

# LIBERATE

## NEWSLETTER

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Greetings to the LIBERATE Study Teams and thank you for your work on the LIBERATE Study thus far.

The first quarter of 2023 has been dedicated to recruitment of new study sites. An update of the LIBERATE Study was presented to the Canadian Critical Care Trials Group (CCCTG) Winter Meeting in Lake Louise. Sites in Alberta, Ontario and Saskatchewan have expressed interest in participating.

In addition, discussions are currently taking place with the Hcor Research Institute about conducting LIBERATE at several sites in Brazil. We are excited about initiating this new partnership for LIBERATE and future Canadian studies!

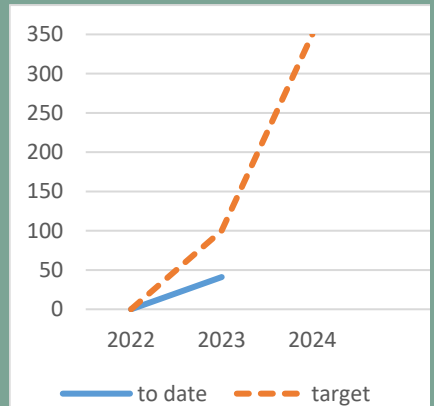
### Participating sites

- Grey Nuns Hospital ICU
- Misericordia Hospital ICU
- University of Alberta Hospital GSICU

### Upcoming sites in 2023

- Sturgeon Hospital ICU
- Rockyview Hospital ICU

### Study Recruitment



### Pilot Study Results presented at ISICEM

Preliminary results from the LIBERATE Pilot study were presented at the 42 International Symposium on Intensive Care and Emergency Medicine (ISICEM) by Sebastian Kilcommons.

A full analysis of pilot study data will be conducted in the coming months with plans to publish a manuscript later this year.

#### Midodrine for the Early Liberation from Vasopressor Support in the ICU

**INTRODUCTION**

- Intravenous (IV) vasopressors for hemodynamic support are a prime indication of treatment in ICU settings [1].
- Midodrine has historically been used for hemodynamic support in non-critically ill patients [2,3].
- Previous studies evaluating the use of midodrine in ICU settings have been small in scale and limited regarding inclusion [4].
- LIBERATE will evaluate the expanded role of midodrine for any vasoplegic patient in the ICU [5].

**METHODS**

- Parallel group, blinded, randomized, placebo controlled trial
- Eligible adult patients to receive midodrine 10mg every 8h or placebo until 24h post-discontinuation of IV vasopressors
- Primary outcomes: ICU length of stay (LOS)
- Secondary outcomes: all-cause mortality at 90 days, hospital LOS, length of IV vasopressor support, re-intubation of IV vasopressors, rates of ICU re-intubation, and occurrence of ACS
- Health economic outcomes: associated healthcare costs and evaluation of cost-effectiveness

**LIBERATE Program Timeline**

**RESULTS OF PILOT STUDY**

- Single-centre, concealed allocation, parallel group, blinded pilot RCT conducted at the University of Alberta Hospital
- 20 subjects enrolled over 26 months, 1 subject withdrew consent
- 11 subjects assigned to midodrine arm, 9 assigned to placebo
- Mean age was 57 across both treatment groups
- No safety events observed in either treatment group

**DEMOGRAPHICS & OUTCOMES**

Parameter	Midodrine (n=11)	Placebo (n=9)
Age (mean)	57.0	57.0
Female (%)	0	0
APACHE II (mean)	20.0	20.0
SOFA (mean)	6.0	6.0
LOS (mean)	12.0	12.0
ICU LOS (mean)	10.0	10.0
Hospital LOS (mean)	15.0	15.0
Mortality at 90 days (%)	0	0
Re-intubation (%)	0	0
ACS (%)	0	0

**NEXT STEPS**

- Multi-centre RCT initiated in September 2022 in Edmonton AB
- 3 centres have been confirmed in Edmonton
- Recruitment continuing and currently above previous target figures
- Number of centres expected to increase in the forthcoming months following editorial expansion into 2023

**LIBERATE Recruitment Targets**

**REFERENCES**

1. Surviving Sepsis Campaign: International Guidelines for Management of Sepsis and Septic Shock: 2020. Crit Care Med. 2020;48(8):e201-603. doi:10.1097/CCM.0000000000004128.
2. American College of Chest Physicians. Critical Care Chest Book: Management of Acute Respiratory Failure. Chest. 2006;129(3):620-632. doi:10.1093/chest/129/3/620.
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4. American College of Chest Physicians. Critical Care Chest Book: Management of Acute Respiratory Failure. Chest. 2006;129(3):643-652. doi:10.1093/chest/129/3/643.
5. American College of Chest Physicians. Critical Care Chest Book: Management of Acute Respiratory Failure. Chest. 2006;129(3):653-662. doi:10.1093/chest/129/3/653.

Contact Information: Sebastian Kilcommons, sebastian.kilcommons@ualberta.ca  
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Site	Total enrolled
Grey Nuns Hospital ICU	25
Misericordia Hospital ICU	9
U of A Hospital GSICU	7

For more information contact:

Oleksa Rewa  
Principle Investigator  
[rewa@ualberta.ca](mailto:rewa@ualberta.ca)

Dawn Opgenorth  
Project Manager  
[dawno@ualberta.ca](mailto:dawno@ualberta.ca)



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