

FAQs For Surgical Colleagues

Why are we performing this trial?

• To find out which is better: total intravenous anesthesia (TIVA) or inhaled volatile anesthesia (INVA)

o TIVA and INVA have been used safely and interchangeably for decades, but we don't know which leads to improved quality of recovery for surgical patients. To answer this foundational question, we have received \$30 million from PCORI.

What are the interventions?

• TIVA or INVA

o Patients will be randomized to receive one of these.

What are the outcomes?

• Quality of recovery on day 1 and intraoperative awareness

- o Secondary outcomes include delirium, disability, respiratory failure, acute kidney injury, postoperative activity and sleep, and all-cause mortality.
- O Based on previous research we have conducted, unintended patient movement occurs in roughly 15% of patients who receive INVA (*JAMA*. 2019;321(5):473-483). This movement is generally mild and does not interfere with the conduct of surgery. We will be tracking severe intraoperative patient movement (i.e. movement that has a negative impact on the conduct of surgery) to determine if this occurs more commonly with INVA or TIVA.

How do the results of this trial impact you?

• You will find out which anesthetic technique improves your patients' recovery experiences.

o Findings will influence perioperative decision making and anesthetic management for millions of surgical patients.

What changes should I expect in the operating room if my patient consents to this trial?

No changes

O Both anesthetic techniques are standard of care and there should be no change in your operating conditions, turnover, or efficiency. As part of this trial, we will be seeking feedback from surgeons and in-room anesthesia clinicians about any unanticipated issues that may arise.

Will the THRIVE trial interfere with any trials I am involved with?

Unlikely

O Patients enrolled in concurrent trials with overlapping interventions or assessments will be excluded. We will screen patients for involvement in other trials that may prevent them from participating.

Will a surgeon be informed if their patient consented for enrollment?

• Yes

O Patients who are eligible for enrollment will be contact by phone or email. Patients will provide consent prior to the day of surgery. We will notify the attending surgeon and provide them with trial information and the contact information for the Site PI, who can address questions. Patients will be blinded to the intervention, so we ask that surgeons maintain blinding.

What if I do not want my patient enrolled in THRIVE?

• We will respect this request

o If there are any concerns about participation for any patient, please contact the Site PI. We intend for this to be a collaborative and positive experience for our patients and surgical colleagues.

What if my patient asks me questions about THRIVE or provides feedback about their experience?

Contact us

We have several resources with additional details about the trial at https://mpog.org/thrive-info/.
Your patient may email the THRIVE research group at anest-THRIVEStudy@email.wustl.edu if they have any questions or feedback about the trial.

Thank you for your participation!

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