Thrombosis Research Institute

Innovators in Thrombosis

TRI Thrombosis Research Institute

www.tri-london.ac.uk

Our mission

The Thrombosis Research Institute is an independent academic research charity, with headquarters in London, dedicated to bringing new solutions to patients for the detection, prevention and treatment of blood clots.

We have a 50-year track record being at the forefront of thrombosis research, developing methodologies and testing innovations along the way.

Today TRI remains one of the few academic institutes solely dedicated to working in thrombosis. Our pioneering research programme, across medical disciplines and across the world, continues to provide breakthrough solutions in thrombosis.

We are and have always been academically independent, and our research is conducted according to the highest ethical standards.

Our heritage

Professor Vijay Kakkar OBE, Founder Director

22 March 1937 – 5 November 2016

Our programme of research was established in the 1960s and the thrombosis research group was the first to describe a natural history of deep vein thrombosis. Our work has changed the lives of those at risk of thrombosis.

Global research is not new to TRI. In 1975, we ran an international multicentre trial, involving 4,121 patients in 28 centres, which resulted in a major breakthrough with the use of fixed low doses of heparin before surgery. This was followed in the late 1970s with research on prevention using unfractionated heparin and the pioneering use of the low molecular weight heparins in the 1980s.

On the basis of this work, the Institute was officially opened in London, UK in 1989 by the then Prime Minister Margaret Thatcher.

The next leap forward

Today our laboratory work focuses on biomarkers to identify individuals who are at risk of thrombosis, long before symptoms develop.

We are also working on understanding the pathology that links cancer with venous thromboembolism and developing population-level strategies, such as new vaccines, with the potential to prevent atherosclerosis.

We are optimistic that our ongoing research will yield groundbreaking results, further advancing patient outcomes and improving quality of life.

Pioneering partnerships

TRI is a world leader in the field of real-world outcomes research, developing and executing pioneering global programmes. Our success comes through partnership with a network of more than 2,500 research centres in around 40 countries. Bringing the quality of our data and the rigour of clinical trials to real-world studies, our operation models have extended quality research to under-represented countries, care settings and patients.

Our reputation for high quality, rigorous research and our history as an international collaborator means we are able to convene the leading minds in medicine, including steering committees of the highest calibre.

Working in partnership with colleagues throughout the world as innovators in thrombosis, our work advances patient care and improves outcomes, thereby reducing healthcare costs and saving millions of lives.

Ongoing studies

Through our prospective registries, we seek to create new data to improve healthcare delivery and patient outcomes.

Our goal is to advance the science of real-world enquiry so that the value of real-world data is realised and becomes a critical link in the chain of evidence.

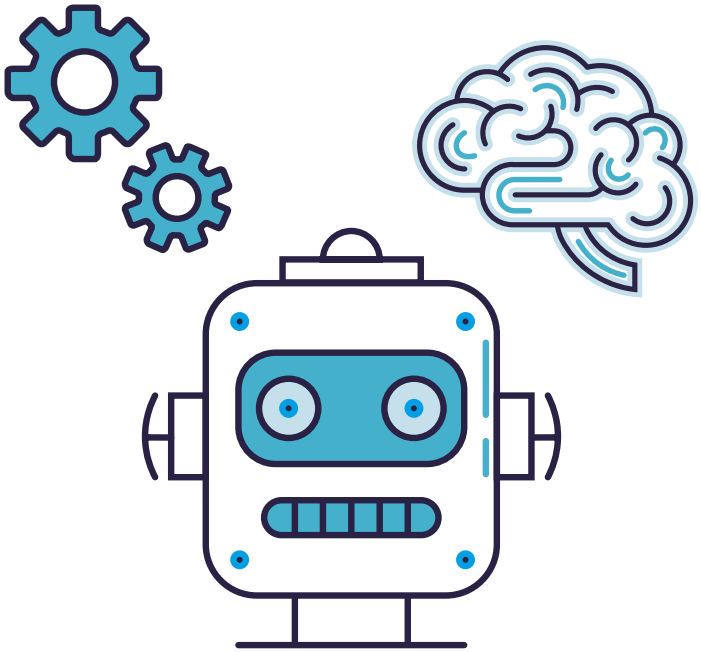
AF Garfield global anticoagulant registry in the field	Prospective disease registry of adult patients with newly diagnosed atrial fibrillation (AF) (less than 6 weeks' duration) and at least one investigator-determined risk factor for stroke. Overall 57,262 patients from 35 countries were enrolled between 2010 and 2016 and have now been followed up for a minimum of 2 years.
VTE Garfield global anticoagulant registry in the field	Prospective disease registry of 10,874 adult patients treated for acute venous thromboembolism (VTE) at centres in 28 countries. Patients will be followed up from a minimum of 3 years.
River RIVaroxaban Evaluation in Real life setting	Prospective registry of adult patients with newly diagnosed AF (less than 6 weeks' duration) and at least one investigator-determined risk factor for stroke who are treated with rivaroxaban. Approximately 5,000 patients from 17 countries will be enrolled and followed up for a minimum of 2 years.
PERCEIVE	Prospective observational registry of VTE in 5,009 adults with newly diagnosed cancer of the breast, ovary, colon/rectum, pancreas, lung or prostate. Patients were recruited from 6 countries and followed up for up to 11 years.
Breach	Prospective observational study of biomarkers for thromboembolism in 100 patients with advanced breast cancer treated with chemotherapy who were followed up for 2 years.
Frontline2 FUNDAMENTAL RESEARCH IN ONCOLOGY AND THROMBOSIS	A contemporary global survey to evaluate how clinicians perceive the risk of VTE in cancer patients and to provide insights into current strategies for thromboprophylaxis and VTE treatment.

Our vision for the future

TRI is at the forefront of emerging health technologies, including artificial intelligence and machine learning, which are providing data-driven insights on clinical care. We have developed GARFIELD-AF risk calculator, a web-based tool that assesses the risk of mortality, ischaemic stroke and major bleeding to help clinicians judge whether the risks of anticoagulation outweigh the benefits in patients with a high risk as well as those with a very low risk of stroke.

We envision a future using intelligent modelling and "big patient data" from apps and web-based tools to develop cutting edge models for connected care.

Our ambition is to go beyond traditional methodologies and data sources to explore the potential of clinical, genetic and phenotypic data in the era of digital technology and personalised medicine.



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