



**ACHIEVE trial:** Improving heart outcomes in dialysis patients – August 2019



The George Institute  
for Global Health

### **Facts:**

- Globally, approximately 2.5 million people receive dialysis for end-stage renal disease.
- 650,000 new patients start dialysis each year.
- 40% of patients that start dialysis die within three years.
- The most common cause of death in patients receiving dialysis is cardiovascular disease (>40% of all deaths).

### **Background:**

- Individuals on dialysis are at risk of developing heart problems such as high blood pressure, heart attacks, and heart failure.
- Treatments to reduce the risk of heart problems in dialysis patients are urgently needed.
- Spironolactone is a highly effective pill used to treat high blood pressure and heart failure in non-dialysis patients. It blocks a hormone that causes high blood pressure which damages the heart.

### **Aims:**

- The goal for this intervention is to determine if spironolactone reduces death and/or hospitalisation due to heart failure in patients on dialysis.
- The project will also assess the safety and efficacy of spironolactone in patients receiving chronic dialysis.

### **Methods:**

- The ACHIEVE trial plans to randomise over 1,000 eligible patients across Australia, New Zealand, Malaysia and China.
- Randomised participants will receive a study supply of either 25mg of spironolactone or identical placebo tablets.
- Participants will be followed up on a six-monthly basis through face-to-face/telephone interviews or mail-based/electronic questionnaires.
- Information gathered at each follow up will include: outcome assessments, safety assessments, and drug adherence.

### **Impact:**

- Currently, there are no accepted, proven treatments to reduce cardiovascular morbidity and mortality in dialysis patients.
- Advanced chronic kidney disease patients are underrepresented in clinical trials examining treatments for cardiovascular disease.
- This research aims to bridge the gap in need for therapies that reduce the burden of cardiovascular illness in dialysis patients.



### **Project cycle:**

2018 - 2023

### **Partners:**

The George Institute for  
Global Health, Australia  
Population Health Research Institute,  
Canada

### **Supporters:**

The George Institute for Global Health  
National Health and Medical Research  
Council (NHMRC), Australia

### **Contact:**

To find out more about this study, its principal investigator Professor Martin Gallagher or The George Institute for Global Health, please contact Tina Wall +61 410 411 983 or [twall@georgeinstitute.org.au](mailto:twall@georgeinstitute.org.au)

### **The George Institute For Global Health:**

We're improving the lives of millions of people worldwide through innovative health research. Working across a broad health landscape, the Institute conducts clinical, population and health system research aimed at changing health practice and policy worldwide.