



The TRACK trial: Improving cardiovascular health of chronic kidney disease patients with blood-thinning medication – Oct 2019



The George Institute
for Global Health

Facts:

- Globally, more than 30.5 million people have advanced chronic kidney disease, with another 3 million people receiving dialysis for end-stage kidney disease.
- Over 50% of these people die due to diseases relating to heart and blood vessels, but are mostly excluded from testing blood-thinning medications, leading to a large evidence practice gap.
- As a result, it is unknown whether blood-thinning medications, which have been shown to improve outcomes in the general population, are beneficial in patients with kidney disease.

Project cycle:

2019 – 2025

Partners:

*The George Institute for Global Health
Kidney Health Australia*

Supporters:

*The National Health and Medical
Research Council (NHMRC), Australia
Bayer AG*

Contact:

To find out more about the TRACK trial, its principal investigators A/Prof Sunil Badve and Prof Martin Gallagher, or The George Institute for Global Health, please contact Tina Wall +61 410 411 983 or twall@georgeinstitute.org.au

Background:

- Patients with advanced stages of chronic kidney disease, including those receiving life-sustaining dialysis, have a significant burden of diseases relating to the heart and blood vessels, known as vascular disease, which shortens their life and reduces quality of life.
- Blood-thinning medications are used to prevent blood clots in people with heart and vascular disease, but these medications increase the risk of severe bleeding.
- Due to the increased dangers of both clotting of blood vessels and severe bleeding, treating patients with blood-thinning medications is challenging.

Aims:

- TRACK aims to evaluate whether low-dose use of the blood-thinning medication, rivaroxaban, reduces the risk of death and major events due to heart and vascular disease, such as heart attacks and strokes, with an acceptable bleeding risk.

Methods:

- TRACK is a randomised controlled trial that will enrol 1,972 patients from seven countries with advanced stages of chronic kidney disease, including those receiving dialysis, who also have existing heart or vascular disease.
- Participants will be randomly assigned to receive either low-dose rivaroxaban or a placebo, in the form of identical tablets.
- Neither doctors nor participating patients will know which treatment they have been assigned.

Impact:

- TRACK will establish, for the first time, the balance of benefits and harms from blood-thinning medications in patients with advanced stages of chronic kidney disease and end-stage kidney disease; and thus address a significant evidence gap and important area of unmet needs.
- If the trial demonstrates benefit, it will provide doctors with a new treatment strategy to reduce heart attack and stroke, and associated death in patients with chronic kidney disease.

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