The ECUSTEC Trial

IMPs

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THE great north CHILDREN'S HOSPITAL

UNIVERSITY OF BIRMINGHAM | BCTU Birmingham Clinical Trials Unit

Chief Investigator: Dr Sally Johnson
Trial Coordinator: Emma Barsoum

The Newcastle upon Tyne Hospitals NHS
NHS Foundation Trust

The ECUSTEC trial is supported by the Efficacy and Mechanism Evaluation (EME) Programme, an MRC and NIHR Partnership

IMPs

- Randomised 1:1 to either:

Placebo arm

Standard therapy
+
Day 1 Placebo
Day 8 Placebo
+
Antibiotic prophylaxis

Active arm

Standard therapy
+
Day 1 Eculizumab
Day 8 Eculizumab
+
Antibiotic prophylaxis

IMPs

Placebo arm

=

Sodium chloride 0.9%

Marketed licensed product

Active arm

=

Eculizumab in
Sodium chloride 0.9%

Marketed licensed product

Dosing

- Dose will be based on the baseline weight for <u>both</u> day 1 and day 8.

Patient bodyweight	Day 1			Day 8 (+/- 1 day)		
	Placebo arm	Active arm		Placebo arm	Active arm	
	Volume of 0.9% Saline	Dose of eculizumab	Total infusion volume (made up with 0.9% Saline)	Volume of 0.9% Saline	Dose of eculizumab	Total infusion volume (made up with 0.9% Saline)
≥40 kg	180ml	900mg	180ml	180ml	900mg	180ml
20 to <40 kg	120ml	600 mg	120ml	120ml	600 mg	120ml
10 to <20 kg	120ml	600 mg	120ml	60ml	300 mg	60ml
5 to <10 kg	60ml	300 mg	60ml	60ml	300 mg	60ml

Blinding

Pharmacy staff
Unblinded***

All other staff & B'ham CTU are blinded
***** Some sites are using a separate unblinded nursing team**

Blinded label
MHRA approved label text and template to be used

Supply of IMPs

	Eculizumab	Sodium chloride 0.9% infusion bag
Initial supply	3 vials to be ordered at start of study	Hospital stock
Ordering	ECUSTEC trial Medication Order Form Sent to Alexion Pharma UK +/- local ordering process	Local ordering process
Receipt	Delivered to pharmacy CT staff Shipped in cold-chain container Record on Accountability log	Local process
Storage	2 – 8 ˚C Segregate as CT supply	Room temp.
Re-ordering	Re-order immediately after dosing!!! Maintain stock level of 3 vials	Local process

Inform CTU when **initial** shipment of Eculizumab is received

Pharmacy

Please <u>do not</u> dispense IMP until pharmacy are in receipt of the Certificate of Vaccination at both Day 1 and Day 8

Notification of Randomisation

- Separate notification email sent to pharmacy

Allocation of IMP

- Send original prescription form + Certificate of Vaccination to Pharmacy
- Pharmacy to log onto online system to view treatment allocation
- Document on the ECUSTEC Treatment Allocation Log

Accountability

- Local pharmacy responsible for maintaining accountability logs

Returns and Disposal of IMP

- Please dispose IMP vials as per local standard practice

Pharmacy

Welcome, Test E Template (xx005).
Last Login date: 24-Apr-2017

You are connected to: Development Change Logout

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HOME PATIENTS HELP TRIAL WEBSITE

Select patient

Patient to view

Trial Number: 10017, DoB: 01 Apr 2016
Trial Number: 10058, DoB: 01 May 2016

Enter trial number to reduce the selection and then click on Search

Search

NEXT

PREVIOUS

EXIT

Pharmacy

Welcome, Test E Template (xx005).
Last Login date: 24-Apr-2017

You are connected to: Development Change Logout

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HOME PATIENTS HELP TRIAL WEBSITE

Confirm patient details

Centre: Great North Children's Hospital

Clinician: Dr Test C Template

DOB: 01 Apr 2016

Trial Number: 10017

Click 'View allocation' to see this patient's treatment allocation.

VIEW ALLOCATION

PREVIOUS

EXIT

Vaccination and prophylactic antibiotics

Ecu increases children's susceptibility to meningococcal disease. To reduce the risk of meningococcal disease associated with the use of Ecu, all ECUSTEC trial participants should be given:

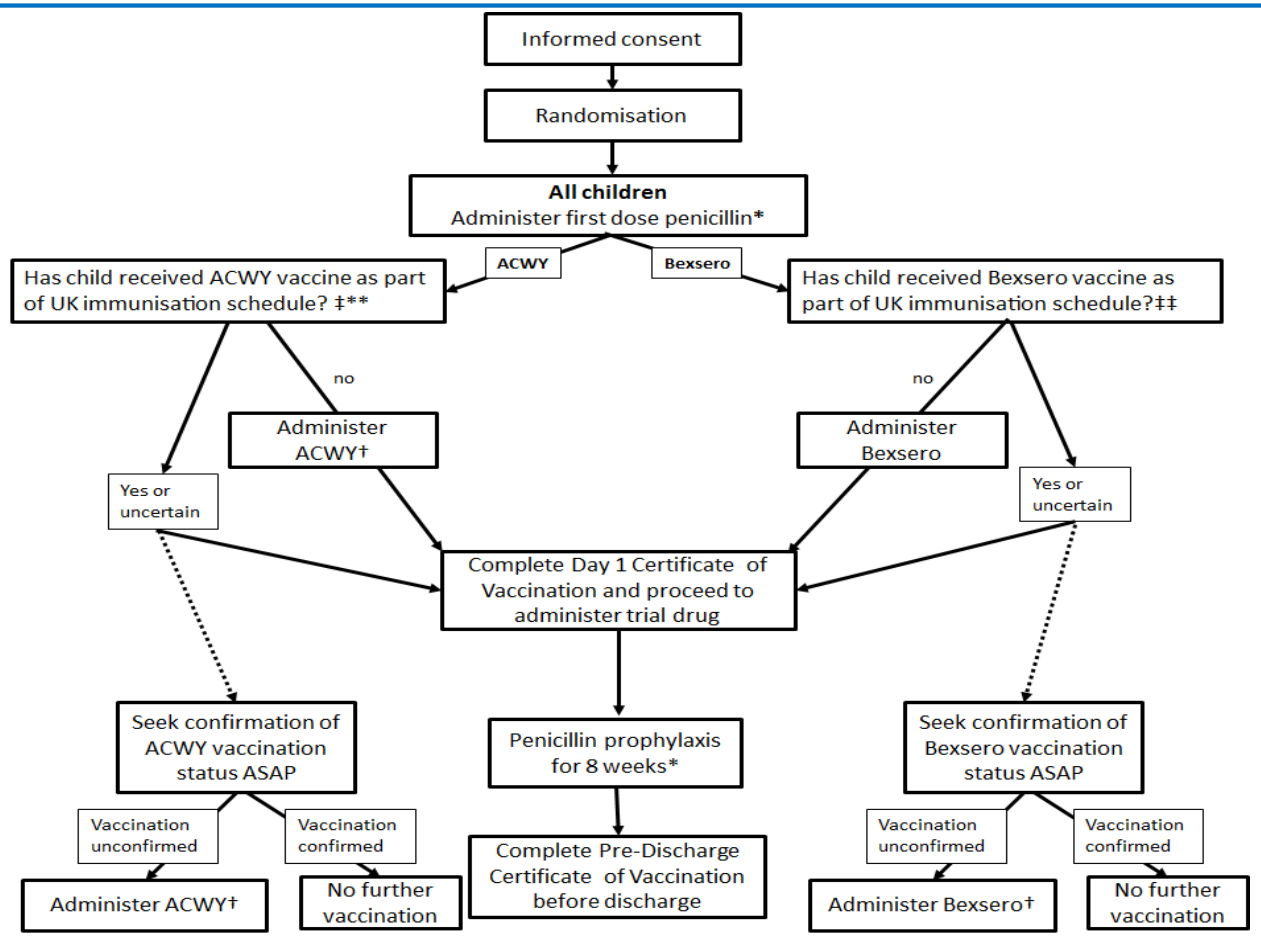
1. **Antibiotic prophylaxis**
2. **Vaccination against meningococcus**
3. **Information on early features of meningococcal disease**

Prophylactic antibiotics

Participants must start prophylactic antibiotics before they can be randomised into the ECUSTEC trial

- **Antibiotic prophylaxis: penicillin or erythromycin (if penicillin allergic)**
- **Oral and to be continued for 8 weeks**
- **Patient cannot be randomised until they receive their first dose of antibiotics**
- **Participant should be supplied with 2 weeks of antibiotics upon discharge**
- **GP must prescribe the remaining course of antibiotics up to week 8**

Meningococcal vaccination process



* or erythromycin if penicillin allergic
**<2yrs Nimenrix; ≥2yrs Menveo or Nimenrix
† If platelet count <50x10⁹/l defer vaccination until platelet count >50x10⁹/l; if receiving systemic anti-coagulation defer vaccination until 24hrs after stopping anti-coagulation.
‡ ACWY is part of the UK immunisation programme for children aged 14yrs since Autumn 2015.
‡‡ Bexsero is part of the UK immunisation programme for children born on or after 30th April 2015.

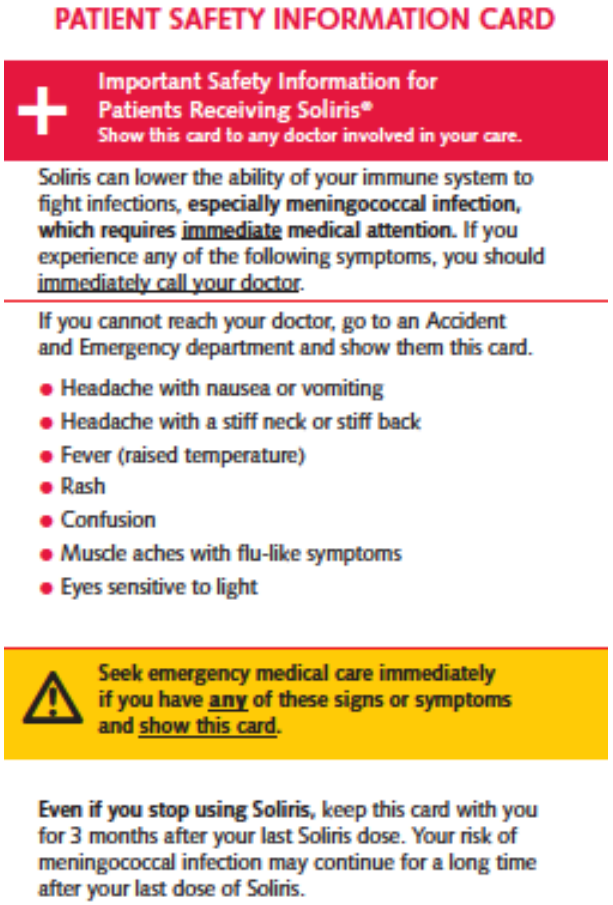
Meningococcal infection warning card

All ECUSTEC participants to be informed of the features of meningococcal disease.

Participants/parents/guardians will be given:

- Soliris® Patient Safety Information card
- ECUSTEC Patient Study card
- Reminded of signs and symptoms of meningococcal disease at each assessment visit
- Check participant/parent/guardian are in possession of the above cards

If meningococcal disease is suspected urgent medical treatment in accordance with local clinical procedures should commence immediately



PATIENT SAFETY INFORMATION CARD

Important Safety Information for Patients Receiving Soliris®
Show this card to any doctor involved in your care.

Soliris can lower the ability of your immune system to fight infections, **especially meningococcal infection, which requires immediate medical attention.** If you experience any of the following symptoms, you should immediately call your doctor.

If you cannot reach your doctor, go to an Accident and Emergency department and show them this card.

- Headache with nausea or vomiting
- Headache with a stiff neck or stiff back
- Fever (raised temperature)
- Rash
- Confusion
- Muscle aches with flu-like symptoms
- Eyes sensitive to light

Seek emergency medical care immediately if you have any of these signs or symptoms and show this card.

Even if you stop using Soliris, keep this card with you for 3 months after your last Soliris dose. Your risk of meningococcal infection may continue for a long time after your last dose of Soliris.

Unblinding

- **Reminder that blinded staff are:**

  - All site staff apart from pharmacy

  - Staff at the coordinating center

- **Emergency unblinding due to medical reasons:**

1. PI and/or co-investigators via ECUSTEC online system
2. If online system is unavailable, PI/co-investigator via pharmacy directly using the ECUSTEC Treatment Allocation Unblinding Form
   - Must state the need for unblinding
   - Paper unblinding must be reported to the Trials Office **immediately**


Thank You!