

## ATTRACT Trial to Explore Treatment of Acute Proximal Deep Vein Thrombosis



**S**IR member Suresh Vedantham, MD, is developing a proposed multicenter NIH funded clinical trial evaluating the ability of catheter-directed thrombolysis (CDT) to reduce the incidence and severity of post-thrombotic syndrome in patients with acute proximal deep vein thrombosis (DVT).

*Suresh Vedantham, MD* The study is titled “Acute Venous Thrombosis: Thrombus Removal With Adjunctive Catheter-Directed Thrombolysis” (ATTRACT) and is planned as a phase III, multicenter, open label, prospective randomized controlled trial.

ATTRACT aims to address an important national health question,” explains Vedantham, the study’s principal investigator. “Post-thrombotic syndrome is the most common complication of acute

DVT and causes chronic, lifestyle-limiting symptoms such as limb swelling, pain, limb heaviness, claudication, stasis dermatitis, and/or skin ulceration in an estimated 62,500 – 150,000 cases each year. This disease burden causes significant impairment in quality of life and might be preventable using an innovative interventional therapy.”

In November 2005, the study’s Steering Committee submitted a formal letter-of-intent to the National Heart Lung and Blood Institute (NHLBI) requesting permission to submit a grant proposal for ATTRACT. This request was approved in early December. The Steering Committee plans to submit a grant application for ATTRACT to the NHLBI before its June 1, 2006, deadline.

ATTRACT is being sponsored by the Washington University School of Medicine. The multidisciplinary ATTRACT Steering *continued on page 21*

## Interventional Oncology Symposium: Standing Room Only

**S**IR Foundation’s Innovation in Research in Interventional Radiology (IR)<sup>2</sup> meeting and Interventional Oncology Symposium, developed this year in collaboration with RSNA, opened to a standing room only crowd on the first day of the weeklong multi-disciplinary meeting. Michael C. Soulen, MD, and Gerald D. Dodd, III, MD, chaired the meeting which included presentations by more than 50 national and international experts. In addition to topic-directed lectures, approximately 100 original scientific papers were presented. Over 400 individuals attended the meeting, held in Chicago, IL, November 28-December 2, 2005.

The Symposium provided a unique opportunity for clinicians and basic scientists from academia, private practice, government and industry to come together for two days of state-of-the-art clinical presentations followed by two and a half days of cutting edge research in the basic science of interventional oncology. The first two days of the meeting focused on the clinical applications and treatments for liver, kidney, bone and lung tumors. The second half of the meeting provided an opportunity for cross-fertilization between researchers in fields including:

- Interventional radiology
- Functional imaging
- Oncology
- Nanotechnology
- Angiogenesis
- Basic science
- Clinical science and related disciplines.

### Topics discussed included:

- Tumor biology
- Tumor imaging
- Image guidance for oncologic intervention
- Tumor ablation science
- Materials science in drug delivery and catheter directed therapies and animal models for image guided cancer therapy. ❖

If you missed (IR)<sup>2</sup>, some of the same information will be covered at the World Conference on Interventional Oncology<sup>SM</sup>, to be held in Italy in June. For more information on that meeting, visit [www.wcio2006.com](http://www.wcio2006.com).

## Collaborative Programs Expand Learning Opportunities

On November 11-12, 2005, SIR jointly sponsored a two-day symposium with the Radiology Business Management Association (RBMA), which explored innovative business developments and complex coding issues in the field of IR. Held at the Sanibel Harbour Resort & Spa in Fort Myers, FL, the symposium was attended by more than 100 individuals on each of the two days.

The first day brought together professionals from a variety of practice settings, including SIR member Romi Chopra, MD, Director of Midwest Institute for Minimally Invasive Therapies, who charmed the audience with witty, down to earth examples from his own practice. The entire day offered practice managers and interventional radiologists information on planning and development, legal and financial issues, and nuts-and-bolts information on establishing freestanding centers and collaborative relationships.

Day two included vital coding information specific to IR procedures. Attended by coders, accounting managers and physicians themselves,

the goal of this session was to increase anatomical understanding and familiarity with complex procedures, so as to provide increased revenue and efficient claims processing.

SIR is proud of the alliances it has forged with other organizations serving the interventional radiology community. These jointly sponsored meetings solidify these relationships and broaden our reach among IR professionals.



*Dr. Chopra charms symposium attendees.*

We encourage your participation in the jointly sponsored programs with which SIR is involved; be sure to review upcoming jointly-sponsored meetings in the Education section of SIR's Web site. When we partner with other organizations, we review the content and the speakers, and are confident that the information provided

will enhance your learning – and broaden your horizons. Join us at one of these collaborative sessions soon!

For more information on RBMA, visit <http://rbma.org/>. ❖

### ATTRACT *continued from page 19*

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**Suresh Vedantham, MD**

Committee is chaired by Samuel Z. Goldhaber, MD, of Harvard Medical School. The SIR Foundation's Cooperative Alliance for Interventional Radiology Research (CAIRR) clinical trial network is participating as a collaborating institution in the development and execution of the trial.

Approximately 15 clinical sites are expected to enroll 550 patients in ATTRACT. Trial enrollment and 12-month follow-up are expected to take 3.5 years. ❖

### Interested in being a study site for ATTRACT?

Study investigators are looking for interested sites to participate in ATTRACT. ATTRACT will enroll approximately 550 patients with imaging-proving, symptomatic, acute proximal DVT.

Interested sites that have a high clinical DVT volume, an ability to recruit acute DVT patients, and a willingness to randomize them to either CDT and anticoagulation or anticoagulation alone are encouraged to send an email to [ATTRACT@SIRFoundation.org](mailto:ATTRACT@SIRFoundation.org) and a study investigator will contact you. Alerting the Foundation to your interest is vital in ensuring the grant is obtained from NIH.