Study Summary:

Myelodysplastic syndromes (MDS) and acute myeloid leukemia (AML) are blood disorders often associated with low blood counts. As a result, this can sometimes predispose patients to complications related to bleeding and infection, which can be severe and may impact patient quality-of-life. We hope to study two medications with the goal of reducing infection and bleeding among patients with MDS and AML.

To evaluate the effectiveness and safety of medications to prevent bleeding and infection, we will conduct two randomized controlled trials: 1) Tranexamic acid (TXA) trial: patients with MDS and AML with low platelet counts will receive TXA (a medication that prevents clots from dissolving); and 2) Antibiotic trial: patients with MDS and AML at risk for infection will receive levofloxacin (antibiotic). These medications are commonly used in other clinical settings but have not been studied in patients with MDS or AML receiving outpatient chemotherapy (ie, chemotherapy that can be given from clinic, rather than a hospital).

In these two studies, 50% of patients will be randomized (like the flip of a coin) to receive the medication we are studying. The other 50% of patients will not receive the medication. In the TXA trial we will monitor both groups of patients to see if we improved the risk and/or severity of bleeding. In the antibiotic trial, we will monitor both groups of patients to see if we reduce the risk of infectious complications. We will also monitor patients to ensure the medications are safe and will evaluate whether these medications improve patient quality-of-life.

Bleeding and infectious complications have been shown to be important to patients. The two medications (TXA, levofloxacin) are affordable and widely available. If our trial were to demonstrate that we were able to safely reduce thefrequency of bleeding and/or infection, this would broadly influence how doctors provide care for patients with MDS and AML around the world.

Purpose:

Our team is looking to put together a patient advisory committee that consists of 5 MDS and 5AML patients that can support and provide input on overall trial development and implementation, provide feedback on study materials, interpretation of study findings and knowledge dissemination. We would like to strengthen the development of this trial from the early stages to ensure patient perspective and 'lived in' experience is integrated into our evolving platform.

Patient Advisory Committee:

Meeting Details: Meetings will be held virtually through Zoom or MS Teams as required over the next 3 years. On average there will be 3-4 meetings annually with additional email communication as needed between meetings. Each meeting will last 90-120 minutes. Please note that you do not have to attend every meeting.

Compensation: $50CAD/hour

Please contact Nora at nchoi@hsc.mb.ca or (204) 230-3079 if you would like to participate as a patient advisor.