

269 Prevention of hypertensive injury to the brain by intensive treatment in intracerebral haemorrhage (PROHIBIT-ICH): protocol for a randomised controlled trial of telemetric home BP monitoring

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Abstract

Background Intracerebral haemorrhage (ICH) accounts for about 10% of strokes in the UK and is a major cause of severe disability and death. Sustained post-acute blood pressure (BP) management arguably holds the most potential to improve long-term prognosis, but there have been no trials to guide the optimal strategy for BP lowering after ICH. Telemetric home BP monitoring is a promising intervention to improve control.

Methods 112 adult survivors of hypertension-related ICH across multiple UK sites will be randomised to intensive telemetric home BP monitoring-guided treatment (intervention) to achieve a target of <120/80 mmHg or standard care (control).

Outcomes

1. Efficacy: the magnitude of difference in BP at 3 months in the intervention arm versus the control arm compared with baseline measures
2. Feasibility: consent rate; dropout rate from the intervention prior to 1 month; patient approval of the monitoring process
3. Safety: serious adverse events related to reducing BP in the intervention arm

Conclusion The BP monitoring component of PROHIBIT-ICH will determine whether a strategy of intensive BP treatment guided by telemetric monitoring for an extended period of time after spontaneous ICH is feasible, safe and effective in reducing BP.