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OxPLoreD - Participant Information Sheet (Oxford-Specific Version)

Oxford Pre-cancerous Lymphoproliferative Disorders: Analysis and Interception study

Information Sheet

We would like to invite you to take part in our research study. Joining the study is entirely voluntary. Before you decide, it is important that you understand why the research is being done and what it would involve. Please take time to read this information and discuss it with others if you wish. The first part of the information tells you the purpose of the study and what will happen to you if you take part. Then we give you more detailed information about the conduct of the study. If anything is not clear, or if you would like more information, please ask us. You can take as much time as you need to think about joining the study. If you don't want to join, you don't have to.

What is the purpose of the study?

The purpose of the study is to learn more about people with early stage lymphoproliferative disorders. These are conditions where the immune system is not entirely normal and may produce abnormal lymphocytes (a type of white blood cell) or proteins in the blood. The majority of individuals with these abnormalities do not experience any serious effect on their health. However, a small number go on to develop more serious conditions, such as blood or bone marrow cancers. Out of a hundred people with the pre-cancerous lymphoproliferative disorders, only one or two per year will go on to develop blood or bone marrow cancer.

Currently we do not have a reliable way to predict which individuals with these disorders are more likely to develop a blood or bone marrow cancer. By studying a large group of individuals over time we hope to discover more about what factors might predict progression. We may be able to identify markers which identify individuals who are more or less likely to develop blood or bone marrow cancer. These markers might be particular symptoms, gene changes called mutations or levels of particular molecules or cells in the blood or bone marrow. In the longer term this may enable us to identify those people who would benefit from

certain types of treatment or from receiving treatment at an earlier stage and also to confidently reassure those who will never progress.

In addition to looking for these markers we will also collect information about:

- What it is like to live with one of these conditions (by asking you to complete 'Quality of Life' questionnaires)
- How many people with these conditions develop other significant medical conditions, such as serious infections, thrombosis (blood clots) or other types of cancer.

Why have I been invited?

Your doctor will already have explained to you that you have one of the following disorders but do not require treatment:

Cohort 1
- Early stage Chronic Lymphocytic Leukaemia (CLL)
- Monoclonal B-cell Lymphocytosis (MBL),

Cohort 2
- IgM Monoclonal Gammopathy of Uncertain Significance (MGUS)
- Early Stage Waldenstroms Macroglobulinaemia (WM)

Cohort 3
- Monoclonal Gammopathy of Uncertain Significance (non-IgM MGUS)
- Smouldering Myeloma (SM)

As explained previously, some individuals with your condition can develop more serious conditions which do need to be treated. You have been invited to take part in the study so that you can be monitored and data can be gathered about your condition over a period of up to 5 years.

We aim to recruit approximately 1650 participants, all of whom have one of these early lymphoproliferative conditions. Any study participants who experience worsening (progression) of their condition during the study will have additional samples and information collected at that point.

Doctors and scientists will study blood and bone marrow samples (optional), and compare samples from people in whom the disorder has worsened (progressed) and people in whom the disorder has stayed the same (stable).

This research will help doctors to predict which groups of people might be at increased risk of needing cancer treatment in the future. This information might also help to develop new treatments for blood and bone marrow cancers.

It is up to you if you wish to take part in the study. The study will be fully explained in this leaflet including what you need to do if you agree to take part. While you're on the study you will continue to receive any standard monitoring of your condition that you're already receiving. So, for example, if you're already having clinic visits or telephone follow-up appointments every 6-12 months those will continue as normal. Or if the only follow-up you're currently receiving is through your GP you'll continue to access care from your GP as usual. Any visits to take part in the study are in addition to, not instead of, your usual care.

What will happen to me if I decide to take part?

If you're interested in taking part the study team will firstly confirm you are potentially eligible and arrange your first study visit. At this visit you're welcome to ask us any questions, then, if you're happy to take part, we'll ask you to sign a consent form. We will then ask you some questions and carry out basic clinical assessments (e.g. physical examination) to confirm you are eligible for the study.

Please bring to this visit any letters or copies of results you have received from your **current care team** including details that **confirmed your original diagnosis**. These are required to confirm the specific diagnosis you have been given. If we are unable to confirm your original diagnosis at this first study visit, we will perform these tests as part of the screening procedures. It means that we will be able to confirm that you are eligible only after results come back (two to four weeks). Please speak to the study team if are unsure what letters and blood results you need to bring with you.

To confirm your eligibility, we will need to perform a physical examination and ask you about any medications you're taking and any other medical conditions you have been diagnosed with. If you are a woman and able to have children you will have a blood or urine pregnancy test to confirm that you're not pregnant.

After we have confirmed your eligibility for the study we will carry out some initial study assessments:

- Record your height & weight
- Take blood samples to be sent to the hospital laboratory for standard tests. A urine sample is also needed for participants with MGUS, WM or SM.
- Take blood samples to be sent to specialist research laboratories for research tests
- For individuals with MBL, Stage A CLL, IgM MGUS and WM, a saliva sample will be taken (using spit); for participants with MGUS or SM, we will use a peripheral blood sample instead.
- Ask you to fill-in some quality of life questionnaires

Either on the same day or within the next 8 weeks you may also have:

- A bone marrow biopsy to take a sample of liquid (aspirate) from your bone marrow. This is optional for all participants however participants in cohorts 2 & 3 may need to have a bone marrow as part of their standard of care (see *"What tests will I have if I choose to take part?"* for further info)
- Imaging: a CT scan or MRI scan. This is optional for cohort 1 and 2.
  If you've been diagnosed with IgG MGUS, IgA MGUS or smouldering myeloma (cohort 3) and you haven't had an MRI, PET-CT or low-dose CT scan in the preceding year, you will need an MRI scan to exclude myeloma.

You might already have had a low- dose CT, CT, PET-CT or MRI scan as part of your routine care, particularly if you have been diagnosed with SM or MGUS. If this is the case and the previous scan was in the last year we will ask for a copy of the report from the previous scan instead of (or as well as) you having a further scan.

There is more specific detail about the bone marrow aspirate, scans and other research assessments later in this information sheet ("*What tests will I have if I choose to take part?"* section)

After the first visit we would like to see you again around 2 years later and 5 years later. We will also contact you by phone after 1 year to confirm you're still happy to be involved and answer any questions you have. The visits at year 2 and year 5 will consist of:

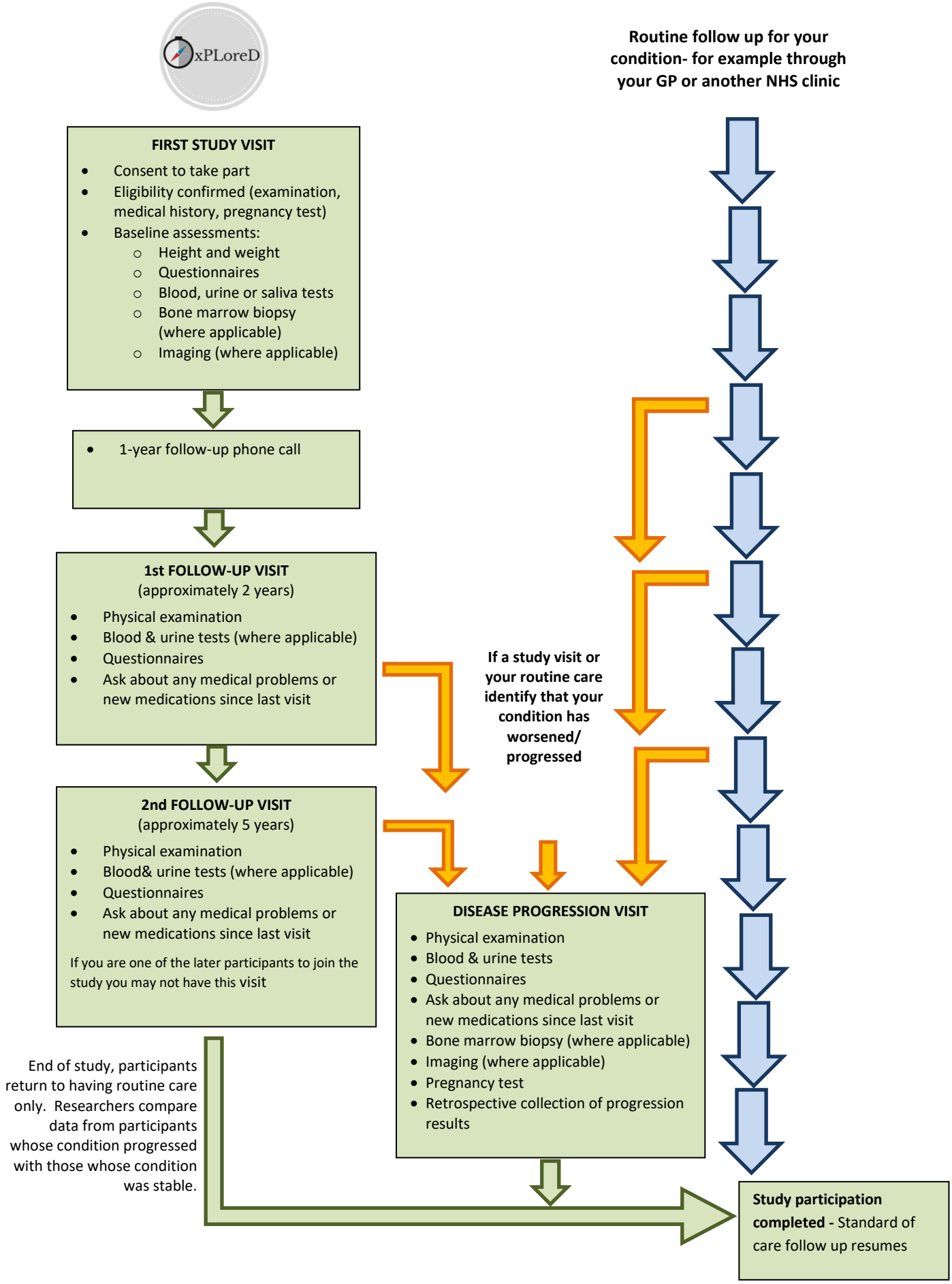
- A physical examination
- Blood samples
- Urine sample (participants with MGUS, WM or SM only)
- Completion of quality of life questionnaires
- Asking you about any significant new medical conditions since your last visit and any new medications you're taking

After the year 5 visit your involvement in the study will be over. Please note that if you are one of the later participants to join the study you may not have a year 5 visit, as the study may end before you have taken part for 5 years. If this is the case we will write to you to let you know that you no longer need to attend any study visits.

You will continue to receive any standard monitoring for your condition in between your study visits. **If at any time you are told that your condition has worsened/ progressed, please contact the study team to let us know.** If this is the case we would like to see you again soon instead of waiting until your next scheduled visit. It is important that we know about all participants whose disease progresses, so that we can collect information and samples to study the progression of these conditions. If ever your doctor decides that you require treatment, then we would like to collect research samples before you start, if possible, so please contact us as soon as you can. We will then arrange a convenient time in the next few weeks when you are able to attend a disease progression visit.

A diagram of the study visits is included on the next page, followed by more detailed information about the assessments.

OxPLoreD flowchart: if you choose to take part the study will happen in parallel with routine care for your condition. Study visits are shown on the left and routine care on the right



What will happen if my condition progresses during the study?

If your condition progresses we will book you in for a 'disease progression' visit. This will include the same tests and assessments as previous visits as well as a CT or MRI scan and a bone marrow aspirate. Bone marrow and CT/MRI scans may be required as part of routine care and these would be completed it you take part in the study or not – please see the "*What tests will I have if I choose to take part?"* section below for full details of the procedures that are required as this will be different depending on the which cohort you are in. If you are a woman and able to have children you will have a blood or urine pregnancy test before the scan and biopsy to check that you're not pregnant.

As mentioned for the first study visit the type of scan you have depends on your diagnosis:

- Participants with MBL,CLL, IgM-MGUS or WM will have a CT scan,
- All other participants will have an MRI scan

If your routine care team have diagnosed disease progression, we will also ask you or your doctors to share copies of your blood test results from the date when this was diagnosed.

After the disease progression visit most participants will have completed their involvement in the study and will then only be followed-up through standard NHS care. In some cases where a participant's condition has progressed, but they still do not meet criteria for treatment they may be asked to continue with the study (if willing) for up to 5 years. If your condition progresses the research team will explain what this means for your continued follow-up.

What tests will I have if I choose to take part?

As detailed in the previous sections you will have several additional tests if you take part. Here is some more information about what each test involves:

- **Blood samples:** Up to 60ml (12 teaspoons) of blood will be taken at each study visit. Several separate samples are required but they will all be taken at the same time via a cannula placed into a vein in your arm, to minimise any discomfort or inconvenience. The blood samples will be sent to both hospital and research laboratories to monitor your condition and to conduct specialised research tests.
  If you have recently had blood tests performed as part of your routine care we may be able to reduce the number of blood samples needed by using the results from your previous tests. If your routine care team have given you copies of any previous lab results it would be helpful if you could bring these with you to the visit.
- **Urine samples:** You will also be asked to provide a urine sample at each study visit (this applies to participants with MGUS, WM or SM only). The results of the urine test are used in conjunction with blood tests to monitor your condition. ***If you have recently had a urine test as part of your routine care you may not need another. If your routine care team have given you copies of any previous lab results it would be helpful if you could bring these with you to the visit.***
- **Saliva sample:** A sample of saliva will be taken at the first visit only. We will ask you to spit into a small sample tube to collect DNA from normal, healthy cells. For participants with IgG or IgA MGUS or SM we will not take a saliva sample but will instead test this from a blood sample.
- **Quality of life questionnaires:** At each visit you will be asked to complete a series of questionnaires. These will take around 10-15 minutes to complete and will ask a series of questions about your quality of life and how your condition affects your day to day living.
- **Bone Marrow Samples:**
  The samples will allow us to record the exact nature of your disorder and to look for any differences between individuals whose condition does progress compared to those who do not. See "What is a bone marrow test and how is it done?" below for more information about what is involved.

Depending on which cohort you are in, you may have to have bone marrow samples taken as part of your routine care and these would need to be taken if you participate in the study or not.

For this study, we are also giving you the option to provide additional bone marrow aspirate samples for the purposes of the study at the first study and progression visit (if occurring). In order to do this, we are asking for your consent. If you consent to the additional bone marrow samples being collected then every effort will be made for these samples to be collected at the same time as your routine bone marrow procedure. If this isn't possible, or if you aren't having a bone marrow procedure as part of your routine care then an additional bone marrow procedure will be required to take the additional bone marrow aspirate sample. Providing these additional bone marrow aspirate samples is optional and if you decline this, you can still take part in the study. See below for what bone marrow samples are part of your routine care.

Study Entry:

- Cohort 1:
  A bone marrow sample is not considered part of your routine care at the point of study entry but will be required as part of your routine care if your condition progresses.

- Cohort 2 & 3:
  A bone marrow sample is part of your routine care at the point of study entry. You may have already had a bone marrow sample before you enter the study so this won't need to be repeated unless you consent for the additional bone marrow aspirate samples to be taken.

Progression visit:

- All cohorts:
  If your condition progresses you would have a bone marrow test as part of your routine care.

- **Imaging (CT or MRI scan):**

As with the bone marrow samples, depending on which cohort you are in will change if you need to have imaging as part of your routine care. For this study we are also giving you the option to have additional scans for the purposes of the trial if you wish to consent. See below for what is part of your routine care and what scans will be optional.

Study Entry:

- Cohort 1 & 2
  CT Scan – this is not considered part of your routine care and an additional research scan will be completed if you consent. However, in the event that you have had CT imaging before consenting to the study this will not be repeated, if the previous scan was within 12 months of study entry and a copy of the report is available.
- Cohort 3
  MRI - If you have already had a standard of care diagnostic low-dose CT, MRI or PET-CT scan before consenting to the study this will not be repeated if it is possible to obtain a copy of the scan report. If it is not possible to obtain a copy of your routine diagnostic scan report (or if scan was completed more than 12 months before study entry) an additional MRI will be completed as a research assessment. This scan is not optional and is a requirement of the study.

Progression Visit:

- Cohort 1 & 2
  CT Scan – this is only considered part of your routine care if you progress to needing treatment. If so, a copy of your routine scan report will be collected for the purposes of the study and you will not have any additional scans. If you are not required to have a scan as part

of your routine care if your condition progresses, then an additional research scan will be completed for the purposes of the study if you have consented.

- Cohort 3:
  An MRI is part of your routine care at the point of progressing and if the report (if available) will be collected as part of the trial. If not, a MRI will be performed as part of the trial. This scan is not optional and is a requirement of the study.

As mentioned previously the type of scan will depend on your specific diagnosis, the research doctor or nurse can tell you if you're not sure. A brief explanation of each scan is provided below and the hospital also has more detailed information leaflets available about each type of scan:

- **MRI:** An MRI scan (Magnetic resonance imaging) is safe and non-invasive and does not involve any ionising radiation. It uses strong magnetic fields and radio waves to produce detailed images of the inside of your body. Because of the way it works, you will be asked pre-screening safety questions to help confirm if you are able to be scanned. You will also be asked to remove any metal objects before entering the scanner and you will not be able to be scanned if your body contains any metal object e.g. pacemaker, mechanical implant. The scanner is a short tunnel that is open at both ends. You lie on a bed, which moves into the centre of the tube. As some of the scans are noisy, we ask you to wear provided headphones to protect your hearing and so that you can listen to the researcher when they speak to you. You can speak to the researcher from inside the scanner at any time and they will be stood on the other side of a window just outside the scanner room. It is important to ensure that headphones are fitted properly before the scan starts. They will make sure that you are comfortable during the scan as you will need to stay as still as possible. In preparation for the scan you will also be asked to change into pocketless and metal free "pyjama-style" top and trousers. You may keep your underwear on, but we would ask you to remove any underwear containing metal e.g. underwired bras. Metal jewellery, including body piercings, must be removed. Eye shadow and mascara must also be avoided, since some types contain materials that can interact with the magnetic field. If you wish to wear eye makeup to your scan it will need to be removed before the scan and can be reapplied after. Lockers will be provided to secure your personal belongings and clothing. The scan will last approximately 40 minutes and no longer than 1 hour. If you have a pacemaker, you cannot have an MRI scan.
- **CT:** A CT scan (computerised tomography) involves several X-rays being taken simultaneously from different angles to once again get a detailed picture of the inside of your body. The scanner is an open ring-like structure that looks a little like a giant doughnut. You will lie on a bed which moves through the ring of the scanner collecting images for between 30 and 60 minutes. You will be asked to remove any metal objects and you may be asked to not eat for several hours before the scan. You may also be given a special liquid to drink before the scan, to help give clear images.

What is a bone marrow test and how is it done?

Bone marrow is a sponge-like material found inside the bones of the thigh and pelvis. Blood is made up of three different types of cells: red cells, white cells and platelets. Blood cells are made in the bone marrow. Disorders affecting blood and bone marrow can be assessed by examining a sample of bone marrow.

The abnormal cells that give rise to the pre-cancerous phases of MBL and MGUS are found in the bone marrow. Examining the bone marrow is the best way to study where pre-cancerous lymphoproliferative disorders come from. Studying changes in the DNA of the bone marrow cells and changes in the proteins within these cells will provide essential information on how the disease starts and why it progresses in some patients.

In a bone marrow aspirate test, a sample of liquid bone marrow is taken from the back of the hip bone. The liquid sample will contain all the types of cells from the bone marrow. The bone marrow cells can be examined under a microscope and by additional specialised laboratory tests.

The doctor or nurse will discuss the procedure with you, give you the chance to ask questions and ask you to sign a consent form.

You will be asked to lie on your side and loosen your clothing to expose the back of your hip bone. The doctor or nurse will use antiseptic solution to clean your skin. Local anaesthetic will be injected into the skin overlying the back of the hip bone to numb the area. The local anaesthetic can cause a stinging sensation.

Once the area is numb, a needle will be passed through the skin into the bone and a sample of liquid marrow will be drawn up into a syringe. As the needle is passed into the marrow, some patients experience an intense pressure sensation. Many patients experience a sharp pain as the liquid marrow is drawn into the syringe. This sharp pain lasts a few seconds.

In most cases, less than a tablespoon of marrow is taken.

The procedure takes about 10-15 minutes and you will usually be observed for period of time afterwards. After the procedure, you may feel bruised or aching over the back of the hip bone for a few days.

Are there any disadvantages/risks of taking part?

Overall this study is considered low risk. However, there are some possible disadvantages:

Additional visits: Taking part in this study will require up to 3 extra visits in addition to your routine care. Each visit will last between 1 and 3 1/2 hours. Where possible we will try to arrange all assessments at each visit to take place on a single day. However, this may not always be possible. For example, you may need to return on a different day if there are no scan or bone marrow test appointments available on the day of your other assessments.

NOTE – *during the COVID-19 pandemic, study specific assessments at the first and progression study visits have been made optional to ensure that study visits for participants who don't want to make multiple trips to the hospital are completed in a single trip. See "**Changes to the trial due to COVID-19**" section below.*

Additional Tests: As detailed previously there will be several additional tests. These are generally safe however with any procedure there is a small risk of side effects. Possible side effects from the tests in this study are:

- **Bone marrow aspirate samples**: The common risk is pain during the procedure. To reduce the severity of pain, you will be given a local anaesthetic. There is a very small risk of bruising and bleeding including also internal bleeding. You will have a small dressing placed over the site of the bone marrow biopsy. There is a very small risk of infection and if this happens you will receive treatment for this. (The first bone marrow aspirate sample is optional for participants in cohort 1 – please check with the study team)
- **Blood and saliva samples**: Taking blood samples could cause some pain, bruising or bleeding. The saliva sample should be quick and painless.
- **CT scan:** If you take part in this study you may have up to 2 CT scans and one or both of the scans may be extra to those that you would have if you did not take part. CT scans use ionising radiation to form images of your body. Ionising radiation can cause cell damage that may, after many years or decades, turn cancerous. The chance of this happening to you as a consequence of taking part in this study is 0.2%.
- **MRI scan**: MRI scans do not use ionising radiation but some people find being on the scanner a little claustrophobic. You will be made as comfortable as possible and will be able to speak to a member of staff throughout the scan. You cannot have MRI scans if you have a pacemaker fitted.

Pregnancy/ breastfeeding: Some of the assessments in the study are not recommended during pregnancy. As this is a long-term study we are not asking you to avoid becoming pregnant while you are taking part. However, if you are a woman who is able to have children you will need to take a pregnancy test at the first visit (and progression visit, if your condition progresses) to check that you are not pregnant before you have a scan and biopsy. If you were pregnant at the first visit we could delay your entry onto the study until after

your pregnancy, or if you're pregnant at a progression visit we'll complete the other assessments but miss out the scan and biopsy.

Prohibited medication:

If you are taking any blood thinning medication e.g. Warfarin, then you will be asked to stop taking these prior to the bone marrow samples being taken. You will be asked to stop taking these up to 3 days prior to the procedure and the length of time will depend on the reason you are taking them. Due to the nature of the medication, there is a risk of clots when you stop taking it, however these risks are expected to be very small and the effects of stopping the medication minimal. Please speak to the study team and your current doctor if you have any concerns or further questions about stopping your blood thinning medication. If you are due to have a bone marrow procedure and don't stop taking your blood thinning medication for the required time then we will not be able to take the sample. .

What are the possible benefits of taking part?

There is unlikely to be a direct benefit to you from taking part in this study but the information we get from the study might benefit other people with a similar condition to yours in the future, by increasing our understanding of these disorders and how best to treat them.

As explained in previous sections some of the scans and bone marrow samples are additional to your standard care. There is a small chance that the additional tests might give significant new information about your disorder that was not shown through standard tests. It might also be possible that we find other abnormalities that are not related to your lymphoproliferative disorder and that need to be followed up. If significant new information is discovered, your doctor would be informed and this might benefit you by enabling your doctor to further evaluate the best way to treat you.

Changes to the trial due to COVID-19:

We understand that this might be a worrying time for people with early stage lymphoproliferative disorders. The OxPLoreD study team have been monitoring the situation very closely. Staff working at hospital sites will be taking a range of extra precautions in line with national and local guidelines. This will likely include site staff wearing personal protective equipment (PPE) during visits and additional cleaning procedures at regular intervals. Local site guidelines around social distancing and additional procedures will be outlined to you prior to visits.

We have also amended the protocol to ensure that any assessments that require you to make multiple trips to the hospital are made optional. This ensures that you do not have to make multiple trips to the hospital for the purposes of the study if you do not want to. These changes will continue to be in place for the foreseeable future during and after the pandemic and it will be clearly outlined to you which assessments are being completed at each visit.

Will my GP/ other medical staff who are caring for me be involved?

Your GP will be notified about your participation in this study, we will ask for your consent before we do this. If you are receiving routine follow-up for your condition from any other team (e.g. a routine NHS clinic led by a haematology consultant) we will also contact them, with your permission. We may also request medical information from your GP or clinical care team relating to your lymphoproliferative disorder e.g. a copy of a previously completed scan report or of blood results. Any such transfer of medical information would be governed by standard NHS policies, methods and training for transfer of medical information within the NHS.

What happens to my data, will it be kept secure and confidential?

- Yes. We will follow ethical and legal practice and all information about you will be handled in confidence. This means we will only tell those who have a right or need to know.
- UK data protection regulations require that we state the legal basis for processing information about you. In the case of research, this is 'a task in the public interest.'

- The University of Oxford, based in the United Kingdom is the sponsor for this study. We will be using information from you and from your medical records in order to undertake this study and will act as the data controller for this study. This means that we are responsible for looking after your information and using it properly.
- The University of Oxford will only hold de-identified research data and refer to you via your unique study number (unless you specifically consent to this - please see further detail in the next section about optional provision of your contact details in order to use NHS Digital/ cancer registry services). We will not be able to access identifiable data as this will be held within the NHS as stated below.
- Your rights to access, change or move your information are limited, as we need to manage your information in specific ways in order for the research to be reliable and accurate. If you withdraw from the study, we will keep the information about you that we have already obtained. To safeguard your rights, we will use the minimum personally-identifiable information possible. You can find out more about how the University will use your information by contacting the OxPLoreD study office (telephone: 01865 617087 or email: octo-OxPLoreD@oncology.ox.ac.uk).
- The Churchill Hospital will keep your name and contact details confidential and will not pass this information to the University of Oxford (unless you specifically consent to this - please see further detail in the next section about optional provision of your contact details in order to use NHS Digital/ cancer registry services). The Churchill Hospital will use your name and contact details as needed, to contact you about the research study, and make sure that relevant information about the study is recorded for your care, and to oversee the quality of the study. Responsible members of the University of Oxford, The Churchill Hospital and regulatory organisations may be given access to your medical records for monitoring and/or audit of the study to ensure that the research is complying with applicable regulations. The people who analyse the information will not be able to identify you and will not be able to find out your name or contact details.
- In accordance with the Human Tissue Act, samples that are transferred to a tissue bank are required to be accompanied by the proof of consent for storage. This requires your consent form, which contains your full name, to be sent to the tissue bank. These will be stored appropriately and securely in accordance with their local procedures and regulatory requirements. The Churchill Hospital will keep identifiable information about you from this study for a number of years after it finishes, as per local NHS policies for medical records. The de-identified research data that has been provided to the University of Oxford will also be stored. Currently University of Oxford's policy is to archive research data for 5 years.

When you agree to take part in a research study, the information about your health and care may be provided to researchers running other research studies in this organisation and in other organisations. These organisations may be universities, NHS organisations or companies involved in health and care research in this country or abroad (e.g. Janssen, who are funding this study) and may be included in future educational projects. This information provided to other researchers will not identify you and will not be combined with other information in a way that could identify you. The information will only be used for the purpose of health and care research, and cannot be used to contact you or to affect your care. It will not be used to make decisions about future services available to you, such as insurance.

Use of NHS digital/ cancer registry data to follow-up participants (optional)

If for any reason we lose contact with a participant during the study, we would like to use the NHS database 'NHS digital' and/or national cancer registries to receive some basic information about that participant e.g. to confirm they have moved away or that they have died and the cause of their death. This is entirely optional, and you can choose on the consent form whether you are happy for us to receive information about you in this way. If you agree the Churchill Hospital will pass your full name, NHS number, Date of Birth, Postcode and Gender to the University of Oxford, who will use these details in order to access these services. Your identifiable information will be kept in a separate, secure database away from other de-identifiable data about you in the main study database. This data will be held for up to approximately 1 year after the end of trial and

will be appropriately destroyed according to local University of Oxford policies once the follow up information has been obtained. The University of Oxford will only use your identifiable information for this specific purpose and will not share it with other organisations.

Participation in the National Genomics Research Library (optional)

The University of Oxford have partnered with Genomics England. This partnership aims to improve the understanding of early disorders like CLL and MGUS.

You will be asked if you would like to donate part of your OxPLoreD study blood sample, your genome sequence and your healthcare data for future ethically-approved medical research. No extra blood needs to be taken as we are asking your permission to share part of the study sample that will be taken as part of the standard OxPLoreD study procedures. Participating in the National Genomics Reference Library means giving your permission for a sample of your DNA to undergo a process called whole genome sequencing. This is a process that allows the code of your DNA to be read. Your sequenced DNA and your health data will then be added to the National Genomic Research Library for researchers to use.

This is entirely optional. You will be provided with a separate National Genomics Reference Library participant information sheet and consent form which will explain more.

If you specifically consent to donate part of your OxPLoreD study blood sample to the National Genomic Research Library (NGRL), the University of Oxford will receive a copy of your completed NGRL consent form including your full name, signature and date of birth. The University will send the NGRL consent form with your blood sample to NGRL, after which, the NGRL consent form will not be stored at the University of Oxford. The National Genomic Research Library (NGRL) will also receive your OxPLoreD participant number so that Oxford University researchers can access this data and use it for this research.

Biopsy tissue collection if rare disease progression is identified (optional)

If your condition progresses to a rare form of the disease (Richter's Syndrome high-grade transformation or extramedullary plasmacytoma), you will undergo a biopsy as part of standard NHS care.

If this should happen during your participation in OxPLoreD, we would like to collect some of the standard of care biopsy sample. If you give your permission for this optional aspect of the study, we will use your sample to look for any DNA patterns to explain why this progression happens to some people and not others.

Will I be reimbursed for taking part?

You will not be paid for taking part in this study, however you will be receipted for out of pocket expenses for any visits additional to your normal care e.g. for reasonable travel costs. If you live a significant distance away from the research site we can reimburse you for an overnight stay at a preferred accommodation supplier or reimburse you for a stay at another supplier for the same amount. This should be checked with your study doctor or nurse prior to the study visit.

Please ask your study doctor or nurse for further information about claiming expenses and please note that you will need to provide receipts.

What will happen to any samples I give?

- Samples for routine blood and urine tests will be processed by NHS laboratories as per normal procedures.
- Research samples taken for the purpose of the study will be sent to the Molecular Diagnostics Centre at the John Radcliffe Hospital, where they will be processed and analysed or may be sent to other specialist laboratories for analysis. These research samples will only be labelled with your unique study number and the date the sample was collected. Researchers working with the samples will not be able to identify you.

- A number of specialised tests will be completed on the samples. As this is a long-term research study some of the analysis may not be completed until several years after the samples are collected.
- Some of the sample analysis will include genetic testing i.e. looking at DNA sequences in your normal healthy cells and in any abnormal cells. Your DNA is unique to you so although the samples will not have your name associated with them these samples can never be completely anonymous.
- At the end of the study, we ask for your consent to store any remaining samples for ethically approved research projects in a licensed tissue bank where they will be managed in accordance with Human Tissue Act (HTA) requirements. This requires your consent form, which contains your full name, to be sent to the tissue bank. These will be stored appropriately and securely in accordance with their local procedures and regulatory requirements Your de-identified samples will be used mainly by local researchers, but ethically approved research projects may take place in hospitals, universities, non-profit institutions or commercial laboratories worldwide. Researchers using the samples will not know your identity.

What if we find something unexpected?

The tests that will be performed on your blood samples and the scans that are completed are for research purposes only and are not expected to affect your current standard care. Therefore, you and your doctor will not usually be informed of the results of these tests. This would only happen if we discovered something likely to be significant to your care.

What happens if I wish to leave the study?

You are free to withdraw at any time and without giving a reason. A decision to withdraw will not affect the standard of care you receive. The research team will respect your decision and will be happy to answer any questions you might have at the time. Research information and samples that have already been collected will still be used in the study unless you specifically request for samples to be destroyed. However this will not be possible for samples that have already been processed.

Who is organising and funding the study?

The chief investigator responsible for leading this study is Prof Anna Schuh, consultant haematologist. The study is managed by the Oncology Clinical Trials Office at the University of Oxford and the University of Oxford also act as the research sponsor. This means they are legally responsible for the study organisation and for overseeing the work of the researchers. The study is funded by Janssen, a pharmaceutical company which is part of the Johnson & Johnson group.

What if I have a complaint?

- If you have a concern about any aspect of this study, you should ask to speak to the researchers. If you wish to complain about any aspect of the way in which you have been approached or treated during the course of this study, you should contact the local OxPLoreD study team by telephoning 01865 235311 or email octo-OXPLORED@oncology.ox.ac.uk. Alternatively, you may contact the

University of Oxford Research Governance, Ethics & Assurance (RGEA) office on 01865 616480 or the head of RGEA, email ctrg@admin.ox.ac.uk.

- The Patient Advisory Liaison Service (PALS) is a confidential NHS service. PALS are unable to provide specific information about this research study but can provide support for any complaints or queries you may have about care you receive as an NHS patient. If you wish to contact the PALS team please contact: (PALS - Churchill) on Tel: +44(0) 1865 235855 or Email: PALS@ouh.nhs.uk

What will happen to the results of this study?

The results of this study may be presented at meetings or published in a medical journal. You will however not be identifiable in any reports or publications that arise from this research study. If you are interested in the results, your research doctor will be able to tell you about these when available and a written summary of the research findings will be made available through various routes e.g. trial website and patient support groups.

The study will also form part of a research project which will contribute towards an educational project (A DPhil thesis by Dr Niamh Appleby)

Who has reviewed the study?

All research in the NHS is looked at by an independent group of people, called a Research Ethics Committee, to protect participants' interests. This study has been reviewed and given favourable opinion by the South Central - Oxford C Research Ethics Committee.

The study design and information for participants was reviewed by patient representatives from the Oxford Blood Group.

Further information and contact details:

Please contact:

Early Phase Research Nurse team on 01865 235311

For any concerns or emergencies outside office hours please contact:
The Haematology Ward, Churchill Hospital telephone: 01865 235048 or 235049
or call Churchill Hospital switch board 0300 304 7777 and ask for the Haematology doctor on-call

For more information about trials, and if you prefer, you can contact **MACMILLAN CANCER SUPPORT** which is an independent organisation providing support and counselling to help people live with cancer.
They can be contacted at: Macmillan Cancer Support, 89 Albert Embankment, LONDON SE1 7UQ
Tel: 0808 808 0000 (Freephone) or 0131 260 3720
Or visit their website at http://www.macmillan.org.uk

Alternatively, you can contact Maggie's Cancer Centre at the Churchill Hospital, Tel: 01865 225690.

Thank you for reading this information