

NCI Community Oncology Research Program – Kansas City (NCORP-KC)

Consent Form

Study Title for Study Participants: Testing the addition of a blood pressure medication, carvedilol, to HER-2 targeted therapy for metastatic breast cancer to prevent cardiac toxicity

Official Study Title for Internet Search on <http://www.ClinicalTrials.gov>: S1501, “Prospective Evaluation of Carvedilol in Prevention of Cardiac Toxicity in Patients with Metastatic HER-2+ Breast Cancer, Phase III.”

What is the usual approach to potential heart-related side effects which can occur during cancer treatment?

Cancer treatment can cause side effects including heart problems. The usual approach is to wait until these side effects occur and then treat the side effects. People who do not take part in this study will receive standard medications that have been approved by the Food and Drug Administration (FDA) for heart problems if and when they occur.

What are my other choices if I do not take part in this study?

If you decide not to take part in this study, you have other choices. For example:

- you may choose to have the usual approach described above
- you may choose to take part in a different study, if one is available
- or you may choose not to be treated for cancer but you may want to receive comfort care to relieve symptoms.

Why is this study being done?

You have cancer and will be receiving treatment that may cause heart problems. The purpose of this study is to test whether carvedilol can reduce the occurrence of heart problems during your cancer treatment. Carvedilol (Coreg[®]) is a medication that is FDA approved and used to treat congestive heart failure and high blood pressure and is not a new medication. It has been shown in small studies to protect the heart from side effects of chemotherapies such as doxorubicin (Adriamycin[®]) and trastuzumab (Herceptin[®]). The effects of carvedilol will be compared to the usual approach. If you are already taking a beta blocker, angiotensin receptor blocker (ARB), or angiotensin converting enzyme (ACE) inhibitor, you can still be part of the study. There will be about 817 people taking part in this study.

What are the study groups?

There are 3 study groups. If you are not currently taking a beta blocker or ACE inhibitor, you will be randomly assigned to Group 1 or Group 2. If you are already taking a beta blocker, ARB, or ACE inhibitor, you will not be randomized and automatically assigned to Group 3.

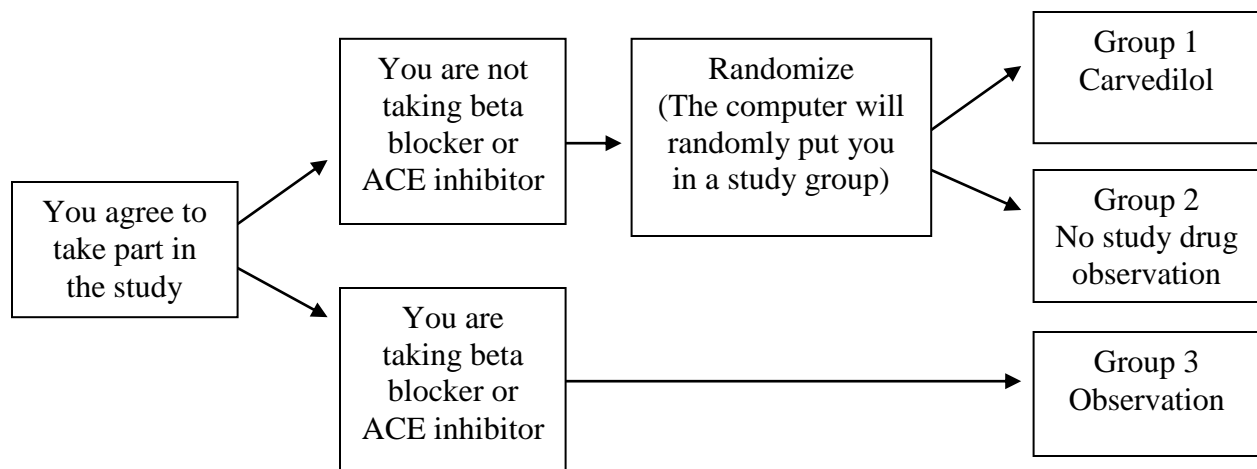
If you are randomized, a computer will by chance assign you to treatment groups in the study. This is called randomization. This is done by chance because no one knows if one study group is better or worse than the others.

Group 1 patients will take carvedilol by mouth twice a day for 108 weeks or until you develop a heart problem. At Week 3, a visit to the clinic is required to make sure you do not have any side effects from carvedilol before you receive more drug to continue on the study. A phone call is acceptable if you cannot make it into the clinic for the Week 3 blood pressure check. The study will collect information about your health every 12 weeks for 108 weeks.

Group 2 patients will not take any study drug. The study will collect information about your health every 12 weeks for 108 weeks.

Group 3 patients will continue to take the beta blocker, ARB, or ACE inhibitor you are already taking for other medical reasons. The study will collect information about your health every 12 weeks for 108 weeks.

Another way to find out what will happen to you during this study is to read the chart below. Start reading at the left side and read across to the right, following the lines and arrows.



How long will I be in this study?

Your doctor will watch you for side effects and follow your condition for 108 weeks from when you start the study.

What extra tests and procedures will I have if I take part in this study?

Most of the exams, tests, and procedures you will have are part of the usual approach for your cancer. However, there are some extra procedures that you will need to have if you take part in this study. Patients in all groups will receive the same exam tests and procedures while on the study.

You will receive an echocardiogram which is an ultrasound of the heart. No radiation is involved in this study. An ultrasound uses sound waves to make pictures of the heart. Currently, it is recommended that patients receiving trastuzumab have an echocardiogram every 12 weeks to monitor their heart function for any side effects. This is standard of care and a routine test. You may receive a few extra pictures to assess for a new echocardiogram technique called global longitudinal strain. This is for research purposes only at no additional cost. This will require only a few minutes and evaluates the elasticity of the heart. It will involve no new or invasive procedures.

A blood specimen will be taken for the study when you start the study and once every 12 weeks on the study. This sample is required in order for you to take part in this study because the research on the sample is an important part of the study. The blood will be tested for markers such as changes in your DNA and protein levels that may be related to heart problems. Blood will be collected at the same time other blood is drawn for lab work. Left over blood may be stored for optional biobanking and unknown future testing. This information is explained in the additional studies section.

Your privacy is very important and the researchers will make every effort to protect it. Your test results will be identified by a unique code and the list that links the code to your name will be kept separate from your sample and health information. Results of these research tests will not be available to you or your study doctor.

Neither you nor your health care plan/insurance carrier will be billed for the collection of the blood that will be used for this study.

What possible risks can I expect from taking part in this study?

If you choose to take part in this study, there is a risk that:

- **You may lose time at work or home and spend more time in the hospital or doctor's office than usual.**
- **You may be asked sensitive or private questions which you normally do not discuss.**
- **The study drug may not be better, and could possibly be worse, than the usual approach.**
- **There is a risk someone could get access to the personal information in your medical records or other information researchers have kept about you. Someone might be able to trace this information back to you. The researchers believe the chance that someone will identify you is very small, but the risk may change in the future as people come up with new ways of tracing information. In some cases, this information could be used to make it harder for you to get or keep a job. There are**

laws against misuse of genetic information, but they may not give full protection. The researchers believe the chance these things will happen is very small, but cannot promise that they will not occur.

- There can also be a risk in finding out new genetic information about you. New health information about inherited traits that might affect you or your blood relatives could be found during a study.

The drug used in this study may affect how fast your heart beats. It is unlikely to affect how different parts of your body work such as your liver, kidneys, heart, and blood.

There is also a risk that you could have side effects from the study drug.

Here are important points about side effects:

- The study doctors do not know who will or will not have side effects.
- Some side effects may go away soon, some may last a long time, or some may never go away.
- Some side effects may be serious.

Here are important points about how you and the study doctor can make side effects less of a problem:

- Tell the study doctor if you notice or feel anything different so they can see if you are having a side effect.
- The study doctor may be able to treat some side effects.
- The study doctor may adjust the study drugs to try to reduce side effects.

The tables below show the most common and the most serious side effects that researchers know about. There might be other side effects that researchers do not yet know about or are uncommon. If important new side effects are found, the study doctor will discuss these with you.

Possible Side Effects of Carvedilol

COMMON, SOME MAY BE SERIOUS In 100 people receiving carvedilol, more than 20 and up to 100 may have:
<ul style="list-style-type: none">• Tiredness• Dizziness

OCCASIONAL, SOME MAY BE SERIOUS In 100 people receiving carvedilol, from 4 to 20 may have:
<ul style="list-style-type: none">• High blood sugar• Swelling of the body• Abnormal heartbeat• Low or high blood pressure• Heart failure which may cause shortness of breath, swelling of ankles, and tiredness• Headache• Diarrhea• Nausea• Vomiting• Weight gain• Pain in joints• Cough• Abnormal male sexual function (impotence)

RARE, AND SERIOUS In 100 people receiving carvedilol, 3 or fewer may have:
<ul style="list-style-type: none">• Fainting• Rash• Severe skin rash with blisters and peeling which can involve inside of mouth and other parts of the body if allergic to medication• Worsening cataract eye disease• Blurred vision• Severe asthma attack

Let your study doctor know of any questions you have about possible side effects. You can ask the study doctor questions about side effects at any time.

There is an increased risk that you may have low blood pressure while taking carvedilol. You should have your blood pressure checked weekly either at home or doctor's office for the first 4 weeks and then as your study doctor suggests to monitor your blood pressure.

Reproductive risks: You should not get pregnant, breastfeed, or father a baby while in this study. The drug used in this study could be very damaging to an unborn baby. If you get pregnant during this study, you should tell your study doctor as soon as possible. You will be followed to collect information about your pregnancy and birth outcome. Check with

the study doctor about what types of birth control, or pregnancy prevention, to use while in this study.

What possible benefits can I expect from taking part in this study?

It is not possible to know at this time if taking the study drug is better than the usual approach so this study may or may not help you. This study will help researchers learn things that will help people in the future.

If the study is positive, carvedilol may reduce the risk of heart problems caused by your cancer treatment.

Can I stop taking part in this study?

Yes. You can decide to stop at any time. If you decide to stop for any reason, it is important to let the study doctor know as soon as possible so you can stop safely. If you stop, you can decide whether or not to let the study doctor continue to provide your medical information to the organization running the study.

The study doctor will tell you about new information or changes in the study that may affect your health or your willingness to continue in the study.

The study doctor may take you out of the study:

- If your health changes and the study is no longer in your best interest
- If new information becomes available
- If you do not follow the study rules
- If the study is stopped by the sponsor (SWOG), Institutional Review Board (IRB) or FDA.

What are my rights in this study?

Taking part in this study is your choice. No matter what decision you make, and even if your decision changes, there will be no penalty to you. You will not lose medical care or any legal rights.

For questions about your rights while in this study, call the Central Institutional Review Board at 888-657-3711.

What are the costs of taking part in this study?

For Group 1 patients, the carvedilol will be supplied at no charge while you take part in this study. The cost of getting the carvedilol ready and giving it to you is also provided at no charge. It is possible that the carvedilol may not continue to be supplied while you are on the study. Although not likely, if this occurs, your study doctor will talk to you about your options. There are no additional costs associated with global longitudinal strain measurement.

You and/or your health plan/insurance company will need to pay for all of the other costs of treating your cancer while in this study, including the cost of tests, procedures, or medicines to

manage any side effects, unless you are told that certain tests are supplied at no charge. Before you decide to be in the study, you should check with your health plan or insurance company to find out exactly what they will pay for.

You will not be paid for taking part in this study.

What happens if I am injured or hurt because I took part in this study?

If you are injured or hurt as a result of taking part in this study and need medical treatment, please tell your study doctor. The study sponsors will not offer to pay for medical treatment for injury. Your insurance company may not be willing to pay for study-related injury. If you have no insurance, you would be responsible for any costs.

If you feel this injury was a result of medical error, you keep all your legal rights to receive payment for this even though you are in a study.

Who will see my medical information?

Your privacy is very important to us. The study doctors will make every effort to protect it. The study doctors have a privacy permit to help protect your records if there is a court case. However, some of your medical information may be given out if required by law. If this should happen, the study doctors will do their best to make sure that any information that goes out to others will not identify who you are. Some of your health information, and/or information about your specimen, from this study will be kept in a central database for research. Your name or contact information will not be put in the database.

There are organizations that may inspect your records. These organizations are required to make sure your information is kept private, unless required by law to provide information. Some of these organizations are:

- The study sponsor: SWOG
- The IRB is a group of people who review the research with the goal of protecting the people who take part in the study.
- The Food and Drug Administration and the National Cancer Institute in the U.S., and similar ones if other countries are involved in the study.
- University of Michigan ECHO Core Lab

Where can I get more information?

You may visit the NCI Web site at <http://cancer.gov/> for more information about studies or general information about cancer. You may also call the NCI Cancer Information Service to get the same information at: 1-800-4-CANCER (1-800-422-6237).

A description of this clinical trial will be available on <http://www.ClinicalTrials.gov>, as required by U.S. Law. This Web site will not include information that can identify you. At most, the Web site will include a summary of the results. You can search this Web site at any time.

Who can answer my questions about this study?

You can talk to the study doctor about any questions or concerns you have about this study or to report side effects or injuries. Contact the study doctor _____ (*insert name of study doctor[s]*) at _____ (*insert telephone number*).

ADDITIONAL STUDIES SECTION:

This section is about optional studies you can choose to take part in

This part of the consent form is about optional studies that you can choose to take part in. You will not get health benefits from any of these studies. The researchers leading this optional study hope the results will help other people with cancer in the future.

The results will not be added to your medical records and you or your study doctor will not know the results.

You will not be billed for these optional studies. You can still take part in the main study even if you say “no” to any or all of these studies. If you sign up for but cannot complete any of the studies for any reason, you can still take part in the main study.

Circle your choice of “yes” or “no” for each of the following studies.

Optional Biobanking for Possible Future Studies

Researchers are trying to learn more about cancer, diabetes, and other health problems. Much of this research is done using samples from your blood. Through these studies, researchers hope to find new ways to prevent, detect, treat, or cure health problems.

Some of these studies may be about genes. Genes carry information about features that are found in you and in people who are related to you. Researchers are interested in the way that genes affect how your body responds to treatment.

If you choose to take part, leftover blood and DNA will be stored from samples you submit. The researchers ask your permission to store and use your samples and related health information (for example, your response to cancer treatment, results of study tests and medicines you are given)

for medical research. The research that may be done is unknown at this time. Storing samples for future studies is called “biobanking”. The Biobank is being run by SWOG and supported by the National Cancer Institute.

What Is Involved?

If you agree to take part, here is what will happen next:

- 1) Left over blood obtained from the main study will be used. Additional blood will not be collected.
- 2) Your sample and some related health information may be stored in the Biobank, along with samples and information from other people who take part. The samples will be kept until they are used up.
- 3) Qualified researchers can submit a request to use the materials stored in the Biobanks. A science committee at the clinical trials organization, and/or the National Cancer Institute, will review each request. There will also be an ethics review to ensure that the request is necessary and proper. Researchers will not be given your name or any other information that could directly identify you.
- 4) Neither you nor your study doctor will be notified when research will be conducted or given reports or other information about any research that is done using your samples.
- 5) Some of your genetic and health information may be placed in central databases that may be public, along with information from many other people. Information that could directly identify you will not be included.

What are the Possible Risks?

- 1) There is a risk that someone could get access to the personal information in your medical records or other information researchers have stored about you.
- 2) There is a risk that someone could trace the information in a central database back to you. Even without your name or other identifiers, your genetic information is unique to you. The researchers believe the chance that someone will identify you is very small, but the risk may change in the future as people come up with new ways of tracing information.
- 3) In some cases, this information could be used to make it harder for you to get or keep a job or insurance. There are laws against the misuse of genetic information, but they may not give full protection. There can also be a risk in knowing genetic information. New health information about inherited traits that might affect you or your blood relatives could be found during a study. The researchers believe the chance these things will happen is very small, but cannot promise that they will not occur.

How will Information About Me be Kept Private?

Your privacy is very important to the researchers and they will make every effort to protect it. Here are just a few of the steps they will take:

- 1) When your sample(s) is sent to the researchers, no information identifying you (such as your name) will be sent. Samples will be identified by a unique code only.

- 2) The list that links the unique code to your name will be kept separate from your sample and health information. Any Biobank and SWOG staff with access to the list must sign an agreement to keep your identity confidential.
- 3) Researchers to whom SWOG sends your sample and information will not know who you are. They must also sign an agreement that they will not try to find out who you are.
- 4) Information that identifies you will not be given to anyone, unless required by law.
- 5) If research results are published, your name and other personal information will not be used.

What are the Possible Benefits?

You will not benefit from taking part.

Are There any Costs or Payments?

There are no costs to you or your insurance. You will not be paid for taking part. If any of the research leads to new tests, drugs, or other commercial products, you will not share in any profits.

What if I Change my Mind?

If you decide you no longer want your samples to be used, you can call the study doctor, _____, (*insert name of study doctor for main trial*) at _____ (*insert telephone number of study doctor for main trial*) who will let the researchers know. Then, any sample that remains in the bank will no longer be used and related health information will no longer be collected. Samples or related information that have already been given to or used by researchers will not be returned.

What If I Have More Questions?

If you have questions about the use of your samples for research, contact the study doctor, _____, (*insert name of study doctor for main trial*), at _____ (*insert telephone number of study doctor for main trial*).

Please circle your answer to show whether or not you would like to take part in each option:

SAMPLES FOR FUTURE RESEARCH STUDIES:

My samples and related information may be kept in a Biobank for use in future health research.

YES NO

This is the end of the section about optional studies

Future Contact

I agree to allow my study doctor, or someone approved by my study doctor, to contact me regarding future research involving my participation in this study.

YES NO

Release

By signing this form you authorize NCORP-KC to access and obtain information that is required for the study. This may include your medical records, labs, radiologic films and reports and pathology specimens. This authorization to disclose your medical records shall not expire, even upon death, unless specifically revoked in writing by you.

You will get a copy of this form. If you want more information about this study, ask your study doctor.

My Signature Agreeing to Take Part in the Study

I have read this consent form or had it read to me. I have discussed it with the study doctor and my questions have been answered. I will be given a signed copy of this form. I agree to take part in the study.

Participant Name _____

Participant Signature _____

Date _____

Person Obtaining Consent _____

Signature of Person Obtaining Consent _____

Date _____

Specimen Consent Supplemental Sheets

How are Specimens Used for Research?

Where do specimens come from?

A specimen may be from a blood sample or from bone marrow, skin, toenails or other body materials. People who are trained to handle specimens and protect donors' rights make sure that the highest standards of quality control are followed by SWOG. Your doctor does not work for SWOG, but has agreed to help collect specimens from many patients. Many doctors across the country are helping in the same way.

Why do people do research with specimens?

Research with specimens can help to find out more about what causes cancer, how to prevent it, how to treat it, and how to cure it. Research using specimens can also answer other health questions. Some of these include finding the causes of diabetes and heart disease, or finding genetic links to Alzheimer's.

What type of research will be done with my specimen?

Many different kinds of studies use specimens. Some researchers may develop new tests to find diseases. Others may develop new ways to treat or even cure diseases. In the future, some of the research may help to develop new products, such as tests and drugs. Some research looks at diseases that are passed on in families (called genetic research). Research done with your specimen may look for genetic causes and signs of disease.

How do researchers get the specimen?

Researchers from universities, hospitals, and other health organizations conduct research using specimens. They contact SWOG and request samples for their studies. SWOG reviews the way that these studies will be done, and decides if any of the samples can be used. SWOG gets the specimen and information about you from your hospital, and sends the specimen samples and some information about you to the researcher. SWOG will not send your name, address, phone number, social security number or any other identifying information to the researcher.

Will I find out the results of the research using my specimen?

You will not receive the results of research done with your specimen. This is because research can take a long time and must use specimen samples from many people before results are known. Results from research using your specimen may not be ready for many years and will not affect your care right now, but they may be helpful to people like you in the future.

Why do you need information from my health records?

In order to do research with your specimen, researchers may need to know some things about you. (For example: Are you male or female? What is your race or ethnic group? How old are you? Have you ever smoked?) This helps researchers answer questions about diseases. The information that will be given to the researcher may include your age, sex, race, diagnosis, treatments and family history. This information is collected by your hospital from your health record and sent to SWOG. If more information is needed, SWOG will send it to the researcher.

Will my name be attached to the records that are given to the researcher?

No. Your name, address, phone number and anything else that could identify you will be removed before they go to the researcher. The researcher will not know who you are.

How could the records be used in ways that might be harmful to me?

If your confidential genetic information is discovered, you may suffer from genetic discrimination. Genetic discrimination occurs if people are treated unfairly because of differences in their genes that increase their chances of getting a certain disease. In the past, this could have resulted in the loss of health insurance or employment. Because of this, The Genetic Information Nondiscrimination Act of 2008, also referred to as GINA, was passed by Congress to protect Americans from such discrimination. The new law prevents discrimination from health insurers and employers. This act was signed into federal law on May 21, 2008, and went into effect May 2009. This law does not cover life insurance, disability insurance and long-term care insurance.

While this study has safeguards in place to protect your confidential genetic information and to make it extremely unlikely that your identity would be connected with any special studies that are performed on your tissue, it is possible that this information could be discovered by someone who is unauthorized to have access to it.

How am I protected?

SWOG is in charge of making sure that information about you is kept private. SWOG will take careful steps to prevent misuse of records. Your name, address, phone number and any other identifying information will be taken off anything associated with your specimen before it is given to the researcher. This would make it very difficult for any research results to be linked to you or your family. Also, people outside the research process will not have access to results about any one person which will help to protect your privacy.

What if I have more questions?

If you have any questions, please talk to your doctor or nurse, or call our research review board at 888-657-3711.