# FOCUS trial

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FOCUS: Fluoxetine Or Control Under Supervision

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# Background

- Several small trials suggest a benefit of SSRI in prevention of post-stroke depression and to improve recovery
- FLAME trial (n=118) demonstrated improvements in motor recovery and mRS at 3/12 if given fluoxetine days 5-15 after stroke onset
- FLAME ignited world-wide interest in the role of SSRI for stroke recovery, through mechanisms other than just an effect on mood

10 January 2011 Last updated at 02:18

# Stroke recovery boosted by a course of Prozac

**Giving stroke patients Prozac soon after the event could help their recovery from paralysis, a study has found.**

Researchers discovered more improvement in movement and greater independence after three months in patients taking the antidepressant (also known as fluoxetine), compared to placebo.

**The Lancet Neurology study** was based on research on 118 patients in France.

UK stroke experts said the findings were "promising".

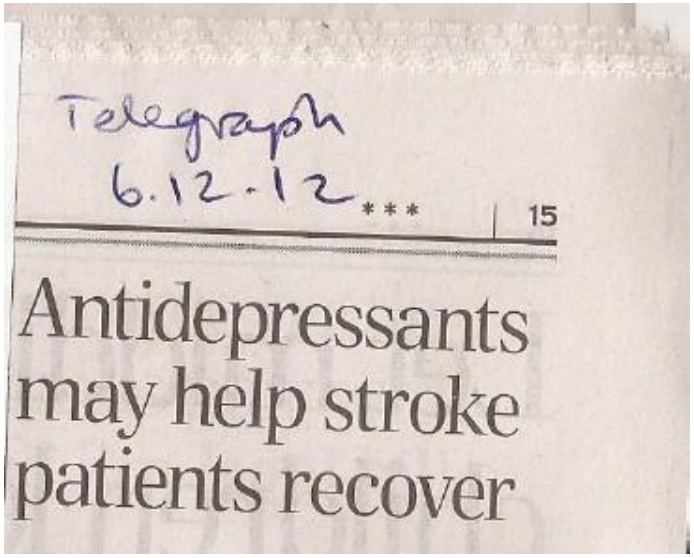
Improving motor functions in stroke patients helps their independence

Related stories

# Cochrane review of SSRI for stroke recovery

- 52 trials, 4059 patients
- Fluoxetine most commonly used SSRI
- At end of treatment, there were improvements in
  - Dependency, disability, neurological impairment, anxiety and depression
- But
  - Multiple sources of biases in the trials
  - Most were small
  - There was heterogeneity in estimates of treatment effect
  - Most did not follow up patients after treatment had ended
- Larger trials are needed

Mead GE, Hsieh C-F, Lee R, Kutlubaev MA, Claxton A, Hankey GJ, Hackett ML. Selective serotonin reuptake inhibitors (SSRIs) for stroke recovery. Cochrane Database of Systematic Reviews 2012 Issue 11.



Telegraph
6.12.12 ***

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Antidepressants may help stroke patients recover

10 Daily Express Thursday December 6 2(

Pills may aid stroke recovery

Thursday, December 6, 2012 METRO

Anti-depressants can help... even if you're not depressed

THURSDAY | 06 DECEMBER 2012 UK

Antidepressants could aid stroke recovery

http://www.channel4.com/news/antidepressants-could-aid-stroke-recovery

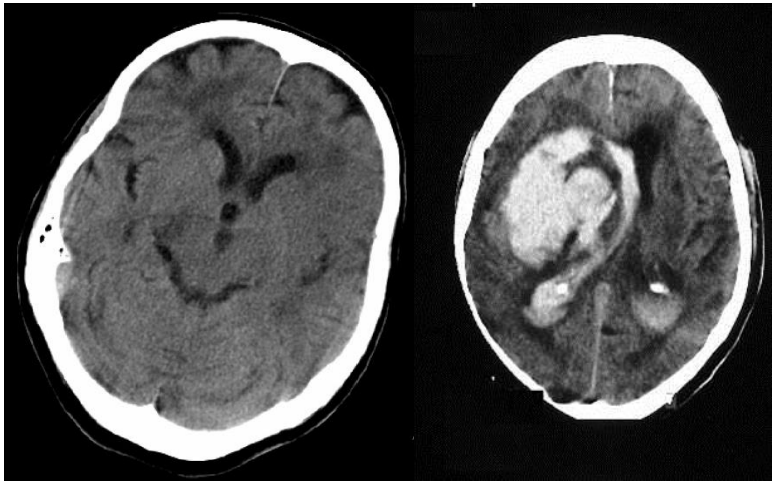
# Aims of the FOCUS trial

- To determine whether taking fluoxetine 20mg each day for 6 months after stroke
  - Reduces disability after stroke
  - Reduces other post-stroke problems
  - Whether any improvements persist after the treatment has stopped
- To provide robust evidence about whether any benefits outweigh any risks
- It is not a “depression “ trial

# Who will we include?

- Inclusion criteria
  - Patients with clinically definite stroke (either ischaemic or haemorrhagic).
  - Persisting neurological deficits at the time of joining the trial.
  - Between 2 and 15 days after stroke onset.

Ischaemic stroke



Haemorrhagic stroke

# Inclusion & Exclusion Criteria

**Inclusion**

- age ≥ 18 years
- brain imaging is compatible with intracerebral haemorrhage or ischaemic stroke
- randomisation can be performed between 2 and 15 days after stroke onset persisting focal neurological deficit is present at the time of randomisation severe enough to warrant 6 months trial treatment from the patient's or carer's perspective

**Exclusion**

- subarachnoid haemorrhage
- unlikely to be available for follow up at 12 months
- patient and/or carer unable to understand spoken or written English
- other life threatening illness
- pregnant or breast-feeding or of child bearing age not taking contraception
- history of epileptic seizures
- attempted suicide or self-harm
- allergy or contra indication to fluoxetine
- taken a monoamine oxidase inhibitor in last 5 weeks
- current or recent depression requiring treatment with SSRI
- already participating in a CTIMP

# Contraindications to SSRI

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# Outcome measures

- Primary: modified Rankin score
- Secondary
  - Survival
  - Euroquol 5-D
  - Vitality score of SF-36
  - Stroke impact score (59 items, 8 domains)
  - New clinical diagnosis of depression
  - Resource use

# Progress so far

- 2113 patients
- 99  centres
- No new centres
- Looking for  1-2  patients  per month

# What proportion of patients might be eligible?

- At one site, we screened 276 admissions to hospital with stroke (5.9.12 to 5.04.13)
- Of these 93 (34%) were eligible
- Most common reasons for exclusion
  - Stroke deficits too mild (65), on SSRI (24), history of seizures (15), renal impairment (15)
- 82 were approached and 30 consented
  - Most did not give reasons for refusals, but of those that did, fears about side effects and not wanting more drugs were most common (14)

# Starting the allocated treatment

- The PI or other designated doctor will sign the prescription and send it to the pharmacy
- The pharmacist will dispense a bottle of trial medication
- The ward staff will administer the capsules
- If in hospital,  will be for duration of stay

# Practical things to think about

186 capsules is a lot for the patient to sign up for

- try make sure a patient can, and will take them

mRS is the primary outcome

- the patient does need to have a measurable deficit to improve

Want good data to come out of the study

- not just numbers in

# Ensure patient has medication supply on discharge

- The trial medication should be prescribed on discharge with other medications.
- The patient should be given the remaining capsules in the bottle provided.
- This will allow them to complete the 6 month course.

# GPs in FOCUS

- We contact the GP to tell them about inclusion in the trial – you don't need to
- We tell them about avoiding SSRIs and our 24 hr helpline details
- They often don't read it !
- Please make sure Juniors know to write:

FOCUS trial medication:

Fluoxetine 20mg **OR** placebo

on the TTOs and discharge letter

# For further information

- Visit the website;

(www.focustrial.org.uk)

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# Home:

**Welcome** to the FOCUS trial website.

## What is the FOCUS trial?

***The FOCUS trial*** is a randomised controlled trial which aims to find out whether fluoxetine given to people for six months after a stroke improves long-term recovery, even if they do not have depression.

## What does FOCUS stand for?

*All trials need* a 'snappy' name. We have selected 'FOCUS'. **'F'** stands for **Fluoxetine**, **'O'** for **'Or'**, and **'C'** for **'Control'**. **'US'** stands for **'Under Supervision'** to emphasise that we are monitoring patients' progress carefully throughout in the trial.