Treatment Of Stroke reCurrence in Cerebral Amyloid Angiopathy with TraneXamic Acid (TOSCCAA- TXA)

ACTRN12624001477516

Status	RECRUITING
Phase	Phase 2
Sponsor	Alfred Health
Enrollment	60 participants

Plain Language Summary

Cerebral amyloid angiopathy (CAA) is a condition where a protein called amyloid builds up in the walls of blood vessels in the brain, making them fragile and prone to bleeding. People with CAA have a significantly elevated risk of recurrent brain bleeds (intracranial haemorrhages), which can be life-altering or fatal. Currently, there are very few treatment options available to reduce this risk.

This study (called TOSCCAA-TXA) is testing whether tranexamic acid (TXA) — a medication commonly used to reduce bleeding in surgery — is safe and well-tolerated when used in patients with CAA who have had a recent brain bleed. Participants will take either 1 gram of TXA three times daily or a matching placebo for six months, and will have MRI scans and blood tests at the start and end to track changes. The study is focused primarily on safety and feasibility at this stage.

You may be eligible if you are aged 50 or older, have a diagnosis of probable CAA based on standard criteria, have had a symptomatic brain bleed in the past six months, and are able to have MRI scans. People with significant kidney impairment, epilepsy, a recent heart attack or blood clot, or who are unable to provide consent would not be eligible.

Key Eligibility Criteria

Inclusion (3)

- • Diagnosis of probable CAA by modified Boston Criteria 2.0 with recent symptomatic intracranial bleeding (ICH, cSAH, or both) within 6 months prior to randomisation
- • At least 2 or more of the following strictly lobar haemorrhagic lesions on T2*-weighted MRI, in any combination: ICH, CMB, cSS/cSAH foci
- •Able to have MRI at baseline and 6 month follow-up

Exclusion (9)

- •Unable to have MRI or any contraindications to MRI
- •Renal impairment (eGFR < 30 mls/min/1.73m2)
- •Epilepsy
- •Known fibrinolytic condition
- •History of unprovoked venous thromboembolism (VTE) (e.g. deep vein thrombosis (DVT), pulmonary embolism PE), Cerebral Venous Sinus thrombosis (CVST)) within 12 months of randomisation

... and 4 more (see full listing online)

Locations (2 total)

The Alfred - Melbourne, VIC, Australia
Royal Melbourne Hospital - City campus - Parkville, VIC, Australia