3 THE TEMPLATE AND GUIDANCE FOR SITES

The template itself follows on the next page. Please remove all other pages before using, but leave in the 'Guidance for sites' below, if you feel it will be useful. This could alternatively be sent to sites as a separate document.

Guidance for sites

On the following pages you will find the template Patient Information Sheet for OCTOPUS. Some changes need to be made to this before you use it for your site. The items requiring change are all highlighted in yellow, so should be easy to identify.

1. Add your local header to the top of the first page; please ensure this is only the relevant logo(s) and not any addresses. Addresses can be entered elsewhere, and if you try to add them to the top of the document, they might push information onto the second page
2. Add relevant contact details, including the hospital address, into the section 'How to contact us' on the front page. It is best to name an individual here who is likely to have time to receive contact from trial participants. Please ensure that the address does not go over onto the second page.
3. On the final page, 'Research and Development Office' is highlighted in case your relevant local department has a different name to this. Whether you change it or not, make sure the highlighting is removed before using the document.
4. At the end of the final page, add the relevant contact details again for reference.
5. Before finalising the document, remove this guidance page and make sure no text is highlighted in yellow.
6. When the document is finalised, please remember to do the following:
    a. File a copy of the local headed paper version in the Investigator Site File
    b. Send a copy of the local headed paper version back to MRC CTU at UCL

To be presented on local headed paper

Octopus Participant Information Sheet – Parts 1 and 2

This is information to help you decide if you would like to join a study called Octopus.

- Please take time to read the following information carefully. Discuss it with friends and relatives if you wish. Take time to decide whether you wish to take part.
- You are free to decide whether to take part in this study. If you choose not to take part, this will not affect the care you get from your own doctors in any way.
- You can stop taking part in the study at any time, without giving a reason.
- Ask us if there is anything that is not clear or if you would like more information.
- This leaflet is in 3 parts:

Part 1: I am considering taking part
Part 2: I would like to know more about Octopus
Part 3: General information on Octopus

- We suggest you read these in order and move through the parts if you would like to know more.
- Thank you for reading this information. If you decide to take part, you will be given a copy of this information sheet and asked to sign a consent form, which you can keep a copy.

Important things that you need to know

- In Octopus, we want to find out if we can find new treatments that may slow down the progression of disability in people with Progressive Multiple Sclerosis (PMS) between 25 and 70 years old.
- Like all medicines used to treat PMS, the treatments used in this study can have unwanted side-effects.
- On top of your usual appointments, this study will require you to visit the hospital every 6 months for up to 5 years.

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How to contact us

If you have any questions about this study, please talk to your study doctor or nurse:

Name of doctor or nurse
Hospital Department, Hospital
Address; Address
Tel: 01234 XXX XXX

Part 1: I am considering taking part

1 What is Octopus?

- Octopus stands for Optimal Clinical Trials Platform for Progressive Multiple Sclerosis.
- It aims to find new treatments for people with progressive multiple sclerosis (PMS) that will slow down the rate of disability worsening.
- It is a randomised controlled study for people with PMS.
- It uses a study design called "MAMS" (multi-arm multi-stage) where different treatments can be tested at the same time against standard care.
- This study design also allows us to add new arms to compare new drugs whilst the trial is ongoing, rather than setting up a new trial.
- After a certain point (when all the MRI results are collected –this will be around 3.5 to 4 years), an analysis will be done. This will decide whether any treatment(s) will be stopped if they show no promise of being better than standard care.
- If a treatment shows promise, then further people with PMS will be able to join and further data collected.

2 Why are we doing this study?

Multiple sclerosis (MS) affects more than 130,000 people in the UK, over 2.5 million people worldwide and is one of the most common causes of disability in young adults. MS often begins with a relapsing-remitting phase (RRMS).

Over time, many people with RRMS start to find that they no longer recover after a flare-up and get steadily worse, resulting in increased disability. This is known as Secondary Progressive MS (SPMS). A smaller number of people will find that they experience gradual decline from the beginning, known as Primary Progressive MS (PPMS). SPMS and PPMS together are known as progressive MS (PMS).

There are only a few treatments for people with PMS and they may not be suitable for all. So, Octopus is going to test different treatments added to standard of care against standard of care alone. The aim is to see if we can find treatments that can slow down the progression of disability in people with PMS. The best way of knowing if these treatments work is by carrying out a randomised controlled study.

A randomised controlled study compares two or more groups of people: a research group who receive the new 'research' treatment (plus or minus standard care, depending on the trial) and a control group who just receive the existing standard care. If you take part in the study, a computer will randomly allocate you to a treatment group. This allows a fair comparison between the new treatment and the existing treatment group to see which one works best.

3 Why am I being asked to take part?

You are being asked to take part in Octopus because you are between 25 and 70 years old and have PMS. Your neurologist may be recommending you for this study, or you have expressed an interest in this study.

This may be through the UK MS Register (UKMSR) or through the Octopus Registration of Interest form. The information provided for in these forms will be stored by Swansea University Medical School. Participation in the research is entirely voluntary. If, after considering it, you decide not to participate, this will not affect your care in any way and your neurologist will continue to find the best standard treatment available for you.

4 What will I need to do if I take part?

After filling out the Registration of Interest form (the information provided for this is stored by Swansea University Medical School on behalf of the Sponsor, University College London (UCL)) and/or initial telephone contact from a hospital or study doctor, these suggest you may be suitable for the study. You will be asked to attend one of the Octopus study hospitals to discuss this information sheet in more detail. If you would still like to take part, are happy to have some tests and provide more information on yourself, we will ask you to sign a consent form. Not everyone may be able to take part in this study.

You will be asked to have:

- some physical assessments to assess your neurological system including strength, co-ordination, walking and tests of arm function.
- a general physical examination.
- your medical history checked.
- fill in some assessments asking about pain, fatigue, and your quality of life.
- some tests which include a Magnetic Resonance Imaging (MRI) scan, blood, and urine tests.

If these tests show you can take part, your study doctor will contact you or ask you back to the hospital site and ask if you are happy to continue.

You will then be allocated randomly (by the computer) to one of the treatments. Two of these treatments are repurposed treatments and one is the control group. You will receive these in addition to your usual standard of care. You will then have your study visits planned.

5 How often will I need to go to hospital?

You will be asked to visit your study doctor at one month; have a telephone call at three months, and then another visit at six months. After this you will be asked to visit the hospital every 6 months for up to 5 years. Between the 6 monthly visits you will be asked to do a urine test and have a telephone call with the research nurse to report the result. The research nurse will provide you with instructions and an at-home testing kit that will enable you to carry out this urine test. If your urine dipstick test is positive for protein, as per the instructions provided, you will have to come into the clinic and give further urine samples. These samples will have further tests performed on them and based on the results appropriate action, if required, can be taken.

At each visit to the hospital, you will have the same physical assessments to test the neurological system, and fill in questionnaires on pain, fatigue, mobility, and quality of life.

Further tests will be done to check your progress and if you have any problems with the treatment. Treatment can be reduced or stopped, or you can choose to stop Octopus treatment or the trial at any time.

6 What do I need to know about the treatments in this study?

Octopus will use some treatments that are already used for other conditions. These are called "repurposed" treatments. A team of experts have looked into a number of treatments and decided that these are most likely to help slow down disability with people with MS. The first Octopus treatments are:

- R/S-Alpha Lipoic Acid (R/S ALA)
- Immediate release metformin

By using repurposed treatments, there is an understanding of their safety and possible side effects. R/S ALA is a health supplement. Metformin is used to treat a type of diabetes. You will be asked to take 2 capsules a day in the evening shortly after a meal (called the low dose) for 4 weeks. This time will help us to check if you have any problems with the treatment.

If you have no problems and you are happy to do so, you will then be asked to take 2 capsules twice a day shortly after meals (a total of 4 capsules) – this is called the high dose. You will also be asked to record the capsules you take when you take capsules.

If you would like to know more about the treatments and this study, more detail is given in **Part 2** of this information sheet.

7 What are the possible benefits of taking part in this study?

We hope that you will be helped by having any of the treatments in this study. But this cannot be guaranteed. Please remember that the treatments tested will not make you better**.** We hope that they will help slow down the progression of disability in people with PMS. However, we do not know this for sure which is why they are being tested.

It is possible that the results may not help you, but the information we get from this study will help us to improve treatment for future patients with PMS.

8 What are the possible disadvantages and risks of taking part?

If you take part, you will need to visit the hospital more often. You will be asked to have blood tests, MRI, and urine tests before joining the study. You will then have additional MRI scans, blood, and urine tests during the study. You will also be asked to complete several assessments and questionnaires each visit to assess pain, fatigue, and your quality of life.

Whilst MRI scans are part of standard care for MS, some people find it uncomfortable to have the scans due to the need to lie still or claustrophobia. Part of the MRI procedure for the first MRI (to find out if you can take part) includes the injection of a dye that contains gadolinium into your vein, to help enhance the brain images. This is a standard procedure used frequently during in MRI scanning in MS. Side-effects of gadolinium may include mild headache, nausea, and local pain. Less than 1% of patients experience low blood pressure and light-headedness that can be treated with intravenous fluids. Very rarely (less than 1 in 1000), patients are allergic to the dye.

You might experience different or extra side-effects from the treatments that you take in this study.

The most common unwanted side effects are described in **Part 2** of this information sheet.

The effects of the Octopus treatment on babies are unknown and on fertility are limited. Therefore, women of childbearing age must not breastfeed, be pregnant or become pregnant while on this study. This is also important for men with a partner who could become pregnant. Therefore, if this applies to you, you must use an acceptable method of contraception (at least a condom and ideally another method) during the study, and for 12 weeks after your last dose of any Octopus treatment. You will also need a pregnancy test before you join the study, before any MRI scan and if felt required prior to any prescriptions provided. Male participants must not donate sperm during the study or for 12 weeks after the last dose of Octopus treatment.

9 Can I stop taking part after I have joined the study?

You can stop taking part in all of this study, or in any part of it, at any time. You do not need to give a reason. You must talk to your study doctor or nurse first. They can advise you about any concerns you may have.

If you decide to stop taking your study treatment, we ask for you to still attend hospital visits every 6 months so we can continue collecting information about you for up to 5 years. This is important, because it helps us to ensure that the results of the study are reliable. Your study doctor or nurse will discuss any treatment stops with you.

If you stop taking part in this study, you will continue to receive the treatment you would receive outside the trial (standard of care). This will be discussed with your neurologist.

10 Do I have to take part in Octopus?

No, it is up to you to decide whether to take part. If you decide not to take part in this study, you will continue to receive the standard treatment. This is provided to you by your neurologist. A decision to not take part at any time will not affect the standard of care you receive.

If you have private medical insurance, you should consult with your insurer before agreeing to take part.

If you think you might be interested in taking part in Octopus or this aspect of the study, please see **Part 2** for more information.

11 Contacts for further information

As well as **Part 2**, you can look at our website www.ms-octopus.info. Please also contact your study doctor or nurse:

[Insert address and telephone number of study doctor and/or nurse]

Information about Octopus is also available at the UK MS Register. This is a study designed to increase our understanding and capture better, higher quality information about living with MS. The website can also be used to keep track of your MS over time. We encourage all participants to sign up to the UK MS Register. https://ukmsregister.org/.

Thank you for taking the time to consider taking part in this study.

Part 2: I would like to know more about Octopus.

12 Can I definitely take part?

As stated in **section 4 of Part 1**, after your initial contact with the study and discussion at a clinic visit at a hospital, if you are suitable to take part, we will ask you to sign a consent form. With your consent, we will then ask you to do the following tests:

- A Magnetic Resonance Imaging (MRI) scan which may be on a separate visit. This is painless but you may feel slightly claustrophobic. Part of the MRI procedure includes the injection of a dye that contains gadolinium into your vein to help enhance the brain images. You will be lying down in the scanner for up to 60 minutes.
- A physical examination to check your general health.
- Your medical history. You will also be asked what medications you are taking.
- Blood tests – we will take a small amount of blood (up to 10 ml or 2 teaspoons) from the vein in your arm to check if it is safe to receive the treatments.
- Urine sample to check if you have protein in your urine and if it is safe to receive the treatments. If you are a woman of childbearing age, you will also be asked for a urine sample for a pregnancy test (see section 16 for more information).

These tests will find out if you will be able to take part in Octopus. You will also be asked to perform 6 neurological assessments to assess your strength, co-ordination, walking arm and hand function, vision, and memory. These include:

- EDSS assessment (4.0 – 8.0).
- Timed 9-hole peg test.
- A timed 25-foot walk assessment.

In addition to this there will be about 7 other questionnaires which will ask about your pain, memory, fatigue, and your overall health.

13 What if the tests show I can take part?

If the tests show you can take part, you will be asked to confirm if you would like to take part (either by phone or at clinic). If you are happy to then you proceed to enter the study, a treatment will be allocated randomly, and we will plan your clinic visits.

14 Which group will I be in?

It is important that the groups receiving each treatment are as similar as possible at the start of the study. To ensure that this happens, a process called randomisation is used to allocate people to each group. This allows a fair comparison between the new treatment and the existing treatment group to see which one works best.

In all groups, you will continue to receive your standard treatment for PMS. In addition to your standard treatment you are already receiving, the 3 possible treatments that you may be allocated to are:

- Arm A: a placebo (or dummy drug)
- Arm B: R/S-Alpha Lipoic Acid (R/S ALA)
- Arm C: Immediate release metformin

Everyone who takes part will be in one of these groups.

In Octopus, the people with PMS who receive standard of care treatment are called Arm A (control group). This group acts as comparison for the research groups and is the way Octopus can assess the research treatment.

This is a very important part of randomised controlled studies and ensures the results are reliable.

To make sure the results of this study are as reliable as possible, neither you nor any of your doctors will know which treatment you will get. In an emergency if any doctor needs to find out which treatment you are taking, they will be able to do so.

We will also inform your GP and your neurologist that you have entered this study and your possible treatments.

15 Why does Octopus have a placebo (dummy drug)?

One third of participants will be allocated to Arm A. This is the group receiving dummy or placebo capsules, in addition to their normal standard of care.

The placebo capsules will look and taste the same as the other treatments but will contain no active ingredient. Everyone in Arm A will have all the same visits, assessments, and tests as those on in the other groups.

This is the fairest way of comparing the new drug treatment with the current standard care (in the control group) without anyone knowing which treatment the participants are receiving.

When the data has been analysed, the treatment for each participant will be revealed and we will see if one treatment is better than the other. At this point, you will be able to find out what treatment you have been receiving too.

If your arm is stopped after an analysis, you will be able to find out what treatment you have been taking too.

16 What will happen to me during the study?

How will I take my Octopus Treatment?

Whichever treatment group you are in, please start your treatment as soon as possible. If you are not able to start taking your Octopus treatment in 2 weeks of being randomised, please tell your study doctor or nurse.

At first, we will ask you to take 2 capsules once a day in the evening shortly after a meal (called the low dose) for up to 4 weeks. You will then come to clinic, where you will have the same tests and assessments you completed when you were finding out if you could join the study. Please see the visit information leaflet for a summary of what tests and checks are performed at each visit.

If there are no problems and you are happy to do so, you will be asked to take 4 capsules (2 capsules twice a day shortly after meals, called the high dose) for up to 5 years. You will have tests and checks at least every 6 months to check how the treatment is affecting you and if it is still safe to take.

At any time, if it is needed, the study doctor may ask you to reduce the number of capsules you are taking or stop them entirely.

We recommend taking the capsules at the same time each day. This is usually easier to remember. If you are taking 2 capsules (called the low dose), it is recommended the capsules should be taken in the evening. Please swallow the capsules whole with plenty of water and shortly after a meal.

If you are unable to swallow the capsules for any reason, do not break up the capsules. Please contact your study doctor or nurse.

You will be given a diary card (which may be on paper or, if preferred, electronic) to help you keep track of what capsules you have taken and provide you with guidance on how to take the capsules. If you forget to take your capsules or several capsules on a day, do not take extra capsules to catch up. You should only take up to 4 capsules a day. Please note any missed capsules on your diary card and let your study nurse know if you missed any capsules when you see them.

Please keep your capsules away from children and do not let them become mixed up with anyone's medications. They should be stored at room temperature (not in the fridge) and not in direct sunlight.

What about taking other medications?

If you are on regular medications or supplements (including health supplements and multi vitamins), please make sure your study doctor and nurse know about them before you start your treatment. This includes those for your MS.

It would be helpful if you brought a list of medications (which you can get from your GP). Please bring any supplements (including health supplements and multi vitamins) when you are seen by the study doctor or nurse.

After starting your Octopus treatment, if any new medication is required - including for your MS - it is important that you tell the doctor prescribing the new medication that you are in a clinical study. You will be given a card (same size as a credit card) that states you are on a clinical study and states the possible treatments you are taking.

If you go to hospital or see a doctor during the study, please show them this card.

It is also important that you tell the study doctor if you have been asked to start taking any new medications including for your MS, over the counter or health supplements (including multi vitamins). It is particularly important to tell the study doctor about any of the following:

- Excessive alcohol –taking more than the recommended alcohol intake regularly.
- Any treatment for cancer.
- Treatment with Insulin.
- Any medication or health supplement (including multi vitamins) that contains Alpha Lipoic acid or metformin.
- If you are being planned for any scans (such as CT) that use an **iodine dye.**

If you need to have one of these scans, you will need to stop your Octopus treatment 24 hours before.

You cannot restart trial treatment for at least 48 hours after the scan. You must also have a blood test called Estimated Glomerular Filtration Rate or eGFR.

It is extremely important that you do not take any other medication that contains Alpha Lipoic Acid or metformin.

You must not buy Alpha Lipoic Acid from any chemist, shop, or other supplier. Please ensure you check any health supplements including multi vitamins. This will affect the study and its findings and might potentially be harmful.

There are also other medications that you must be checked by your study doctor. Therefore it is very important to please remember to inform your study doctor and nurse about which medications or supplements that you currently take.

Can I take part in other research or studies?

If you are already taking part in research or would like to join other studies while participating in Octopus, it is important that these other studies do not involve other drugs. If this applies to you, you should discuss this with the local site team prior to joining Octopus.

Are there any other precautions I need to know?

It is important that **women of child-bearing age must not breastfeed, be pregnant or become pregnant while on this study.** This is because the effects of the treatment on the baby are unknown. It is also limited knowledge of the effect on fertility. Therefore, you must use an acceptable method of contraception during the study (such as a condom plus ideally 1 other method), and for 12 weeks after your last dose of any Octopus treatment. Please discuss this further with your study doctor. They will be able to advise you if you are unsure whether you are currently using acceptable methods of contraception.

You will also need a pregnancy test before you join the study; before any MRI scan and if felt required prior to any prescriptions provided.

It is also important for men with a partner who is or could become pregnant to use condoms or other acceptable method of contraception during the study.

This is as well as up to 12 weeks after the last dose of any Octopus treatment.

You must not donate sperm during the study or for 12 weeks after the last dose of Octopus treatment.

If you do become pregnant, you will need stop the Octopus treatment. We will continue to follow you within the trial and provide additional information to you and ask for your consent to collect information on the outcome of your pregnancy. If you are male, and your partner becomes pregnant within 3 months of your last Octopus treatment, we will provide information for them and ask them to come to speak to your study doctor. If they agree, the study doctor or nurse will obtain their consent for us to collect information about the outcome of the pregnancy.

How often will I have to come to hospital and what will I have to do?

You will be asked to visit the hospital 4 weeks after starting your treatment. At this visit your study doctor or nurse will check your health and perform a physical examination. They will check if you are on other medications or if you have had any side effects.

You will also need to have the tests to check if it is safe for you to continue the treatment and increase the number of capsules you take.

Following the week 4 visit, you will have a telephone call at three months and a visit to the hospital at six months. After this you will be asked to visit the hospital every 6 months for to up to 5 years. Please see the Visit Information leaflet that summarises what tests and checks are performed when.

Between the 6 monthly visits, you will be asked to perform a urine dipstick test on a urine sample at home. All the collection pots and tests will be provided to you for these tests. You will then have a telephone call with the research nurse to report the result.

If there is protein found, you will be asked to repeat it the next day. If protein is found again, you will be asked to take 2 more urine samples to the hospital to check for infection and kidney function.

The research nurse will phone you after testing to tell you whether you need to change your Octopus treatment or if you have an infection.

When do I have MRI Scans?

An early sign of the potential effectiveness of a treatment is that it could reduce the rate of change in brain size (atrophy). To measure changes in brain size, participants will undergo brain MRIs. You will have four scans: at screening before you start taking the capsules, 6 months, 18 months, and 24 months all on the same scanner. Your MRI may be on the separate day as your study visit. Your study doctor or nurse will advise you of when these are scheduled. Each scan will last up to 60 minutes.

When should I stop taking Octopus Treatment?

Your treatment will be offered for as long as it is safe for you to take it. The Octopus treatment will continue for up to 5 years.

At 5 years, if the treatment you were allocated has shown benefit or is still being assessed, you will have a conversation with your study doctor about continuing Octopus treatment and how it is provided. If your treatment does not show benefit, you will revert to best standard of care only and you will have this conversation with your Study doctor or neurologist.

If a treatment shows benefit following analysis, the Octopus study team will work with the required NHS organisations to apply for the approvals for the treatment to be part of standard of care for people with PMS.

You may stop taking treatment before you reach 5 years because:

- Tests and checks show it is best for your study doctor to reduce or stop the capsules being taken.
- You decide you would like to stop Octopus treatment.
- the treatment or arm you are part of is stopped early after analysis (see next section).

In all these instances you must discuss this decision with your study doctor or nurse. This will ensure that you are fully informed prior to any decision. The study team can advise you on any concerns you may have and what is required after stopping.

If you or your study doctor decide for you to stop taking your study treatment, we will need to continue collecting information about you every 6 months for up to 5 years. This is important, because it helps us to ensure that the results of the study are reliable. If this occurs, your study doctor and nurse will discuss this with you.

If you stop taking part in this study, you will continue to receive standard care, and this should be discussed with your neurologist.

A decision to stop taking part at any time will not affect the standard of care you receive.

What happens if my Octopus study arm stops early?

As part of Octopus study design, if a treatment does not appear to be of benefit, this will be discussed by the independent oversight committees of the study.

The committees may then suggest that the treatment or arm should be stopped. If this happens participants who are on that treatment will have a final visit with their study doctor. They will arrange for your standard care to continue outside the study.

These participants, if they would like to and are still suitable for the study, may be offered the opportunity to join the study again, after a suitable period of time (around 6 months). If this is the case for you, your study doctor will discuss this with you. This is not available to you if your study arm has not stopped early, or you are on Arm A (placebo or dummy).

What happens if the Octopus study stops early?

Very occasionally a study is stopped early. If it happens, the reasons will be explained to you and your doctor will arrange for your care to continue outside of the study.

17 What are the possible side-effects?

What are the most common side-effects?

The Octopus treatments, Alpha Lipoic Acid and metformin, may cause some side effects. You may experience none, some, or all the side effects listed below. The most common side-effects of these treatments are:

- Taste disturbance
- Nausea (feeling sick) *
- Vomiting*
- Abdominal pain*
- Loss of appetite*
- Dehydration

** These tend to be more obvious at the beginning but ease off with time.*

If you become concerned about any side-effects, please tell the study doctor or nurse as soon as possible.

Are there other side-effects?

Other rare and very rare side effects are:

- Lactic acidosis - a condition when the body makes too much lactic acid, and it cannot get rid of it quick enough. This condition can lead to changes in your kidneys
- Decrease in the amount of vitamin B12 absorbed by the body
- Skin reactions such as itchy skin or rash
- Changes to your liver function
- Proteinuria – when there is too much protein in your urine
- Constipation
- Dizziness
- Breathlessness
- Muscle cramps or weakness
- Burning or prickling sensation in hands, legs, feet, or other body parts

It is important that you should tell your study doctor if you think you may be having any of these side effects. The study doctor may decide to change the number of capsules you have to take each day.

There may be risks involved in taking these treatments that have not been found in the so far. Every precaution will be taken, and you must report anything troubling you.

Also, do not forget about the card we will give to you, please always carry it with you. The card will inform doctors that you are on a clinical study and the treatments that you might be being treated with. The card also lists the side effects that you might expect to experience from your allocated treatment.

On the card are the details of the people you should contact if you feel unwell.

18 Will I get back any travel costs?

If you take part, you will receive travel costs for coming to the hospital for study visits. This will be repaid **up to a set limit** (£40/visit). The study team will explain this to you.

19 Do I need to provide extra samples for future MS research?

As said in **Part 1**, we are also asking if you are happy to donate extra blood samples to help in future MS research. This is in addition to those for the Octopus trial blood tests. It will help find substances in your blood which might help us understand more about MS, potential predictive (protein or genetic) biomarkers and the treatment types that might be more effective for other PMS in the future. It will not help with your own treatment.

This part of the study will only take place in some Octopus hospital sites, so please check with your study doctor or nurse if this is available to you. Your consent form will ask whether you are happy to provide these extra samples for future research. It is voluntary if you wish to take part in this aspect of the study and if you choose not to allow storage of your blood, you can still participate in the study.

If you choose to participate in this part of Octopus, we will ask for 4 extra blood samples when you join Octopus and then 3 extra blood samples at every 6-month visit. This will be approximately 25 – 35ml (equal to 2-3 tablespoons). These will be taken at the same time as your other blood samples.

This is more blood than usually taken but will not require any extra blood tests or visits.

What will happen to my extra samples if I donate them?

To look for genetic biomarkers, we will extract deoxyribonucleic acid (DNA) from your blood. This allows us to look at whether differences in people's unique genetic code affect the way their MS progresses, or how they respond to treatment. Your blood will be used to analyse inherited material (DNA) or biochemical markers.

Your extra samples donated will be anonymised and then sent and stored within the Welsh Neuroscience Research Tissue Bank (WNRTB) at Cardiff University. A copy of your anonymised consent form will be sent to the WNRTB who manage and store the samples.

Any projects using these extra samples including genetic or biochemical analysis, will be performed within national or international sites of expertise and may occur during or after the end of the study. They must have ethical approval for any work undertaken and permission for use from UCL and Octopus.

If there are any residual samples that are not used at the end of the study, we will ask your permission for these to be stored and processed for future use by WNRTB. Please see **Part 3 section 3.**

20 Contacts for further information

If you would like further information, please carry on reading **Part 3.** If you have any questions, please also contact your study doctor or nurse:

Name of doctor or nurse
Hospital Department, Hospital
Address; Address
Tel: XXXXX XXX XXX

To be presented on local headed paper

To be presented on local headed paper

Octopus Participant Information Sheet – Part 3

This is general information to help you decide if you would like to join Octopus.

- This is **Part 3** of the Octopus Participant Information Sheet. Please also read Parts 1 and 2 if you are interested in this study.
- **Part 3** contains general information you need to know if you would like to take part in this study.
- Please take time to read the following information carefully. Discuss it with friends and relatives if you wish. Take time to decide whether you would like to take part. Ask us if there is anything that is not clear or if you would like more information.
- You are free to decide whether to take part in this study. If you choose not to take part, this will not affect the care you get from your own doctors in any way.
- You can stop taking part in the study at any time, without giving a reason.
- Thank you for reading this information. If you decide to take part, you will be given a copy of this information sheet and asked to sign a consent form. You will get a copy of that as well.

How to contact us

If you have any questions about this study, please talk to your study doctor or nurse:

Name of doctor or nurse
Hospital Department
Hospital
Address; Address
Tel: XXXXX XXX XXX

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1 How will my personal information and data be used?

University College London (UCL) is the sponsor for this study, based in United Kingdom. UCL will be using information from you and your medical records, obtained from hospital and, GP records, to undertake this study and will act as data controller for this study. UCL will be responsible for looking after your information and using it properly. UCL will keep identifiable information about you for a minimum of 25 years after the study has finished.

Your rights to access, change or move your information are limited. This is because we need to manage your information in specific ways 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 we use your information at https://www.ucl.ac.uk/legal-services/privacy/ucl-general-privacy-notice-participants-and-researchers-health-and-care-research-studies

2 How will your personal information and data be stored and collected?

Your personal data will be collected and held in compliance with the UK General Data Protection Regulation (GDPR). Some data is stored outside the UK, and so have different data protection laws It will be stored by the following organisations:

- Octopus hospital where you are treated.
- University College London (UCL) who are coordinating the Octopus study.
- MS Register (if you are part of this study and consent to data being provided).
- MS Society (anonymous data only).
- Octopus database (names, email addresses and phone numbers only for online questionnaires)

All companies and organisations working with the Octopus trial have contracts in place with UCL that make sure that they cannot use your data for any purposes other than those instructed. They will not share your personal information with any other organisation, and they will hold it securely and retain it for the period UCL instructs.

Your hospital will collect information from you and your medical records for this study in accordance with our (UCL) instructions. If you are part of the MS Register and you are happy to consent to it, your hospital or UCL may also collect information from the MS Register.

Your hospital will use your name, NHS/CHI number and contact details (including if happy your email), which are collected from your Registration of Interest, to:

- contact you about Octopus
- make sure relevant information about the study is recorded for your care,
- to oversee the quality of the study.

Your hospital will keep identifiable information about you from this study for at least 25 years after the study has finished.

Your hospital will provide personal information such as your initials, date of birth and NHS/CHI number, to MRC Clinical Trials Unit at UCL along with the information collected from you and your medical records. This information will include health information, which is regarded as a special category of information.

We will use this information to conduct our research. Individuals from UCL and regulatory organisations may look at your medical and research records to check the study accuracy.

In addition, if you provide consent, your name, email address and/or phone number are provided to allow the Octopus database to send some assessments such as diary cards or questionnaires to you for you to complete online. This information is stored in the UK. However the information required to send the links to the questionnaires (your name and email address) are processed in the EU and then stored for 30 days. If the links for the questionnaires are through your phone number, then your name and phone number are processed in the US and then stored for

300 days. No other personal or medical information is included in this and held outside the UK.

What information will be collected to track for long term health status and other reporting?

UCL will collect information about you, for research, from your hospital site, NHS England, or any applicable national or NHS information system and the MS Register (UKMSR) if you are part of it. This information will include initials, date of birth, NHS/CHI number, your MS Register number (for UKMSR) and health information. We will use this information to track your long-term health status which may be during or after your participation in the trial.

Where information could identify you, the information will be held securely with strict arrangements about who can access the information. The people who analyse the information will not identify you.

Some information regarded as sensitive information may be collected if you are happy to give it. This includes ethnic origin, sexual orientation, caring responsibilities, and socio-economic status. If you do not want to give this information, you can state you prefer not to say.

This information will only be collected at screening (and ethnicity in your Registration of Interest). The MRC Clinical Trials Unit at UCL will pass this information onto the funder, the MS Society, who will not be able to identify you (it will be anonymous). This data will help the MS Society to understand the diversity of participants in MS research. They aim to have a research community that is equal, diverse, and inclusive as possible to ensure it is best qualified to improve the lives of people affected by MS in the UK.

If you are happy for it to happen at the end of the study, information and identifiable data about you may be given to the UKMSR. The UKMSR is a study designed to increase our understanding and capture better, higher quality information about living with MS in the UK today. More data needs to be gathered about the physical, environmental, and social effects for people and carers affected by the condition. Capturing and analysing this data will help provide better information to improve care and treatments. We would like the Octopus data to contribute to this if you are happy for us to do so.
We also encourage all Octopus participants to sign up to the MS Register at https://ukmsregister.org/octopus.

3 Will my data or samples be used for future research?

When you agree to take part in Octopus, the information about your health and care may be provided to researchers running other research studies in this organisation, the MS Register and in other organisations. This data will be anonymised so we will not share information with others that can 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.

These organisations may be universities, NHS organisations or companies involved in health and care research in this country or abroad. Your information and samples will only be used by organisations and researchers to conduct research in

accordance with relevant legislation, ethics, and NHS research policy requirements.

It will not be used to make decisions about future services available to you, such as insurance.

If there is a risk that you can be identified your data and samples will only be used in research that has been independently reviewed by an ethics committee and with permission from UCL.

For the optional (or extra) samples donated, if there are any unused samples are not used at the end of the trial, we ask your permission for these samples to be stored for use in future projects about MS and other neurological diseases, at the Welsh Neuroscience Research Tissue Bank (WNRTB). At this point they will be overseen by WNRTB procedures.

If you decide you would not like give this permission, then any unused sample will be destroyed at the end of the study. If you decide to withdraw consent for the use of your samples at any point, please let your study doctor and nurse know.

Please be aware we will not be able to remove your sample(s) from completed analyses or projects but prevent from any further use.

4 What will happen to the results of the Octopus study?

When the study is completed, we will publish a summary of the results on the MRC CTU at UCL website: https://www.mrcctu.ucl.ac.uk/.

We will also publish the results in medical journals, so that other doctors can see them. You can ask your doctor for a copy of any publication. Your identity and any personal details will be kept confidential. No named information about you will be published in any report of this study.

5 Who is organising and funding the study?

This study is sponsored by UCL and organised by the MRC Clinical Trials Unit at UCL, which has run studies for many years. The study coordination, data collection, analysis and administration will be provided by the MRC CTU at UCL. You can find out more about us at https://www.mrcctu.ucl.ac.uk/.

Your study doctor or neurologist are not receiving any money or other payment for asking you to be part of the study.

University College London (UCL) as the Sponsor, has overall responsibility for the conduct of the study. We are responsible for ensuring the study is carried out ethically and in the best interests of the study participants.

The study is funded by a grant awarded by the MS Society with further supportive funding from UCL.

6 Who has reviewed the Octopus study?

The study has been reviewed by international scientists and other doctors and experts in the field of multiple sclerosis and its treatment. It has been approved by London - Hampstead Research Ethics Committee and the Health Research Authority (HRA).

It has been authorised by the Medicines and Healthcare products Regulatory Agency (MHRA), as well as by the independent NHS research ethics committee and your hospital's Research and Development Office. The Integrated Research Application System (IRAS) ID for the study is 1003943.

7 What if new information becomes available during the study?

Sometimes during a study, new information becomes available about the treatments that are being studied. If this happens, your doctor will tell you about it and discuss with you whether you want to continue the study.

If you decide to stop taking part in the study, your doctor will arrange for your care to continue outside of the study.

Your doctor might also suggest that it is in your best interests to stop taking part in the study. Your doctor will explain the reasons and arrange for your care to continue outside the study.

8 What if something goes wrong for me?

If you have any concerns about the way you have been approached or treated in the study, please talk to your study doctor or nurse. You can also contact Patient Advice and Liaison Service (PALS) or Patient Advice & Support Service (PASS) at your local site. They can offer confidential advice, support and information based on your concerns.

Every care will be taken in the course of this clinical trial/ study. However, in the unlikely event that you are injured by taking part, compensation may be available. If you suspect that the injury 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 study doctor, please make the claim in writing to Professor Jeremy Chataway, who is the Chief Investigator for the clinical trial and is based at UCL. 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.

Participants may also be able to claim compensation for injury caused by participation in this clinical trial without the need to prove negligence on the part of UCL or another party. You should discuss this possibility with your study.

Regardless of this, 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 or about any side effects (adverse events) you may have experienced due to your participation in the clinical trial, the normal National Health Service complaints mechanisms are available to you. Please ask your study doctor if you would like more information on this. Details can also be obtained from the NHS website.

9 Contacts for further information

If you want further information about the Octopus study, information is also available on our website www.ms-octopus.info or the UKMSR (https://ukmsregister.org/octopus). Please also contact your study doctor or nurse (see below).

Name of doctor or nurse
Hospital Department, Hospital
Address; Address
Tel: XXXXX XXX XXX

Thank you for taking the time to read this information and for considering taking part in Octopus. Please feel free to keep this information sheet. If you decide to take part in Octopus, you will be asked to sign a consent form and you will be given a copy to take home.