, placebo-controlled, multicentre feasibility trial

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Aims and objectives

To assess whether it is feasible to run a large trial to see if desmopressin can reduce the number of people who die or are disabled after intracerebral haemorrhage.

Background

Intracerebral haemorrhage is caused by bleeding in the brain. Patients who are taking blood-thinning drugs (antiplatelet drugs, such as aspirin) are more likely to die or be disabled if they have intracerebral haemorrhage. Desmopressin is a drug which may reverse the effects of antiplatelet drugs and stop bleeding in the brain.

Methods

Participants with intracerebral haemorrhage while taking antiplatelet drugs (or their relatives or medical professional if patients were too unwell) were asked if they wished to take part in the trial. Treatment with either desmopressin or a dummy drug was given through a drip. Researchers contacted participants 3-months after the stroke to assess their condition.

Key findings

54 participants were recruited across 10 UK hospitals between April 2019 and March 2022 All participants received the trial treatment, there were no concerns regarding the safety of desmopressin. The common reasons why eligible patients were not enrolled was that they came to hospital overnight (when the research team were not present) or when a research doctor was unavailable.

Most eligible patients (or relatives) approached agreed to take part and follow-up was completed by everyone at 3 months, indicating the processes for consent and followup worked well.

Patient and public involvement

PPI representatives informed decisions made regarding the consent process, recruitment period, trial extensions, and an animated results video.

Conclusions and future plans

Whether desmopressin reduces the number of people who die or are disabled after intracerebral haemorrhage is an important question to answer in a larger trial. The DASH trial highlighted what worked well and what could be improved in the delivery of a larger trial.

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