

<u>D</u>ecr<u>e</u>asing <u>P</u>ost<u>o</u>perative Blood Los<u>s</u> by Topical vs. <u>I</u>ntravenous <u>T</u>ranexamic Acid <u>i</u>n <u>O</u>pe<u>n</u> Cardiac Surgery

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Design

- Investigator-initiated, multi-centre, double-dummy, randomized controlled trial
- 3500 on-pump cardiac surgery patients
- Participants followed in-hospital until discharge or 10 days (whichever occurs first)







Interventions

Topical Tranexamic Acid (TxA) IV placebo + topical TxA during surgery:

- Topical TxA: 5 to 10 g TxA (50 to 100 mL) poured into the pericardial and mediastinal cavities after protamine administration
- Intravenous Placebo: 10 to 100 mL of saline in place of TxA administered intravenously as per standard care at the beginning and during surgery

Intravenous Tranexamic Acid (TxA) IV TxA + topical placebo at the beginning and during surgery:

- Intravenous TxA: 1 to 10 g TxA (10 to 100 mL) administered intravenously as per standard care. The dose typically varies from 3 to 6 g TxA per patient
- Topical Placebo: 50 to 100 mL of saline poured into the pericardial and mediastinal cavities after protamine administration





Eligibility

Inclusion Criteria

 ≥ 18 years of age undergoing a cardiac surgical procedure (i.e. isolated CABG, isolated single cardiac valve surgery or a combination of both or isolated ascending aorta replacement) with the use of cardiopulmonary bypass (CPB) and median sternotomy

Exclusion Criteria

- Allergy to tranexamic acid
- Undergoing minimally invasive surgery
- Fulfill any of the following transfusion risk factors (A-D):
 - A. Emergency surgery
 - B. History of bleeding disorder
 - C. Inherited thromboembolic or hemorrhagic disease
 - D. Infective endocarditis (active)
- History of previous cardiac surgery
- Severe renal impairment (serum creatinine >250 µmol/L)
- Pre-operative hemoglobin <120 g/L
- Expected circulatory arrest





Outcomes

Primary Outcome:

The composite of patients receiving in-hospital red blood cell transfusion or experiencing a seizure

Secondary Outcome:

The individual components of the primary outcome

Tertiary Outcomes:

- Blood product transfusions (as a composite and individually)
- Re-operation for bleeding or tamponade
- Duration of ICU stay
- MACE (composite of death, non-fatal MI and non-fatal stroke)



