

The IIH Weight trial



Invitation to join a research study

What is this trial for?

We are investigating a condition called IIH.

You do not have this condition.

IIH occurs mostly in obese young women and causes headaches. It can lead to blindness.

We are asking you to take part in the trial as part of a control group. We would like to compare this control group to patients with IIH.

Why am I being asked to take part?

You are being asked to take part because you have a Body Mass Index (BMI) of over 35.

Do I have to take part?

No. Taking part is your choice. No one will think badly of you if you don't take part. You can withdraw at any time if you choose to take part.

What are the possible risks?

If you join the trial you will have a lumbar puncture. There is a risk of headache after a lumbar puncture.

Will I be paid for taking part?

We will refund your travel costs and offer up to £200 compensation for your time.

What will happen to me if I take part?

You will have an assessment day at Queen Elizabeth Hospital, Birmingham.

Before the assessment day

First you will discuss the study with a researcher. They will ask some questions to check you can take part. You can also ask any questions you may have.

If you are seen in person, you will be asked to give written consent to continue, and you will be given a headache diary and a bottle for a 24 hour urine sample. You may be asked to take home a sleep monitor.

You will be asked to give written consent and do these at the assessment day if you discuss the study on the phone.



At the assessment day

You will have at least a week to read this leaflet before the assessment day to give you more time to think about if you want to take part.

At this assessment day you will have eye tests, memory tests and nerve tests. You will also have a lumbar puncture and give some blood samples. You will complete some questionnaires about your health.



Exit the study

After your assessment day you leave the study.

Where can I get more information?

The rest of this leaflet has the full details. Please read on if you are interested!

For questions about the study please contact:

Sharon Wyatt or Samantha Timmis,
(0121) 371 3170

A randomised controlled trial of bariatric surgery versus a community weight loss programme for the sustained treatment of Idiopathic Intracranial Hypertension: the IIH:WT Trial



Participant Invitation and Information Sheet Control Group sub-study

Invitation to take part in a clinical study to improve the understanding of Idiopathic Intracranial Hypertension (IIH).

Please note: you do not have IIH, you are being asked to participate as a control.

You are being invited to take part in a clinical study. Whether you take part is voluntary, and before you decide it is important for you to understand why the research is being done and what it will involve. Please consider the following information carefully and discuss it with others and your doctor if you wish. Do feel free to ask if there is anything that is not clear or if you would like more information. Take time to decide whether or not you wish to take part.

Thank you for reading this.

Part 1 tells you why we are doing this study and what will happen if you take part.

Part 2 gives you more detailed information about the conduct of the study.

Local PI: Dr Alexandra Sinclair
Local Nurse: Sharon Wyatt or Samantha Timmis (0121) 371 3170
Local Patient Advice and Liaison Service (PALS): (0121) 371 3280
BCTU: Ryan Ottridge (0121) 415 9125

Part 1

What is this study for?

Idiopathic intracranial hypertension (IIH) is a condition with an unknown cause. Over 90% of patients with IIH are overweight and weight loss is the most effective treatment. We don't know how weight causes IIH. We also don't know if weight is a factor in many of the health issues faced by people with IIH.

You do not have IIH. We would like to compare the symptoms and biological (laboratory) features seen in people with IIH to people of a similar age, gender and weight who don't have IIH. This will help us determine the role of weight in IIH.

Why have I been invited?

We are asking you to take part because you have a Body Mass Index (BMI) of over 35 but no serious illnesses. We are asking you to take part in the study as part of a control group.

Do I have to take part?

No, taking part in the research is entirely voluntary. It is up to you and your decision will not affect the standard of care you receive.

If you decide to take part, you will be given this information sheet to keep and be asked to sign a consent form. If you decide to take part, you are still free to withdraw at any time and without giving a reason. If you do not take part or if you withdraw from the study, you will continue to receive your medical care which will not be affected.

Before you decide to take part or not please read the rest of this leaflet carefully. If you think your partner, family or friends might be interested in giving their views too please show it to them as well. If you have any questions please ask a research team member.

What will happen to me if I take part?

We are asking you to take part in a control group, so **you will not receive any trial treatment.**

You may have a telephone call to discuss the study and see if you could take part, or you may discuss the study in person with a researcher.

If you talk in person and are interested in taking part, you will be asked to sign a consent form before carrying on.

Then you will be given a headache diary to take home and fill in. You will be given a bottle to collect a 24 hour urine sample. A nurse may show you how to use a sleep monitor to take home and record your sleep for two nights

Then you will be booked for an assessment day.

If you discuss taking part on the phone, the researcher will have some questions to check you can take part. Then you will be booked for an assessment day.

At your assessment day, you will be asked to sign a consent form before carrying on. You will be given a urine collection bottle and sleep monitor at your assessment day. You will be asked to complete the headache diary on the day.

This assessment day will be at least a week after you first talk about the study so you have time to think and make sure you want to carry on.

The research nurse will check you want to continue. If you do, you will have a day of tests and then leave the study. Your test results will be compared to patients with IIH.

We will refund your travel costs for attending this extra clinic appointment. You will also be offered up to £200 compensation for your time.

The full schedule of tests we will be asking you to undertake is described below in Table 1:

Table 1: Assessments in IIH:WT Control group sub-study

Assessments	To complete at home before assessment day	Assessment day	To complete at home after assessment day
Consent for assessments		Yes	
Visual tests (field, scan, photo)		Yes	
Skin sensitivity tests, nerve electrical tests and skin sample		Yes	
Brain scan		Yes	
Memory tests		Yes	
Medical history, weight/height, blood pressure, body composition		Yes	
Blood sample		Yes	
Lumbar puncture and CSF sample		Yes	
Skin sample (skin biopsy)		Yes	
Questionnaires		Yes	
Headache diary	Yes		
24 hour urine sample	Yes		
Home sleep apnoea monitoring	Yes		
Post-lumbar puncture headache diary			Yes

You should fast before your visit. We advise to stop eating from midnight the night before. You can drink water. We will provide a light meal during your assessment.

Details of tests to be carried out at Queen Elizabeth Hospital, Birmingham:

1. We would like to collect a sample of your urine. The urine sample will involve collecting all the urine you pass over a 24 hour period.
2. Your body mass index (BMI) will be calculated from your weight and height. Your medical history will also be taken.
3. Your vision will be tested using a number of different techniques which evaluate how well you see colour, your ability to read the letters on a chart and how large your field of vision is. We will also use a scan to check the back of your eye is healthy
4. We will also ask you to complete a set of questionnaires about your quality of life.
5. We would like to collect a sample of your blood. The amount of blood collected will be 54 ml, or under 6 tablespoons.

We would like to take the blood samples whilst you are fasting and also after a meal. To make sure this meal is the same for everyone in the study, you will be given a milkshake meal between the first blood samples and the last blood sample. The last blood sample will be 2 hours after the milkshake meal. Samples may be taken with a cannula.

6. We would like to perform a lumbar puncture (LP), which is described in detail on page 8. It is like an injection in the spine. We want to use this to measure your brain pressure. We are doing this because very little is known about the effect of weight on brain pressure. In IIH (the condition we don't think you have) brain pressure is very high. We want to check your brain pressure and find out how weight may influence the brain.

We would like to save a sample of your fluid from the LP. This fluid is called cerebrospinal fluid (CSF). This will help with our laboratory studies. The lumbar puncture will be done by an experienced Neurology doctor with the help of fully trained nurses. The amount of CSF collected will be around 10 mL, or about a tablespoon.

7. We would like to collect a sample of your skin taken from the lower leg under local anaesthetic. This is not normally considered painful. This is about the size of half of a grain of rice. This is explained later in this leaflet on page 8.

These samples are to give us a clearer idea of biomarkers, or biological signs, to compare with patients with IHH. This may help with future diagnosing and with future treatment.

8. We would like to perform some memory and concentration tests. These take up to two hours and involve watching a computer screen and pressing the keyboard to show a response. There is also an IQ test, on paper.

9. We would like to test you for peripheral neuropathy (slowing of the nerves). This will take about half an hour.

To do this, we do a basic routine neurological examination testing strength, sensation, and reflexes. Next there are some electrical tests on the skin which may cause mild discomfort or tingling. They are not generally considered painful.

The order and timing of the assessment day is shown in the flow diagram across the page. Some of these tests may be carried out on a different day if hospital staff and departments are not available or if it suits you (for example to make the assessment day shorter if you require it).

We will also do tests for a condition called allodynia, which is when you are sensitive to things that are not normally considered painful. This involves being lightly touched on the head or forearm and telling the doctor if you find it painful.

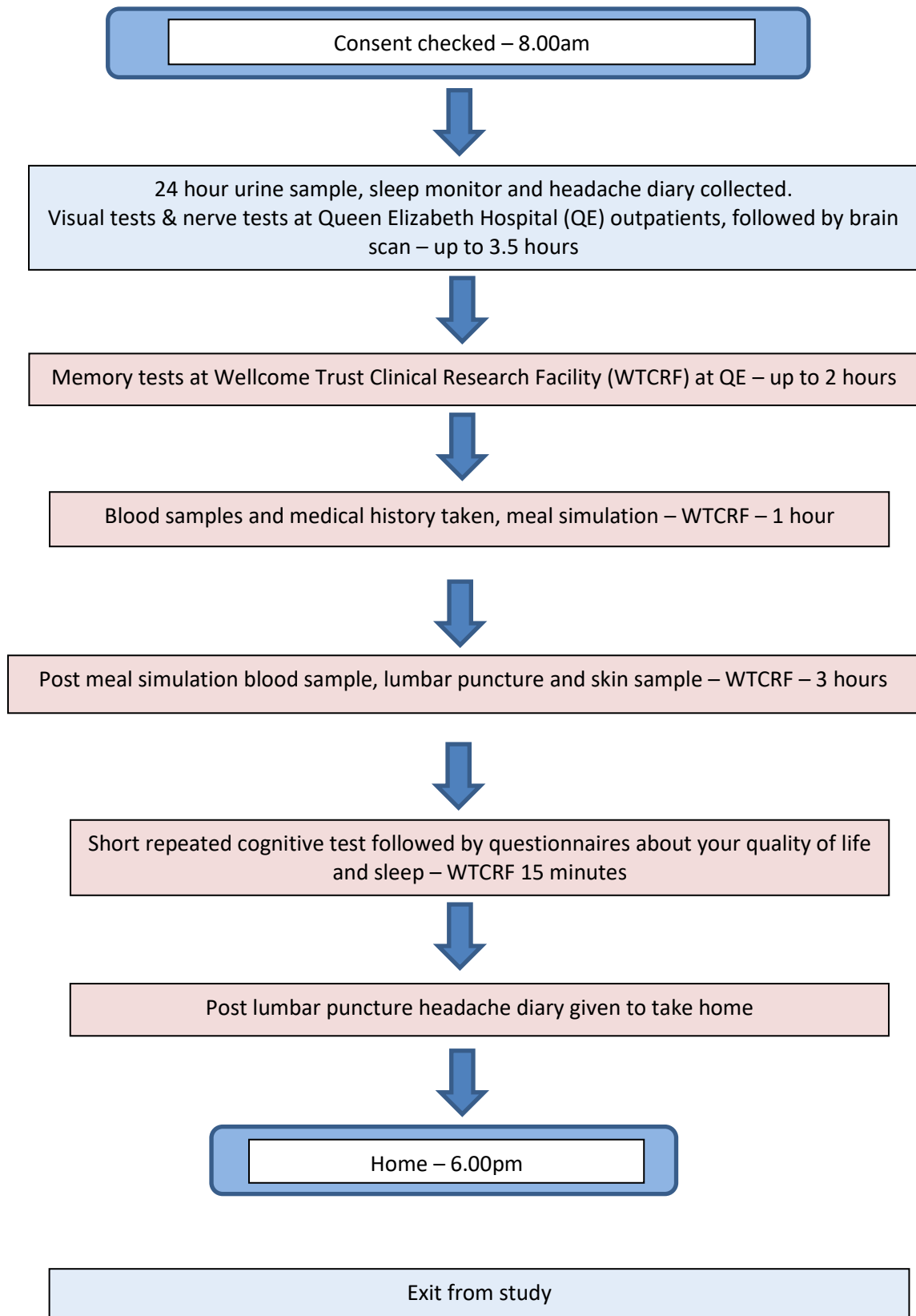
10. We would like to carry out some brain scans (MRI scans). These take about 30 minutes. These brain scans are explained in more detail later in this leaflet on page 8.

11. We will ask you to assess if you have headaches. We will ask you to fill in a questionnaire about headaches and keep a week long headache diary. We will give this to you at or before your assessment day. We will ask you to complete another diary after the lumbar puncture.

12. We would like to monitor your sleep with a simple device that uses a clip connected to your finger and a strap like a rubber band around your chest. It also uses two small soft plastic prongs that go into your nostrils about half a centimetre, or around the width of a pencil. This is to see if you suffer from a condition called sleep apnoea, a condition that makes you snore and interrupts your sleep.

You will be shown how to use the device by a nurse. Then you will take it home, where it will monitor your sleep for two nights. There is more information about sleep apnoea later in this leaflet, on page 9.

Figure 2 – Assessment day in the IIH:WT Control group sub-study



What is a lumbar puncture?

A lumbar puncture (LP) is a procedure used to measure your cerebrospinal fluid. It feels like an injection in your spine (epidural or spinal). You may have had one when having a baby.

Before the LP, the doctor doing the test will discuss what will happen and you will be able to ask any questions. Where the needle is inserted, the nurse will clean the area and a local anaesthetic will be used to numb it.

The doctor will ask you if you have any bleeding disorders, reactions to local anaesthetics or are taking any medications that increase your chance of bleeding, for example aspirin, clopidogrel or warfarin.

The most common side effects include:

- back pain and bruising
- headache after the LP in 1 in 6 patients.

Headaches occurring after a LP are usually mild and get better in a few days with rest. Rarely the headache can be more severe, can cause vomiting and last over a week, necessitating time off work and bed rest.

Rarer, but more serious side effects include bleeding, and infections can happen which may very rarely lead to permanent nerve damage with the potential for paralysis. The exact risk is difficult to define as there have only been a few cases recorded in medical literature but is likely to be less than 1 in 100,000. This risk is reduced by using modern “non-cutting” needles and our doctors have never seen a case of permanent paralysis from an LP.

Our doctors are highly skilled at doing this procedure and will make sure that you receive enough numbing injection before it to ensure your comfort. In the unlikely event there are difficulties with the procedure we may use imaging guidance to help.

If you agree to continue with the study, you will be considered as giving permission to having this procedure and no further written consent will be obtained. However, you

always have the right to withdraw your consent at any point during the study.

What is an MRI scan?

An MRI is a scan used to create images of the brain or other parts of your body. The scan that we use is not designed to find abnormalities in the brain but takes a picture of it for us to compare with patients with IIH.

For the MRI scan you lie on a table confined in a small space inside a cylindrical machine, which uses magnetic fields and radio waves (but not x-rays) to take pictures of your brain. To get good pictures, it is extremely important that you do not move during the scan. Special positioning aids will keep your head from moving and you should try to relax.

The scan itself is a harmless, non-invasive procedure but it is noisy. Some people may feel uncomfortable whilst lying in the scanner tube. The scan takes about 30 minutes.

How and why is a skin sample taken?

A small 3mm piece of skin will be taken from the lower leg in a procedure known as a punch biopsy. The skin is cleaned, and then an injection of local anaesthetic is made. When the skin is numb, a small piece of skin will be removed. There will probably be a little bleeding and then a plaster or bandage is put on. In most cases the site is completely healed with no scarring within a few months. The procedure takes about 15 minutes.

We want to take these skin samples to test the nerves in your skin. This is to test for signs of nerve damage which can occur in metabolic syndrome, a problem which may happen in patients with IIH. We want to compare the density of nerves in your skin to patients with IIH.

What is Sleep Apnoea?

Obstructive sleep apnoea (OSA) is a condition that causes interrupted breathing during sleep. Sleep apnoea is associated with being overweight. We don't know if you have sleep apnoea.

We would like to monitor your sleep for two nights. The monitoring is not painful: a nurse will show you how to use a small device to take home.

When you go to sleep, you clip a sensor to your finger and place a band, like an elastic band, around your chest. You will also place two small soft plastic prongs around half a centimetre, or the width of a pencil, into your nose. These measure the amount of oxygen in your blood as you sleep.

What are the possible disadvantages and risks of taking part?

The main disadvantages and risks of taking part in the study involve the risk of side effects involved in the lumbar puncture, and the discomfort of the lumbar puncture and of the blood samples being taken.

What are the possible benefits?

You will receive a detailed medical assessment including an eye check, sleep apnoea assessment, headache evaluation, as well as a diabetes, cholesterol and blood pressure check.

If any abnormalities are found which require follow up you will be contacted by phone and

if necessary invited to return to discuss them. The researcher will use their clinical judgement to decide if you need to be referred to an appropriate service.

We hope that the results of this study will help us find the differences between healthy people and IIH patients.

Will I be paid for taking part in the study?

We will reimburse travel expenses or parking charges you have incurred as a result of the extra hospital visit. Please keep your receipts and ask your research nurse.

You will also be offered £200 compensation for your time for undergoing a whole day's assessment (or £75 for a half day visit).

What happens when the study stops?

When the study stops the results will be published and the information we get may help us to improve our understanding of IIH. You will be given a copy of the results if you wish.

Will my taking part in the study be kept confidential?

Yes. We will follow ethical and legal practice and all information about you will be handled in confidence. The detailed information is given in Part 2.

Thank you for reading this far – if you are still interested, please continue to Part 2

Part 2 – the details

What will happen if I do not want to carry on with the study?

You can decide not to continue with the study assessments at any time but, if you do, we would still like to keep your data on file and include it in the final study analysis unless you request that it should not be used.

What if there is a problem?

If you are harmed due to someone's negligence, then you may have grounds for a legal action but may have to pay for it. Regardless of this, if you wish to complain, or have any concerns about the way you have been approached or treated during the course of this study, the normal NHS complaints mechanisms are available to you. Taking part in this study would not affect your legal rights.

If you have a concern about any aspect of this study, you should ask to speak to the researchers who will do their best to answer your questions. The contact details for the IIH:WT trial Chief Investigator are: Dr Alex Sinclair, IIHResearch@uhb.nhs.uk. If you are still unhappy and wish to complain formally, you can do this through the NHS Complaints Procedure. Details can be obtained from the hospital.

Will my taking part be kept confidential?

If you decide to take part in the IIH:WT study all information we collect about you during the course of the research will be kept strictly confidential in the same way as your medical records.

Information about your health will be sent by your doctors out of your hospital trust to the IIH:WT trial office at the University of Birmingham Clinical Trials Unit, on paper and electronically, where it will be securely stored under the 1998 Data Protection Act. If you agree to take part in this study, your GP and the other doctors involved in your clinical care may be told of your participation. With your permission, your relevant medical records

may be inspected by authorised individuals from the Birmingham Clinical Trials Unit or your hospital. They may also be looked at by the study team and regulatory authorities. This is to check that the study is being carried out correctly. All will have a duty of confidentiality to you as a research participant and will do their best to meet this duty.

In line with clinical study guidelines, at the end of the study the data will need to be securely archived (stored) for up to 20 years. Arrangements for confidential destruction will then be made.

What will happen to the samples I give?

The blood, cerebrospinal fluid, urine, and skin samples will be stored first in the laboratory at the hospital in which you have been seen. The samples will then be stored at the University of Birmingham. They will be kept anonymously and not linked directly to any of your identifiable information.

You are entitled at any stage to withdraw your consent for your samples to be stored, without giving a reason. In this case, the tissues will be destroyed according to Human Tissue Authority guidance.

Your samples will be stored at the University of Birmingham biological sample biobank after they have been analysed at the end of the study.

What will happen to my MRI scans?

Your scans will be sent by the researcher out of this hospital trust to an MRI physicist in New York, USA. Your scans will be anonymised and will not include any personal information which might identify you.

What will happen to the results of the study?

Once all participants have been recruited the results from all participants will be analysed and published in a scientific journal. Your

doctor/research nurse can provide you with a copy of this publication if you are interested. We will publicise the results on the study's website and share the results with participants. Only anonymous data will be published and your name will not appear in any report, presentation or publication.

Who is organising and funding the research?

The IIH:WT trial is sponsored by the University of Birmingham. The Chief Investigator is Dr Alex Sinclair of University Hospitals Birmingham NHS Foundation Trust. The study is funded by the National Institute for Health Research. The research has been reviewed and approved by all these organisations.

Who has reviewed the study?

All research in the NHS is looked at by an independent group of people called a Research Ethics Committee to protect your safety, rights, wellbeing and dignity. This study has been reviewed and approved by Black Country Research Ethics Committee. Research Ethics Committees include healthcare professionals as well as non-medical people, and are completely independent from anyone organising the study. Further details about the National Research Ethics Service can be found at: <http://www.nres.nhs.uk/about-the-national-research-ethics-service/>.

Where can I get further information?

For queries about the study or for further information please contact:

Sharon Wyatt or Samantha Timmis, (0121) 371 3170
or e-mail IIHResearch@uhb.nhs.uk.

The IIH:WT trial co-ordinating centre is located at the Birmingham Clinical Trials Unit, College of Medical & Dental Sciences, Public Health Building, University of Birmingham, Birmingham B15 2TT.

Tel 0121 415 9125, Fax: 0121 415 9135. Web address: www.birmingham.ac.uk/IIHWT.
Email: neuroscience@trials.bham.ac.uk.

Thank you for considering participation in this study.

You will be given a copy of this information sheet and your signed consent form to keep if you decide that you wish to take part in the study.