Patient Information Sheet: OPTIMA *prelim*

OPTIMA *prelim*

Optimal **P**ersonalised **T**reatment of early breast cancer using **M**ulti-parameter **A**nalysis - preliminary **study**

Patient Information Sheet

We would like to invite you to take part in a research study called Optima *prelim*.

This sheet explains why the research is being done and what it will mean for you. Please take time to read it carefully and feel free to talk it over with friends, your family and your GP.

Part 1 explains what will happen if you take part.

Part 2 gives you more information about the study.

A member of the research team will go through this with you. Please ask us if there is anything that is not clear or you would like more information. Please take as much time as you need to decide whether or not you wish to take part.

Your participation in this research is entirely voluntary. If you decide not to take part, your decision will be respected and your medical care will not be affected in any way.

Part 1

What is the purpose of this study?

Chemotherapy and hormone treatment are standard treatment for women with your type of breast cancer. This is to reduce the chances of the cancer coming back. Chemotherapy is given as an injection usually every three weeks over a few months. Hormone therapy is a daily tablet such as tamoxifen for five years. Younger women may also have a monthly injection to stop menstrual periods.

Recent research indicates that some women with your type of breast cancer may not benefit from chemotherapy, and would do just as well with hormone treatment only. The decision to give chemotherapy, or not, is currently made using simple measurements such as the size of the tumour and the number of lymph glands affected. These methods are not as good as we would like, and means that sometimes patients are given chemotherapy unnecessarily.

Tests have been developed to try to predict which women could avoid chemotherapy. The tests are carried out on a sample of the tumour removed by the surgeon. There are several existing tests and new ones in development. The best known of these tests is called Oncotype DX.

The aim of this study is to investigate whether a personalised decision about chemotherapy using tests like Oncotype DX can be made safely and effectively. Initially we want to include 300 patients in the study from about 30 hospitals. If it works well, we want to extend this to a much larger study throughout the UK.

Can you explain the Oncotype DX test?

In the past ten years, there has been a lot of research into new ways to look at breast cancer. Tests have been developed that make lots of measurements in tumour cells. These tests are sometimes called multi-parameter assays. They look at the genes in the breast cancer cells. A number of these new tests are now available. They promise to change the treatment of breast cancer.

The first of these tests was Oncotype DX. It was developed by a company in the United States. It measures 21 genes in the tumour cells. The Oncotype DX test was first carried out on stored samples from patients treated many years ago. The results suggested that Oncotype DX could show whether or not chemotherapy is needed.

The Oncotype DX test is done in a central laboratory. The test is widely used in the United States. The National Institute for Health and Care Excellence has approved its use for some NHS patients with breast cancer that has not spread to lymph glands. Your doctor has discussed OPTIMA with you because the test is not available to you through the NHS. More research is needed to help the NHS decide how best to use tests like Oncotype DX, especially for patients with cancers that have spread to lymph glands.

You may find the Oncotype DX web-site helpful for further information about the Oncotype DX test (aimed at American patients): http://www.oncotypedx.com/en-US/Breast.aspx

What will happen after joining OPTIMA *prelim*?

If you decide you would like to take part in this study, you will need to sign a consent form. Your medical team will be asked to send some information about you to the OPTIMA Trial Office at the Warwick Clinical Trials Unit, University of Warwick. Your doctor will be asked to send a sample of your tumour to our central laboratory in London. This is so we can check that you are suitable to join the study.

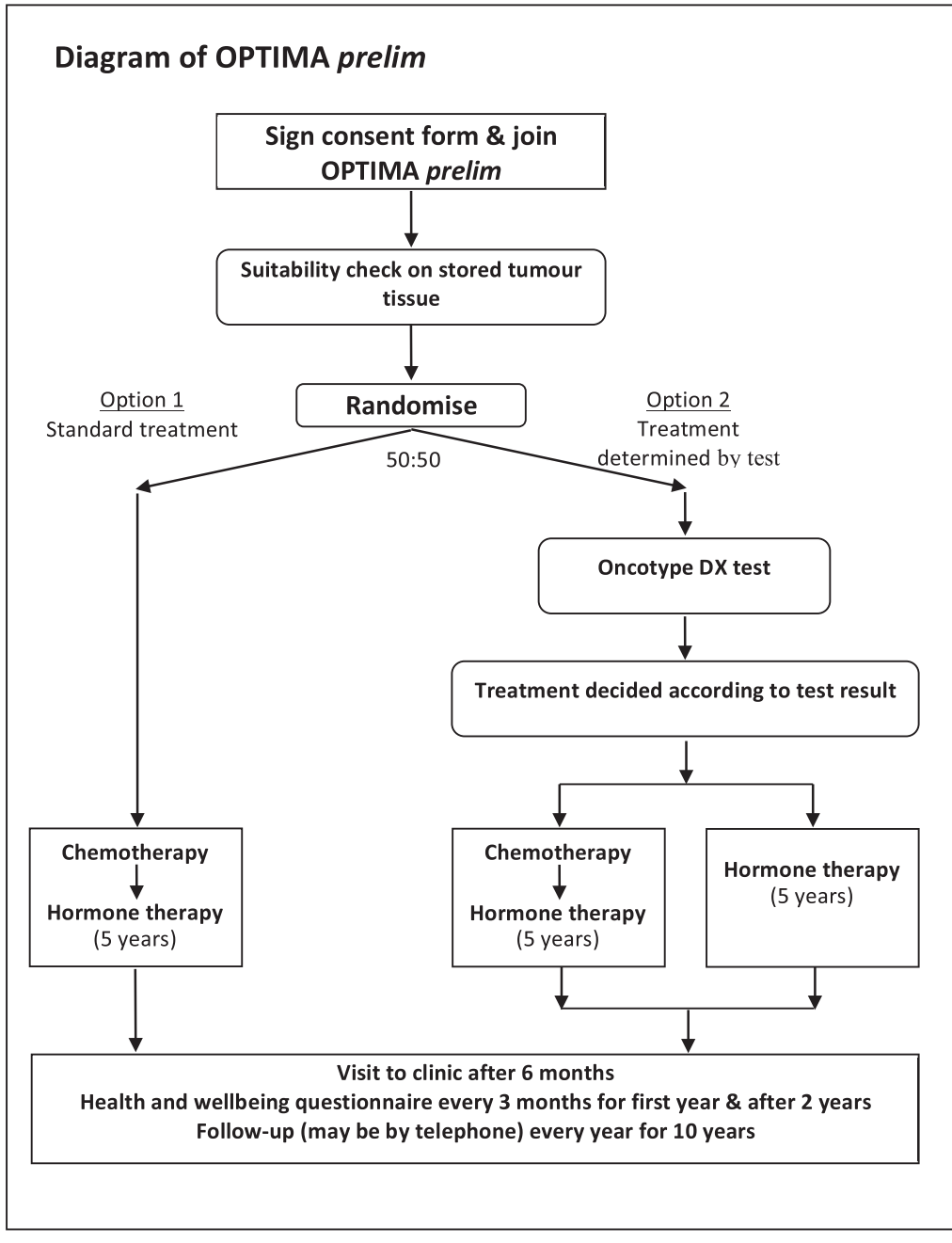
OPTIMA *prelim* is a 'randomised controlled' trial. This means that doctors are not sure which of two treatment options would be best. The best way to compare the two treatment options is to use each of them in two similar groups of patients. This allows us to be sure that if there is a difference between the two groups, it is because of the treatment option, and not because the groups are different from each other in some way.

Everyone who agrees to take part in this study will be allocated to one of two groups of patients. The only way to make sure that the groups of patients are as similar as possible is to have your treatment option decided upon by chance: a process called randomisation. Randomisation will be done by the OPTIMA Trial Office using a computer. This process ensures that the two options are compared fully and fairly. You will have an equal chance of your treatment being assigned according to one of two options.

Option 1: A sample of your tumour tissue will be sent to our laboratory where it will be checked and stored. After 3 to 4 weeks, you will start chemotherapy followed by hormone treatment. This is the current standard treatment, and will not be decided according to the Oncotype DX test. All patients will receive both chemotherapy and hormone treatment.

Option 2: A sample of your tumour tissue will be sent to our laboratory where it will be checked. It will then be sent on to a second laboratory where the Oncotype DX test will be performed. The test result will come back in 3 to 4 weeks. The result will indicate whether you should benefit from chemotherapy or not. You will then receive hormone treatment, with or without chemotherapy. Most patients in Option 2 will not need chemotherapy and will just have hormone therapy.

The diagram below is to help you understand how OPTIMA *prelim* works.



Your doctor will discuss chemotherapy with you. If you do receive chemotherapy we will not tell you or your doctor whether you are in Option 1 or Option 2. Therefore you will not know if your treatment has been decided using an Oncotype DX test. You may be having chemotherapy because you are in Option 1 (standard treatment), or one of those in Option 2 recommended to have chemotherapy. We are doing this because we do not want either you or your doctor to be influenced by the test result.

It will take between 3 and 4 weeks to decide your treatment if you join OPTIMA *prelim*. We know that this length of time is safe. We have asked your doctor to discuss chemotherapy with you now. Then you can start treatment as soon as you get the decision.

All patients will receive hormone therapy. Your hormone treatment is a daily tablet. It is the usual treatment used in the NHS and is normally for 5 years.

If you have not had your menopause we will ask you to have monthly injections for at least 3 years. This is to stop your menstrual periods. We will do this even if you have chemotherapy and your periods stop or if your doctor is not sure whether you have had your menopause. These injections are not widely used as part of usual NHS treatment but we believe they improve hormone treatment. The reason for giving the injections is to make sure that everyone within OPTIMA study receives the same hormone treatment.

During and after your treatment, you will continue to be followed up by your doctor to assess your progress. This will be every three months during the first year and once a year after that up to 10 years. Your research doctor or nurse may contact you by telephone instead of asking you to come to the hospital. We will ask your doctors how you are, including your GP. We would also like to collect information about you from central NHS databases.

We want to find out whether tests such as Oncotype DX are acceptable to patients and their doctors. Researchers in our team will ask some patients and their doctors what they like and dislike about OPTIMA *prelim*. We may change the way we explain the study to patients in the future. This is why we would also like to talk to some women who decide not to join OPTIMA. Whether you decide to enter the study or not, you may be asked if you would agree to being interviewed by one of our researchers to discuss reasons for your decision. However, you are under no obligation to do so.

Why have I been chosen?

We are asking women with breast cancer who would usually receive both chemotherapy and hormone treatment to take part. This means women with cancers 3 centimetres or larger, or with cancer which has spread to the lymph glands. The Oncotype DX test has been used for some women in other countries with good results but we want to study the test in more women before bringing it into routine use in the NHS. The test is mainly used for tumours which have not spread to lymph glands. We especially want to study women who usually get chemotherapy because the cancer has spread to lymph glands or who have larger tumours. The information we have suggests that the test works equally well for such women but we need to prove this.

Do I have to take part?

No. It is entirely up to you to decide whether or not to take part. If you do, you will be asked to sign a Consent Form. If you change your mind, you can withdraw at any time, without giving a reason. This Information Sheet is yours to keep whatever you decide.

Your care will not be affected in any way if you do not enter the study.

What are the side effects of any treatment received when taking part?

With any cancer treatment, some side effects may occur. Your doctor will discuss these with you. If you join the study and have chemotherapy, the side-effects would be the same as if you were treated outside the study. This is because we expect you will be offered the same chemotherapy outside the study.

You may experience symptoms of the menopause if you have injections to stop your menstrual periods. These symptoms will sometimes go away when you stop the injections. It depends on how old you are. Many women will get these symptoms anyway if they have chemotherapy. If your periods stop early, you are more likely to develop osteoporosis as you get older. This is also true for women whose periods stop because of chemotherapy. The doctors and nurses looking after you are very aware of this risk. They will monitor your bone health carefully. If signs of bone thinning develop, this can be treated at an early stage.

All other treatment is the same whether you are in the trial or not.

What are the possible benefits of taking part?

The Oncotype DX test may show that you do not need chemotherapy. This means that you would avoid any chemotherapy side effects and start hormone treatment straight away. The test could also show that you do need chemotherapy. If you are given chemotherapy as well as hormone therapy, you will be receiving the current standard treatment. We are doing this study to work out who can safely avoid chemotherapy and be treated with just hormone treatment, and those who need chemotherapy. We believe that using tests to help make decisions about chemotherapy treatment will become normal in the future.

Everyone in this trial will be closely followed. You will have a research nurse or researcher to help monitor you.

What are the potential disadvantages of taking part?

We are still in the early years of learning the best way to use these tests. So far, the Oncotype DX test has mainly been used for tumours which have not spread to lymph glands. The test might not work so well for patients with larger tumours or involved lymph glands. We do not believe this to be the case. However we might find out in the future that chemotherapy could have offered additional benefit to a few women receiving hormone treatment alone.

If you join the study, it will take 3 to 4 weeks to complete the additional tests on your original tissue sample. There is good evidence to show that this time period does not increase the risk for women with your form of breast cancer. You will be asked to complete questionnaires, which will take some extra time.

As indicated above, we are doing this study to work out who can benefit most from chemotherapy, in addition to hormone treatment.

What happens if the research study stops?

The study might end before your treatment is complete. This is unlikely. If it happened, you would get the normal treatment for breast cancer. However, you will be able to discuss this with your doctor. Your progress will be followed in the same way.

If you would like further information, please ask:

- *Principal Investigator (Name/contact.no.)……*
- *Research Nurse/coordinator(Name/contact.no.)……*

If you would like some independent advice, you can contact either of the following:

Suggestions: *Breast clinical nurse specialist + contact number*

Macmillan Cancer Support a useful source for further information. They can provide information on breast cancer, its treatment, and clinical trials. You can find this at **http://www.macmillan.org.uk**
Alternatively, you can call them on **0808 808 0000 (freephone)**, and they will send you information leaflets in the post free of charge.

Other contacts you may find helpful are:
Breast Cancer Care: Tel: 0808 800 6000 (freephone) Web: http://www.breastcancercare.org.uk

Cancer Research UK Tel: 0808 800 4040 (freephone) Web: http:www.cancerhelp.org.uk

This completes Part 1 of the Information Sheet.
If you think you might join the study, please take time to read Part 2 before making your decision.

Part 2

What if new information becomes available?

We may get new information from other research that is important for OPTIMA *prelim*. We might want to change the study as a result. If this happens, your doctor will discuss this with you. You will decide whether or not to continue. If you decide not to continue, your doctor will arrange for your future care. If you do continue, you may be asked to read a new Information Sheet. You might also be asked to sign a new Consent Form.

What happens if I don't want to carry on with the study?

If you do not want to carry on, we will only use details that we already have. You can ask for all information about you to be removed. We will not use any of your personal information. You may be asked to sign an extra form to confirm your wishes.

What if there is a problem?

If you wish to complain, or have any concerns about any aspect of the way you have been approached or treated by members of staff you may have experienced due to your participation in the research, the National Health Service or UCL complaints mechanisms are available to you. Please ask your research doctor if you would like more information on this. In the unlikely event that you are harmed by taking part in this study, compensation may be available.

If you suspect that the harm is the result of the Sponsor's (University College London) or the hospital's negligence then you may be able to claim compensation. After discussing with your research doctor, please make the claim in writing to Dr Rob Stein who is the Chief Investigator for the research and is based at UCL Hospitals (250 Euston Road, London NW1 2PG). The Chief Investigator will then pass the claim to the Sponsor's Insurers, via the Sponsor's office. You may have to bear the costs of the legal action initially, and you should consult a lawyer about this.

Will my taking part in this study be kept confidential?

All personal information collected for OPTIMA is strictly confidential and is covered under the Data Protection Act 1998. We will ask your doctor and nurse to provide information about you and your disease to the OPTIMA Trial Office at Warwick Clinical Trials Unit, University of Warwick. This will be entered on to a secure database. Only authorised personnel at the Trial Office can access this.

When you join OPTIMA we will give you a unique study number. Information about you that leaves the hospital will refer to you by your study number, and by your initials only. We will not use your name.

With your permission, we would like the OPTIMA Trial Office to hold a record of your personal details. This includes your date of birth, name and address. We may use this to send you questionnaires and other information by post. We would also like to contact the Office of National Statistics about you as they collect long-term information about all NHS patients.

Your doctor will usually inform other doctors and nurses who look after you that you are in OPTIMA *prelim*. This includes your GP. You must inform your doctor if you do not wish for this to happen.

If you choose to withdraw from the study we would still like to collect information about your treatment. This will be useful to our research. If you have any objection to this please let your doctor know if you do decide to leave the study.

What will happen to any samples I give?

We plan to compare the Oncotype DX test to other new tests. Many research labs have been working on this over the past few years. As a result several tests are now available. Some of them are much simpler and less expensive than the Oncotype DX test. We will be relying on Oncotype DX for your treatment decision. We would like to see how other tests would have performed. We are asking your permission to use these other tests as well, although we will not be able to tell you the results. When we have analysed the data at the end of OPTIMA *prelim*, we may choose to use a different test in the main study.

All samples will be stored with your study number, initials and date of birth, and will not have your name or other details. They will be kept in a secure place by the Chief Investigator or his deputies. Information given to any researcher will not include your personal details.

Some of our research may take place in laboratories in other countries.

It is possible that some of the research results from this trial might be used by companies. If this happens, neither you nor your doctors will benefit financially. None of the doctors or scientists involved in this trial has any financial interest in it.

We may also want to use your samples for other research in the future. We ask if you will give us the remainder of your tumour sample for this. It would be returned to your hospital if you or your doctor ever needed it.

Will any genetic tests be done?

We may want to do genetic tests on your cancer sample in the future. The genetic tests are performed on the cancer cells, not on you. They do not predict risk of inheritance. They will not affect insurance.

The tests are usually those that help us understand how cancers develop and how we can treat them. You can refuse permission to have your samples used in this way at any time. It will not affect your part in this study.

Data from your samples might be shared to help other scientists. There is a very small risk that a skilled scientist could work out that the sample came from you. We think it is highly unlikely that this would happen. Scientists have talked about it so we are including it in this information sheet.

What will happen to the results of the research study?

The results of the research will be published in scientific journals. We expect that some results will be ready for publication in about 2 years. The results of the main OPTIMA study will take more than five years before they are ready. You will not be identified in any report of this study. If you wish, you can ask your doctor to send you a copy of the report when it is published.

Who is organising and funding the research?

This research is run by University College London (UCL). The Warwick Clinical Trials Unit is supporting UCL.

UCL is Sponsor for the research.

The study is funded by the National Institute for Health Research (NIHR). Their Health Technology Assessment Programme is paying for it.

Your hospital may be paid a small sum for entering you into the study. This is to cover administration costs. Your local hospital will cover the costs of your treatment and follow-up care.

Who has reviewed the study?

The study has been approved by the Department of Health's National Institute for Health Research and a UK National Research Ethics Committee. It has also been approved by patient and carer representatives.

What to do if you wish to take part in the study?

If you wish to join this study you will be asked to sign a Consent Form. There will be further discussion with the researcher before you sign it. You will also be given this Information Sheet and a signed Consent Form.

If you decide not to take part, your care will not be affected in any way.

Thank you for taking time to read this Information Sheet.

To be printed on hospital/Trust headed paper

Consent Form (OPTIMA *prelim*)

Patient Consent Form: Consent to Participate in OPTIMA *prelim*

Optima *prelim*

Optimal **P**ersonalised **T**reatment of early breast cancer using **M**ulti-parameter **A**nalysis

[ISRCTN42400492]

Study Doctor Name:		**Study Site:**	
Patient Information Sheet	**Version No.:**	**Version Date:**	

Patient statement and signature

Please **initial** the boxes below if you agree

	Initials
1. I have read and received a copy of the OPTIMA *prelim* Patient Information Sheet. I fully understand what is involved in taking part in this study and have had an opportunity to ask questions, and all of my questions have been answered.	
2. I understand that my participation is entirely voluntary and that I am free to withdraw from the study at any time without giving a reason and without my medical care or legal rights being affected.	
3. I understand that the researchers in charge of the study may stop the study at any time without my consent if it is believed it is in the best interest of study participants.	
4. I give my permission for the OPTIMA Trial Office and other sites undertaking OPTIMA research to hold information about me. I understand that this will not include details of my identity unless I give separate permission for this.	
5. I understand that data collected for this study is covered by the Data Protection Act (1998) and all electronic data will be stored in a secure format.	
6. I understand that relevant sections of my medical notes and data collected during the study may be looked at by responsible individuals from the Warwick Clinical Trials Unit (WCTU) and/or other authorised representatives from the University of Warwick and University College London (the Sponsors of the study), from regulatory authorities or from the NHS Trust, where it is relevant to my taking part in this research. I give permission for these individuals to have access to my records which will identify me by name.	
7. I understand that I will not be identified in any reports or publications resulting from the study.	
8. I give my permission for a letter and information about OPTIMA *prelim* to be sent to my General Practitioner, which will tell him/her that I have decided to take part in the study.	
9. I understand that samples of my cancer removed at the time of surgery will be used for research as part of the OPTIMA study.	
10. I understand that some of this research may generate information that companies may use in future for commercial gain.	

11. I agree to complete questionnaires regarding the impact of the treatment and my quality of life.	
12. OPTIONAL: I give my permission for the OPTIMA Trial Office to hold a record of my personal details. I understand that this includes my date of birth, name and address which will be used for tracking my tumour sample and for follow-up with the Office of National Statistics. All data which will identify me by name will be kept on a secure database and only used for the above purpose.	
13. OPTIONAL: I agree to donate the remainder of my samples for future research projects. I understand that donating samples is a gift for this research, that it is entirely voluntary and that I am free to withdraw my approval for use of the samples at any time without giving a reason and that my medical treatment or legal rights will not be affected by this voluntary donation.	
14. OPTIONAL: I am willing to be contacted by an OPTIMA researcher to discuss my reasons for joining the study.	
15. I voluntarily agree to participate in this study.	

Your signature confirms that you have had an opportunity to ask questions and that all of your questions have been answered. [You will be given a signed and dated copy of this consent form to take away with you]

Patient signature:		Name (print):		Date signed:	___/___/ _____

Investigator Statement and Signature. ***To be completed by the investigator or designee taking consent***

I have discussed this clinical research study with the patient and/or his or her authorised representative using a language that is understandable and appropriate. I believe that I have fully informed the participant of the nature of this study and the possible benefits and risks of taking part. I believe the participant has understood this explanation.

Signature:		Name (print):		Date signed:	___/___/ _____

The completed Patient Information Sheet / Consent Form must be kept in the OPTIMA site file, a copy given to the patient and copy filed in hospital notes.

Do not send the completed Consent Form to the OPTIMA Trial Office.

OR

for patients who decline consent for the study

1. I have received and read a copy of the OPTIMA *prelim* Patient Information Sheet. I have decided not to take part in this study but am willing to be contacted by an OPTIMA researcher to discuss the reasons for my decision.	**Initials**
2. I agree that my personal information may be stored by the Warwick Clinical Trials Unit (WCTU) for this purpose.	
3. I understand that data collected for this study is covered by the Data Protection Act (1998) and all electronic data will be stored in a secure format.	

Your signature confirms that you have had an opportunity to ask questions and that all of your questions have been answered. [You will be given a signed and dated copy of this consent form to take away with you]

Patient signature:		Name (print):		Date signed:	___/___/ _____

Investigator Statement and Signature ***To be completed by the person taking consent***

I have discussed this clinical research study with the patient and/or his or her authorised representative using a language that is understandable and appropriate. I believe that I have fully informed the participant of the nature of this study and the possible benefits and risks of taking part. I believe the participant has understood this explanation.

Signature:		Name (print):		Date signed:	___/___/ _____

The completed Patient Information Sheet / Consent Form must be kept in the OPTIMA site file, a copy given to the patient and copy filed in hospital notes.

Do not send the completed Consent Form to the OPTIMA Trial Office.