

Welcome to the May 16, 2024 Society of Clinical Research Associates (SOCRA) Baltimore Chapter Meeting



<https://www.socra.org/chapters/list-of-chapters/view/Baltimore>

<https://www.linkedin.com/showcase/baltimore-socra-chapter/>

SOCRABaltimore@gmail.com

Etiquette and Reminders

- Audio off, Video on (if you can)
- Hold questions to the Q&A (chat or unmute if prompted)
- Continuing Education (CE) credit and slides:
 - Available only to SOCRA members upon survey completion (download from “end of survey” page)
 - Survey link posted in chat at end of meeting
 - Slides/CE will not be emailed or automatically given!



SOCRA Baltimore Chapter Committee

Media Coordinator

Sarah L. Wicks, MPH, J.D.



Development Coordinator

Michelle Medeiros, MS, MA, CCRP



Administrator

Ezzat Mostafa, CCRP



Chair

Casey Jackson, MS, CCRP



Co-Chair

Scott Wehage, MS, CCRP



About

Mission

In order to promote quality clinical research, to protect the welfare of research participants, and improve global health, SOCRA's mission is:

- To establish educational programming and provide continuing education for clinical research professionals
- To establish an internationally recognized certification program for clinical research professionals (CCRP®)
- To foster the professional development and peer recognition of clinical research professionals



Offerings

- Professional certification (CCRP)

<https://www.socra.org/certification/program-overview>

- No-cost CITI program access
- SOCRA Source journal
- 17 different types of live, in-person conferences
- Multiple ongoing live, virtual webinars
- Numerous online courses on a variety of topics

<https://www.socra.org/conferences-and-education/>

Networking and community!

- Stay tuned for in-person local chapter meet & greet!
- Many local chapters have open meetings!

<https://www.socra.org/chapters/list-of-chapters/>

SOCRA Events, News, and Info

- ▶ Board of Directors Elections complete, congrats to incoming board!
- ▶ Annual Conference 2024- Vegas!
 - ▶ Registration: <https://www.socra.org/annual-conference/2024/register-to-attend/>
 - ▶ Poster Program- deadline 7/21: <https://www.socra.org/annual-conference/poster-program/poster-program/>
 - ▶ Ask your employer for support! <https://www.socra.org/resources-and-faq/support-justification-letters/>
- ▶ SOCRA is on YouTube! <https://www.youtube.com/@socra/videos>
- ▶ Upcoming Events
<https://www.socra.org/conferences-and-education/events-calendar/>
Clinical Trials Day! May 20th, 2024:
<https://www.socra.org/membership/volunteer/clinicaltrialsday/>

Member Highlight:

Sydnee Moses

- **Role:** Pediatric Oncology Clinical Research Coordinator/Carilion Clinic
- **Research Experience:** Research Assistant for 2 yrs, CRC for 9 months. Part of a team that compared mouse and human optic nerve to develop new drug treating optic nerve astrogliosis. Enjoy working in pediatric oncology to see how research cures cancer.
- **SOCRA membership:** 9 months
- **Unique Fact:** I just bought my first house! I also own a basset hound and German Shorthaired Pointer.



2024 Baltimore SOCRA Chapter Goals: Progress



- ▶ In-person networking event - planning
- ▶ Increase media presence- ongoing
- ▶ Chapter committee expansion - Done (Welcome Ezzat!)
- ▶ Chapter Member Highlights- Started
 - Crystal Vaughn, Sydnee Moses
- ▶ Chapter member presentation- ongoing
 - Scott Wehage, Functional Medicine
 - Who else????!!!!
- ▶ Chapter member poster submission for annual conference
 - Come on! You can do it!

Today's Speaker

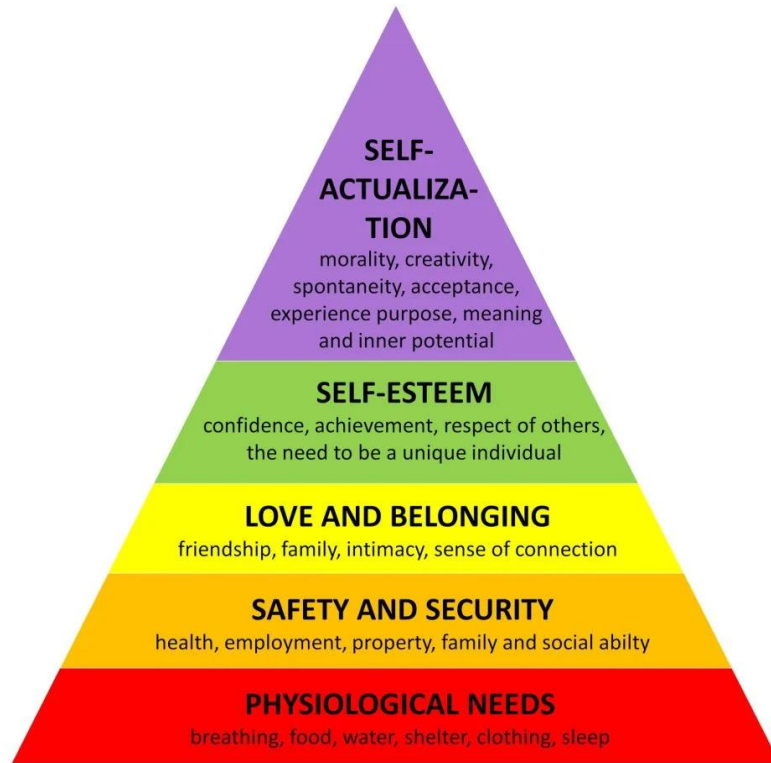


Jeffrey Wells
Patient Professor
NIH and UMB IRB Member
Rockstar Human Being

PREP-IT

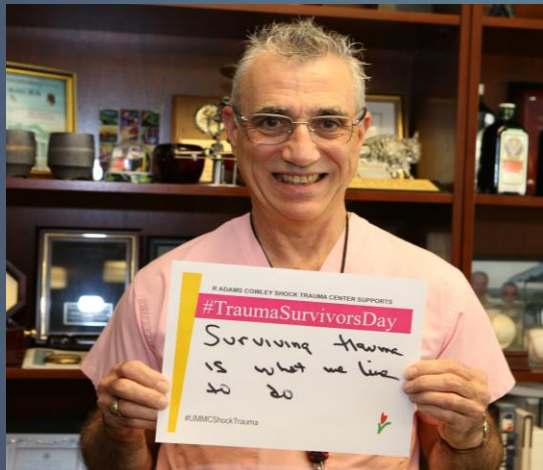
THE VOICE OF THE PATIENT

Jeffrey L. Wells

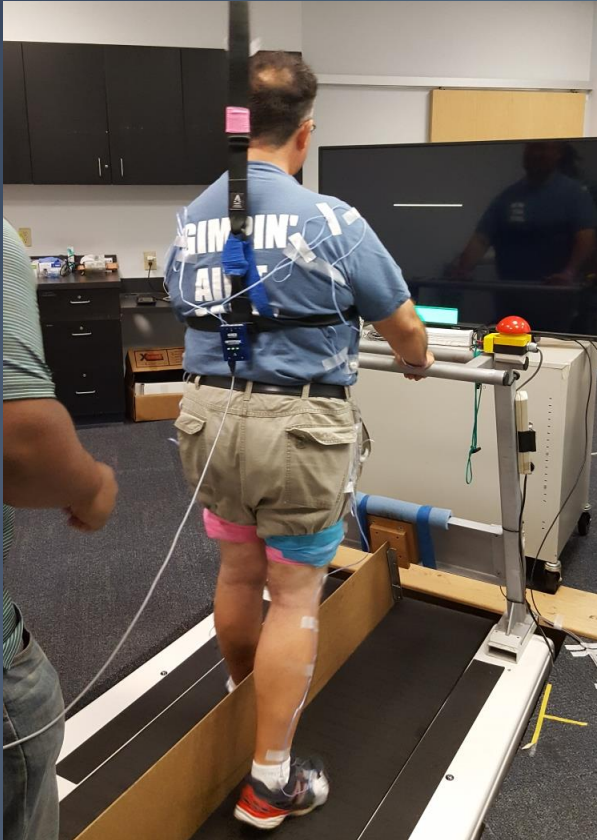


Maslow's Hierarchy of Needs

1. Physiological Needs



2. Safety and Security



3. Love and Belonging



4. Self Esteem



PREP-IT

A Program of Randomized trials to
Evaluate Pre-operative antiseptic skin
solutions In orthopaedic Trauma

The PREP-IT Investigators

A-PPREP PREPARE

Question

What is the effectiveness of surgical skin preparation with iodophor solutions vs chlorhexidine solutions at reducing 90-day surgical site infections and unplanned fracture-related reoperations within 1 year of injury?



Huh?

Patient Partners



Jana Palmer



Debra Marvel



Jeff Wells

The PREP-IT Patients-Centered Outcome Core

Will be responsible for representing patient and caregiver values and for providing direction on all patient and stakeholder engagement activities

Informed Key Aspects of the Protocol

- ▶ Deferred consent model
- ▶ Eligibility criteria
- ▶ Outcomes
- ▶ Follow-up schedule
- ▶ Language (e.g., avoid abbreviations, define complex terms, etc.)

JAMA
Network

Open.

Original Investigation | Orthopedics

Effectiveness of Iodophor vs Chlorhexidine Solutions for Surgical Site Infections and Unplanned Reoperations for Patients Who Underwent Fracture Repair

The PREP-IT Master Protocol

The Program of Randomized Trials to Evaluate Pre-operative Antiseptic Skin Solutions in Orthopaedic Trauma (PREP-IT) Investigators

Abstract

IMPORTANCE The risk of developing a surgical site infection after extremity fracture repair is nearly 5 times greater than in most elective orthopedic surgical procedures. For all surgical procedures, it is standard practice to prepare the operative site with an antiseptic solution; however, there is limited evidence to guide the choice of solution used for orthopedic fracture repair.

OBJECTIVE To compare the effectiveness of iodophor vs chlorhexidine solutions to reduce surgical site infections and unplanned fracture-related reoperations for patients who underwent fracture repair.

DESIGN, SETTING, AND PARTICIPANTS The PREP-IT (Program of Randomized Trials to Evaluate Pre-operative Antiseptic Skin Solutions in Orthopaedic Trauma) master protocol will be followed to conduct 2 multicenter pragmatic cluster randomized crossover trials, Aqueous-PREP (Pragmatic Randomized Trial Evaluating Pre-Operative Aqueous Antiseptic Skin Solution in Open Fractures) and PREPARE (Pragmatic Randomized Trial Evaluating Pre-Operative Alcohol Skin Solutions in Fractured Extremities). The Aqueous-PREP trial will compare 4% aqueous chlorhexidine vs 10% povidone-iodine for patients with open extremity fractures. The PREPARE trial will compare 2% chlorhexidine in 70% isopropyl alcohol vs 0.7% iodine povidone in 74% isopropyl alcohol for patients with open extremity fractures and patients with closed lower extremity or pelvic fractures. Both trials will share key aspects of study design and trial infrastructure. The studies will follow a pragmatic cluster randomized crossover design with alternating treatment periods of approximately 2 months. The primary outcome will be surgical site infection and the secondary outcome will be unplanned fracture-related reoperations within 12 months. The Aqueous-PREP trial will enroll a minimum of 1540 patients with open extremity fractures from at least 12 hospitals; PREPARE will enroll a minimum of 1540 patients with open extremity fractures and 6280 patients with closed lower extremity and pelvic fractures from at least 18 hospitals. The primary analyses will adhere to the intention-to-treat principle and account for potential between-cluster and between-period variability. The patient-centered design, implementation, and dissemination of results are guided by a multidisciplinary team that includes 3 patients and other relevant stakeholders.

DISCUSSION The PREP-IT master protocol increases efficiency through shared trial infrastructure and study design components. Because prophylactic skin antiseptics is used prior to all surgical procedures and the application, cost, and availability of all study solutions are similar, the results of the PREP-IT trials are poised to inform clinical guidelines and bring about an immediate change in clinical practice.

TRIAL REGISTRATION ClinicalTrials.gov Identifiers: NCT03385304 and NCT03523962

Key Points

Question What is the effectiveness of surgical skin preparation with iodophor solutions vs chlorhexidine solutions at reducing 90-day surgical site infections and unplanned fracture-related reoperations within 1 year of injury?

Findings This trial master protocol describes 2 multicenter pragmatic cluster randomized crossover trials, Aqueous-PREP (Pragmatic Randomized Trial Evaluating Pre-Operative Aqueous and Antiseptic Skin Solution in Open Fractures) and PREPARE (Pragmatic Randomized Trial Evaluating Pre-Operative Alcohol Skin Solutions in Fractured Extremities), which seek to compare the effectiveness of iodophor and chlorhexidine surgical skin preparation solutions at reducing surgical site infections and unplanned fracture-related reoperations.

Meaning Because prophylactic skin antiseptics is used prior to all surgical procedures and the application, cost, and availability of all study solutions are similar, the results are poised to inform clinical guidelines and bring about change in clinical practice.

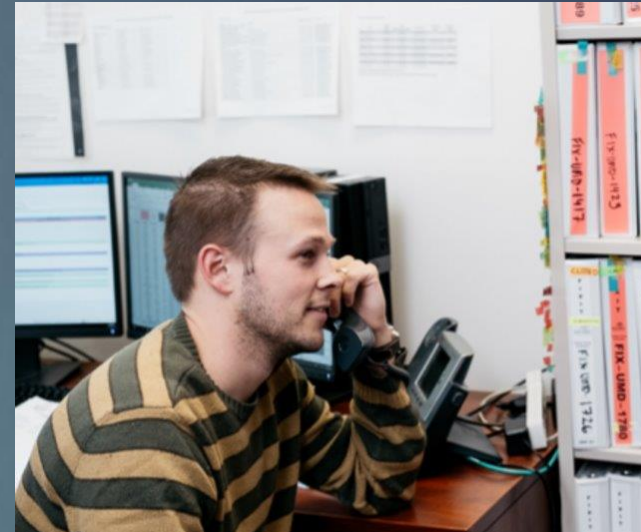
Supplemental content

Author affiliations and article information are listed at the end of this article.

JAMA Network Open. 2020;3(4):e202215.

Informed Consent Form Development

- ▶ Discussed the purpose of informed consent
- ▶ Patient partner shared their experience as a study participant during the consent process
- ▶ Reviewed timing of the consent
- ▶ Simplified the language in the informed consent form
- ▶ Informed the use of telephone consent



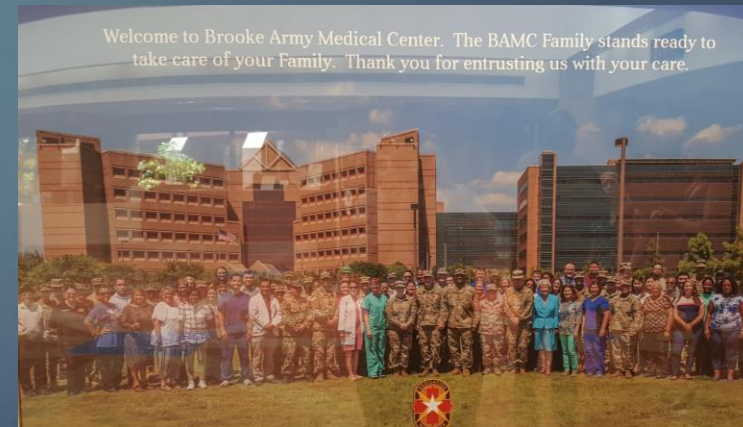
Site Initiation Visits



JACKSONVILLE, FL

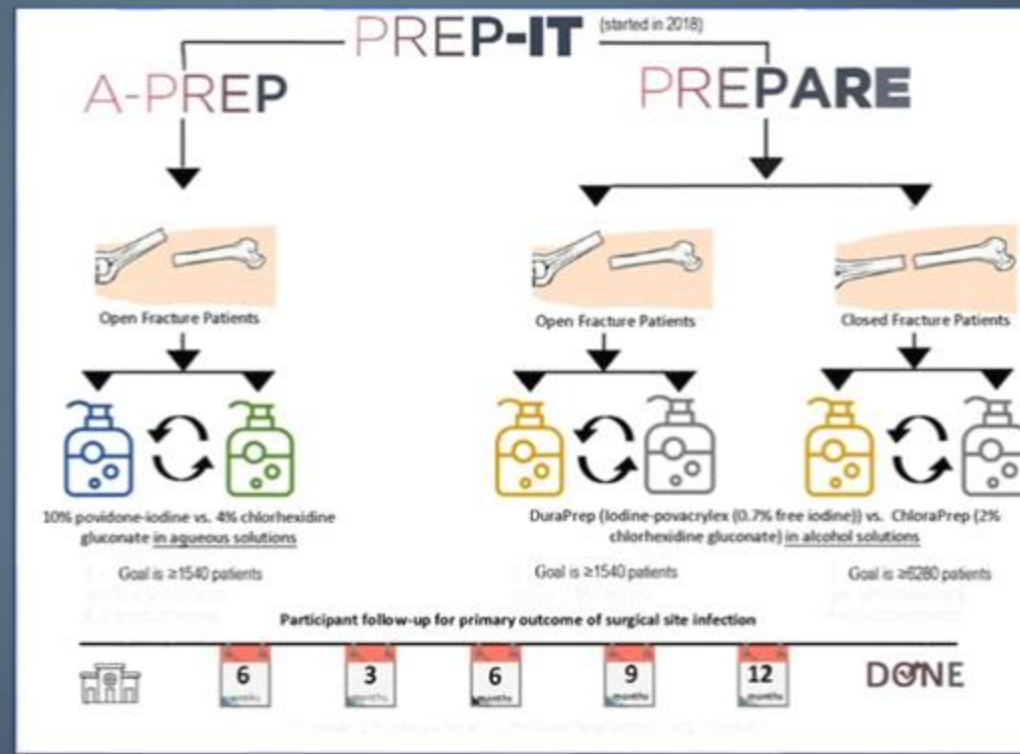


GREENVILLE, SC



SAN ANTONIO, TX

Development of a Trial Visual



Development of Clinical Site Posters

PREPARE	
DuraPrep™ · DuraPrep™ · DuraPrep™ · DuraPrep™	
All OPEN and CLOSED FRACTURES should be prepped with DuraPrep™	
	
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PERIOD START DATE	PERIOD END DATE
DuraPrep™ · DuraPrep™ · DuraPrep™ · DuraPrep™	
For more information on the PREPARE study, please visit: www.prepittrial.com	
Local contact person: Name: _____ Phone: _____	

PREPARE	
ChloraPrep™ · ChloraPrep™ · ChloraPrep™ · ChloraPrep™	
All OPEN and CLOSED FRACTURES should be prepped with ChloraPrep™	
	
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For more information on the PREPARE study, please visit: www.prepittrial.com	
Local contact person: Name: _____ Phone: _____	

Newsletters

PREP-IT

NEWSLETTER | February 2021

Aqueous-PREP Overview

The overall objective is to compare the effectiveness of aqueous preoperative antiseptic skin preparation with 10% povidone-iodine vs. 4% chlorhexidine gluconate (CHG) for the management of open fractures. The primary outcome for comparison is surgical site infection (SSI) and the secondary outcome is unplanned fracture-related reoperation.

PREPARE Overview

The overall objective of this trial is to compare the effectiveness of iodine povidone (0.7% free iodine) in 74% isopropyl alcohol (DuraPrep™) vs. 2% CHG in 70% isopropyl alcohol (ChlorPrep™) for the management of open fractures and closed lower extremity and pelvic fractures. The primary outcome for comparison is surgical site infection (SSI) and the secondary outcome is unplanned fracture-related reoperation.

PREP-IT Rounds

REMINDER! Our March PREP-IT Rounds Session is this Friday March 5th, 2021 from 1pm to 3pm EST. Leah, Lucas, and Roman will be presenting on time to ORs during the COVID-19 pandemic, fracture classifications, and injury severity scores. This information packed session is one not to miss!

PREP-IT Website

Did you know that we have a PREP-IT website? If you are looking for trial updates, current resource binder documents, recordings of past rounds, you can find it all here: www.prep-ittrial.com. The password to access study documents are "aprep" and "prepare."

Aqueous-PREP Enrolment Update

Aqueous-PREP has enrolled 1,562 participants across 14 sites (Table 3). Currently 7 sites are enrolling and have enrolled 26 participants in the month of February.

PREPARE Enrolment Update

PREPARE-Open has enrolled 1,226 participants across 18 sites, with 26 participants enrolled in January (Table 6). PREPARE-Closed has enrolled 5,582 participants across 21 sites, with 164 participants enrolled in February (Table 7).

Antibiotics Log

The first entry on the antibiotics log should correlate with the response to Q3 on the Peri-Operative Care Form. When completing these forms, make sure to check that these dates align.

Heterotopic Acetabular (HO) Sub-study

We are very excited to have the HO sub-study underway at sites in the PREPARE trial. If your site requires local ethics approval, please let David know once approval is obtained to discuss the next steps.

Q2 Invoices

The Methods Centre will be preparing invoices over the next few weeks. Please take some time to reply to queries and complete data entry in an effort to maximize payment for this quarter. We would like to remind you that incomplete event forms and missing adjudication source will impact payment.

PREP-IT Monthly Enrollment 20/21

Month	PREPARE-Closed	PREPARE-Open	A-PREP
Oct	280	50	20
Nov	230	40	20
Dec	220	40	20
Jan	220	40	20
Feb	160	40	20

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PREP-IT Spotlight

Wake Forest Baptist Health

Wake Forest Baptist Medical Center is an academic medical center located in Winston-Salem, North Carolina, which is part of Charlotte-based Atrium Health. Wake Forest Baptist Medical Center has 885 beds and 1,334 School of Medicine Faculty. The hospital provides \$373.9 million in annual community benefit through community health, education and uncompensated charity care. Wake Forest Baptist Medical Center is also a Level 1 trauma center serving the entire Piedmont region of North Carolina. It houses one of three Level 1 Pediatric Trauma Centers in North Carolina.

What motivates your site to work hard to make the PREPARE trial a success?

Working at Wake Forest Baptist Health with such a great study staff alone is motivating. It's easier to work hard when everyone on the team share the same goals.

How does your site keep your data consistently clean and query free?

ORGANIZATION! We thoroughly review each participant's medical record taking note of every detail, ensuring data is captured correctly. We always ask questions if we are not 100% sure about something. It is always beneficial to get a second opinion from the study surgeon or from another member of your study team! If you work as a team and set up a system, the study workflow is better. We quickly double check each other's work which helps minimize queries.

How has COVID-19 impacted the way you conduct the trial on a day-to-day basis?

Communication between the team has been key during the pandemic, especially since we have had to work remotely at times. We connect regarding study issues via email, telephone, and virtual meetings. We prioritize study tasks and split up the responsibilities between the team. We provide daily updates on what we have accomplished to reduce duplicate work.

PA Janet Syme has played an integral part in maintaining study enrollment during COVID. We provide her with a daily list of in-house candidates and she approaches them as she does her daily rounds. If the patient is interested, she lets us know and we consent them via telephone.

Visiting Winston-Salem?

Old Salem Museums and Gardens is a must see if you are visiting Winston-Salem. It is the historic settlement of the Moravians founded in 1766 and consists of preserved houses and buildings in the town. Make a stop at Reynolda House, the centerpiece of the Reynolda District, adjacent to the Wake Forest campus. This 1917 restored mansion houses a premier collection of American art. Visitors can stroll the formal gardens, greenhouses and woodland walking trails.

Fun Fact....

Krispy Kreme doughnuts originated in Winston-Salem. Saving by their factory when the "HOT" sign is on and grab a fresh dozen to enjoy with your coffee!

Meet the Wake Forest team!

<p>Holly Pilsen Principal Investigator</p>	<p>Sharon Babcock Reynolds Co-Investigator</p>	<p>Eben Carroll Co-Investigator</p>	<p>Jason Halvorson Co-Investigator</p>	<p>Janet Syme Physicians Assistant</p>
<p>Ariel Brotherton Research Coordinator</p>	<p>Wendy Williams Research Coordinator</p>	<p>Martha Holden Research Coordinator</p>	<p>J. Brett Goodman Research Coordinator</p>	<p>Taylor Hill Research Coordinator</p>

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PREP-IT Educational Rounds

PREP-IT

PREP-IT ROUNDS
FRIDAY MARCH 5, 2021
12:00PM – 1:00PM EST

Please join us for the PREP-IT Rounds hosted by Sheila Sprague and Gerard Slobogean, featuring presentations by Roman Natoli, and Lucas Marchand.



ROMAN NATOLI

Roman Natoli is an orthopaedic surgeon at Indiana University Health. His centre is participating in both the Aqueous-PREP trial and the PREPARE trial. Roman will review the AO/OTA Classification and Gustillo Classification system. He will also provide case examples.

LUCAS MARCHAND

Lucas Marchand is an orthopaedic surgeon at the University of Utah Hospital in Salt Lake City. His centre is participating in the PREPARE trial. Lucas will review the Injury Severity Score (ISS) and will provide case examples on how to score the ISS.



PREP-IT

PREP-IT ROUNDS
FRIDAY FEBRUARY 5, 2021
1:00PM – 3:00PM EST

Please join us for the PREP-IT Rounds hosted by Sheila Sprague and Gerard Slobogean, featuring a workshop on research workflow with Bianca Manago.



ABOUT THE SPEAKER

Bianca Manago is an Assistant Professor in the Department of Sociology at Vanderbilt University. Her research has been funded by the National Science Foundation and has appeared in outlets such as the: American Sociological Review, Social Forces, Proceedings of the National Academy of Sciences, and the Annual Review of Sociology. Her methodological work focuses on experimental design, statistical analyses, and workflow of data analysis. She has taught workflow at Indiana University, Vanderbilt University, Texas A&M University, ICPSR, and for Statistical/Code Horizons.

WORKSHOP OUTLINE

Researchers often spend time learning how to improve their methods, data analysis, and writing skills. Generally, less time is spent learning how to optimize our time and energy. A careful consideration of workflow can make clinical research more efficient, accurate, reproducible, and less frustrating. This workflow workshop will cover the following topics: principles of good workflow, time management, directory structures, file naming, data management, and tools for effective workflow. By practicing these workflow strategies, researchers will be more efficient, and their research will be more accurate and reliable.

PREP-IT

SAVE THE DATE: PREP-IT ROUNDS
FRIDAY APRIL 9, 2021
12:00PM – 1:00PM EST

Please join us for the PREP-IT Rounds hosted by Sheila Sprague and Gerard Slobogean, featuring presentations by Leah Gitajn and Holly Pilson.



LEAH GITAJN

Leah Gitajn is an orthopaedic surgeon at Dartmouth-Hitchcock Medical Center in Lebanon, New Hampshire. Her centre is participating in the PREPARE trial. Leah will be presenting the results of the PREP-IT sub-study titled: The Effect of COVID-19 on Achieving Time-to-Surgery Benchmarks in Musculoskeletal Trauma.

HOLLY PILSON

Holly Pilson is an orthopaedic surgeon at Wake Forest Baptist Health in Winston-Salem, North Carolina. Her centre is participating in the PREPARE trial. Holly will review the anatomy and different treatments of acetabular and pelvic fractures and will provide case examples.



Engagement Manuscripts and Sub-Studies

- ▶ Contributed to multiple manuscripts and sub-studies
- ▶ Included as co-authors or contributors on all publications



Patient and stakeholder engagement learnings: PREP-IT as a case study

Journal of **Comparative Effectiveness Research**

Poster Presentations

McMaster University

MacOrtho

UNIVERSITY of MARYLAND SCHOOL OF MEDICINE

PREP-IT
PREPARE A-PREP

Pragmatic Design and Inclusion of Patient-Partner Representatives Improves Participant Experience in Clinical Research

David Pogorzelski, Jeffrey L. Wells, Debra Marvel, Jana E. Palmer, C. Daniel Mullins, Michelle Medeiros, Jodi L. Gallant, Ella Spicer, Patrick F. Bergin, I. Leah Gitajn, Devin S. Mullin, Greg E. Gaski, Robert Hymes, Sofia Bzovsky, Gerard P. Slobogean, Sheila Sprague, the PREP-IT Investigators

*A full list of PREP-IT Investigators is available in the OTA International Appendix

**The authors have no relevant disclosures

pcori

CIHR IRSC

U.S. DEPT OF DEFENSE

BACKGROUND

- Meaningful patient engagement in the design of randomized controlled trials is an essential component of a trial's success.^{1,2}
- The PREP-IT trials followed the patient-centered outcomes research (PCOR) approach, which includes allowing patient voices to be heard and focusing on outcomes that are relevant to patients and their caregivers.³
- The PREP-IT trials evaluate different skin preparation solutions in patients with fractures.
- These trials aim to improve orthopaedic fracture research through meaningful engagement with patient-partners and to identify ways to better engage with study participants.

OBJECTIVE

- To explore participants' experiences with clinical research and participation in the PREP-IT trials.

METHODS

- At the final follow-up visit (12 months after their fracture), patients participating in the PREP-IT trials were invited to participate in the sub-study.
- After providing informed consent, participants completed a questionnaire that asked about their experience and satisfaction with participating in the PREP-IT trials.
- Descriptive statistics were used to summarize the findings.

RESULTS

- Demographics:** 402 participants were included in the sub-study. The mean age of the participants was 53.1 years (SD 18.3 years) and 57% were female.
- Previous Experience with Clinical Trials:** 78% of participants indicated that PREP-IT was the first research study that they had taken part in and 9% indicated that they were participating in another study at the same time as PREP-IT.
- Satisfaction with Participation in PREP-IT:** 87% of participants indicated that their experience in the trial was excellent or good. No participants indicated a poor or very poor experience. 83% of participants felt that their participation was appreciated a lot. 87% of participants indicated that they would definitely or probably participate in another clinical study.
- Reasons for Participating in PREP-IT:** 69% of participants indicated that they wanted "to help future patients with broken bones", and 56% indicated that they wanted "to contribute to science". When participants were asked to select all items associated with the trial design that influenced their decision to participate, 46% selected at least one item. This includes: no extra clinic visits (35%), limited time commitment (31%), no additional medications (29%), few questionnaires (28%), and no additional test (26%).

Table 1. Reasons for participating in PREP-IT

	Total N (%) N=402
Reason for taking part in this study*	
To help future patients with broken bones	279 (69.4)
To make a contribution to science	223 (55.5)
To feel part of something	73 (18.2)
Other (details not specified)	63 (15.7)
Items that influenced decision to take part in this study*	
Note of these influenced my decision	217 (54.0)
No extra clinic visits	141 (35.1)
Limited time commitment	125 (31.1)
No additional medications	118 (29.4)
Few questionnaires or surveys	111 (27.6)
No additional x-rays or tests	106 (26.4)

*Multiple responses could be selected

DISCUSSION

- Most participants reported a positive experience with participating in the PREP-IT trials. Altruism was the largest motivator for participating in this research. Approximately half of the participants indicated that the pragmatic, low-participant burden design of the trial influenced their decision to participate. Meaningful patient engagement, a pragmatic and low burden protocol led to high levels of participant satisfaction.

REFERENCES

1. Chalmers I. What do I want from health research and researchers when I am a patient? BMJ. 1995;310:1315-8.

2. Domecq JP, Prutsky G, Elraiyah T, et al. Patient engagement in research: A systematic review. BMC Health Services Research. 2014;14:89.

3. Patient-Centered Outcomes Research Institute. Patient-Centered Outcomes Research [Internet]. 2013 [cited 2022 Aug 12]. Available from: <https://www.pcori.org/research/projects/patient-centered-outcomes-research>

PCORI Conferences

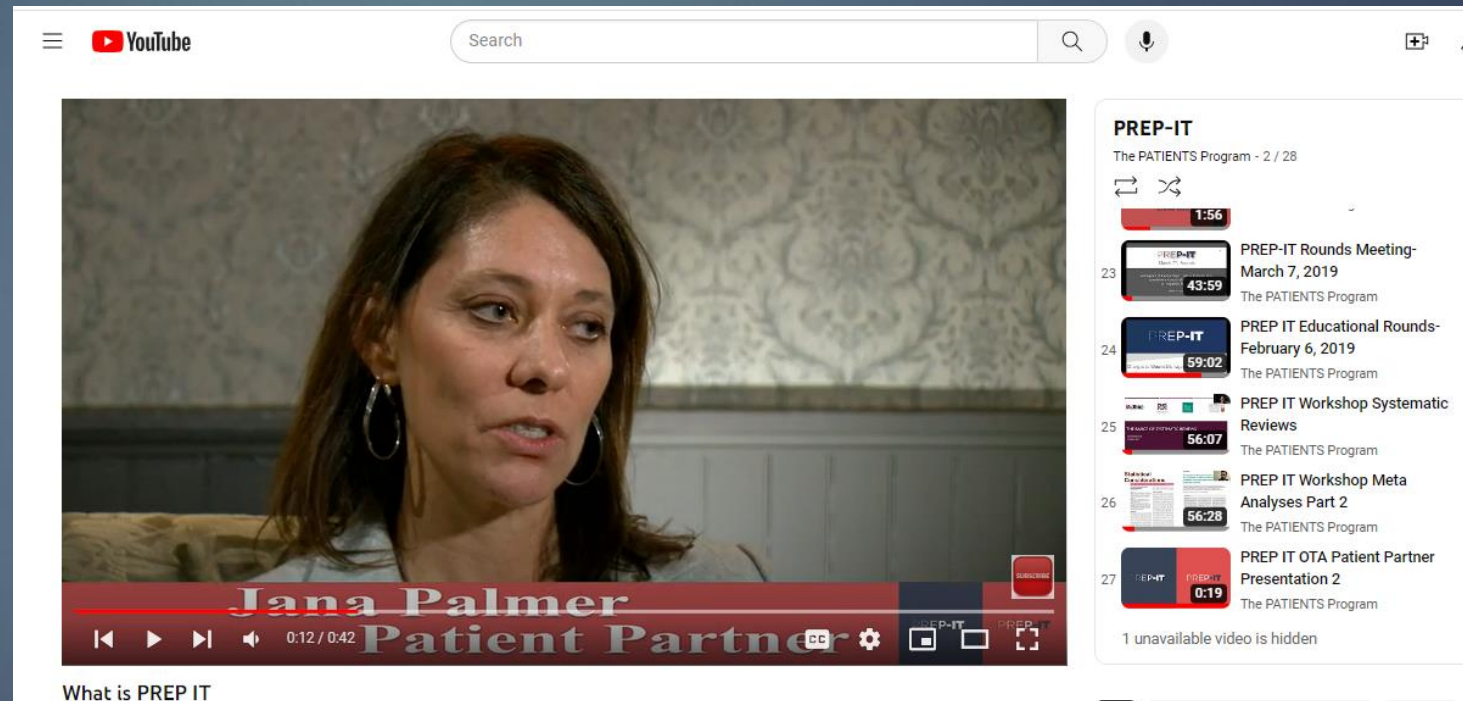


PREP-IT

Lessons Learned

Recordings are on
Patients Program
YouTube Channel

Used by sites to
answer questions
in patient's voice



The screenshot shows a YouTube video player interface. The main video features a woman with long brown hair and large hoop earrings, identified as Jana Palmer, a Patient Partner. The video title is "What is PREP IT". The player controls show a progress bar at 0:12 / 0:42. To the right of the video is a list of related videos from the "PREP-IT" channel, which is part of "The PATIENTS Program". The list includes:

- PREP-IT Rounds Meeting- March 7, 2019 (43:59)
- PREP IT Educational Rounds- February 6, 2019 (59:02)
- PREP IT Workshop Systematic Reviews (56:07)
- PREP IT Workshop Meta Analyses Part 2 (56:28)
- PREP IT OTA Patient Partner Presentation 2 (0:19)

At the bottom of the list, it says "1 unavailable video is hidden".

Annual Investigator Meetings

- ▶ Meetings began with a patient focus
- ▶ Topics relevant to patient partners
- ▶ Guest speakers
- ▶ Discussions of challenges faced during the trial
- ▶ Celebrations of successes



PREP-IT Podcast



PREP-IT Presentation



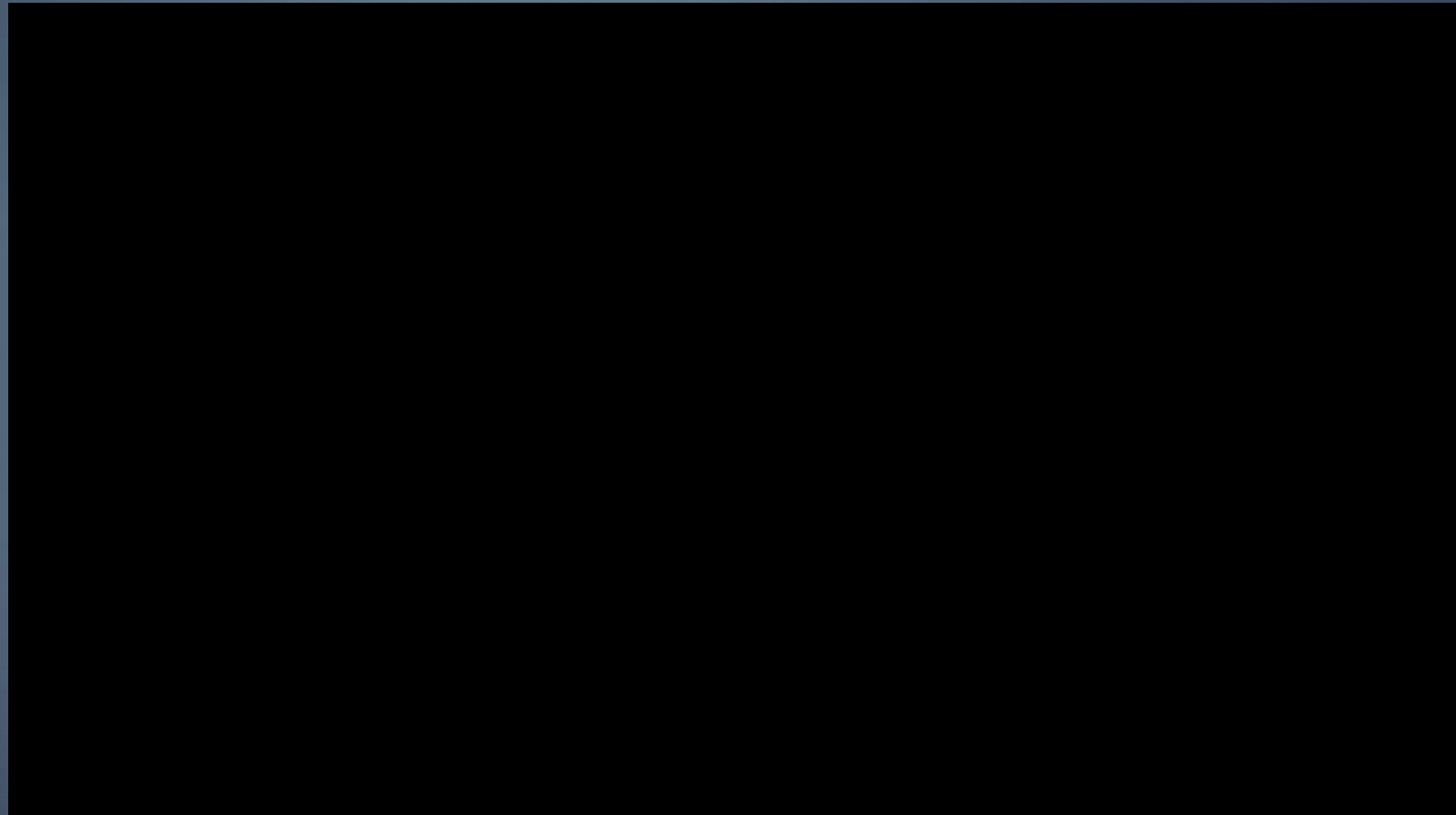
Society of Clinical Trials

PREP-IT Patient Advisors

- ▶ Jeff, Debra, and Jana participated because they would like to give back to their healthcare professionals and help future patients
- ▶ Were involved from start to finish
- ▶ Initial grant development meeting in 2017
- ▶ Trial results meeting in May 2023
- ▶ Multiple meetings in-between



Knowledge Dissemination of Primary Results



A-PREP trial is very unique ➡

- ➔ Full commitment to patient engagement
- ➔ Multiple period, cluster randomized, crossover trial
- ➔ Results published in The Lancet 2022; 400:1334-44

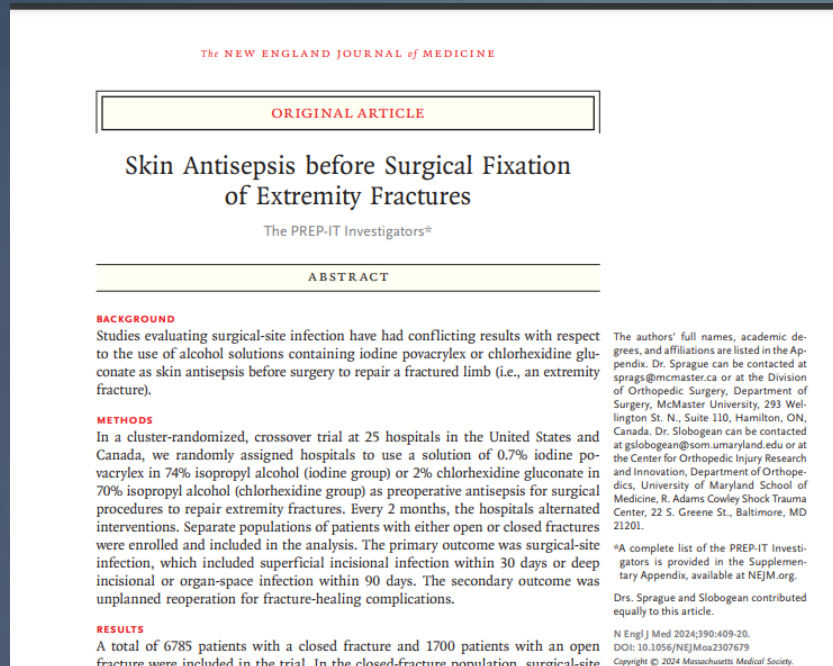
PREP-IT Investigators ➡

- ➔ 30 sites, 300+ collaborators
- ➔ 10 papers related to patient engagement, clinical practice patterns, or research methods



NEW ENGLAND JOURNAL OF MEDICINE

Among patients with closed extremity fractures, skin antisepsis with iodine povacrylex in alcohol resulted in fewer surgical-site infections than antisepsis with chlorhexidine gluconate in alcohol.





Discussion Open Fractures

PREPARE

→ A-PREP & PREPARE-Open (n=3,338)

→ No differences in SSI or reoperation detected between iodine or CHG antiseptics

- ▶ Alcohol or aqueous solutions
-

→ Why are the results different for open versus closed fractures?

- ▶ Open wound exposed to environmental bacteria for hours prior to antiseptics
- ▶ Immediate irrigation of open fracture wound
- ▶ Antiseptics most effective for intact skin immediately prior to incision



Discussion Closed Fractures

0.7% iodine povacrylex in alcohol reduced the odds of infection by 26% amongst closed fractures

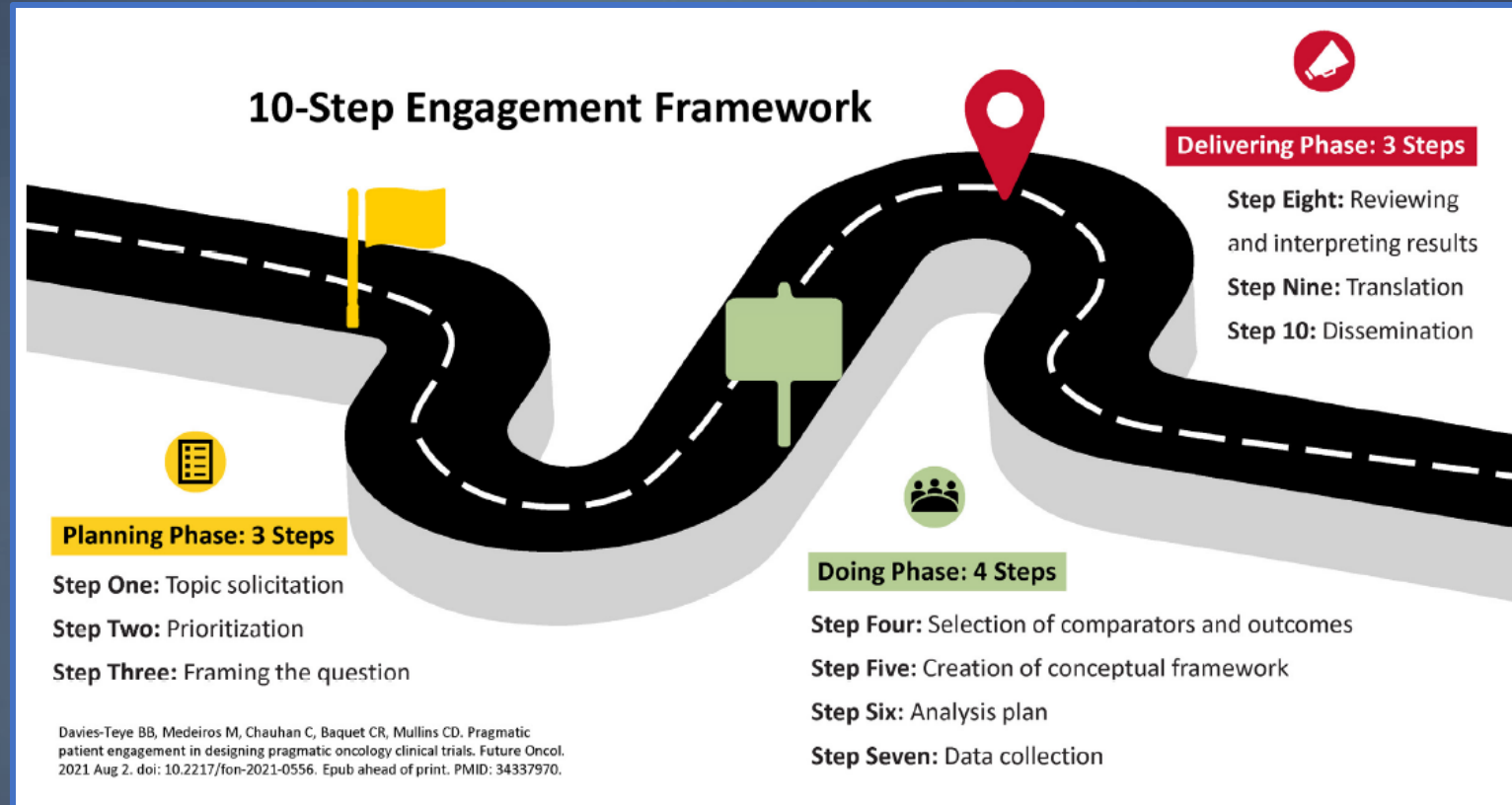
- Absolute effect 0.8%
- NNT – 125 closed fractures

Iodophor used in PREPARE differs from povidone-iodine

- Povacrylex is a water insoluble deliverer of free iodine
- Resistant to fluid and blood
- Provides longer protection / action of the iodine

Water insoluble delivery may provide the mechanism for the treatment effect

Patient Engagement in PREP-IT



The **PATIENTS** Program
at the University of Maryland
School of Pharmacy

5. Self-Actualization

FINAL INVESTIGATOR MEETING



6 Sites Brought Patients to see Engagement

Ubuntu and Mentorship | In conversation with Dr. Lehana Thabane | OrthoPod



UBUNTU

ORTHO
POD

African cultures means I am because we
are

▶ ⏮ 🔊 4:16 / 17:52 • What is a good mentor >



Dr. Lehana Thebane – Ortho POD

Patient Partners



Jana Palmer, Ed.D



Debra Marvel, MS



Jeff Wells, AA