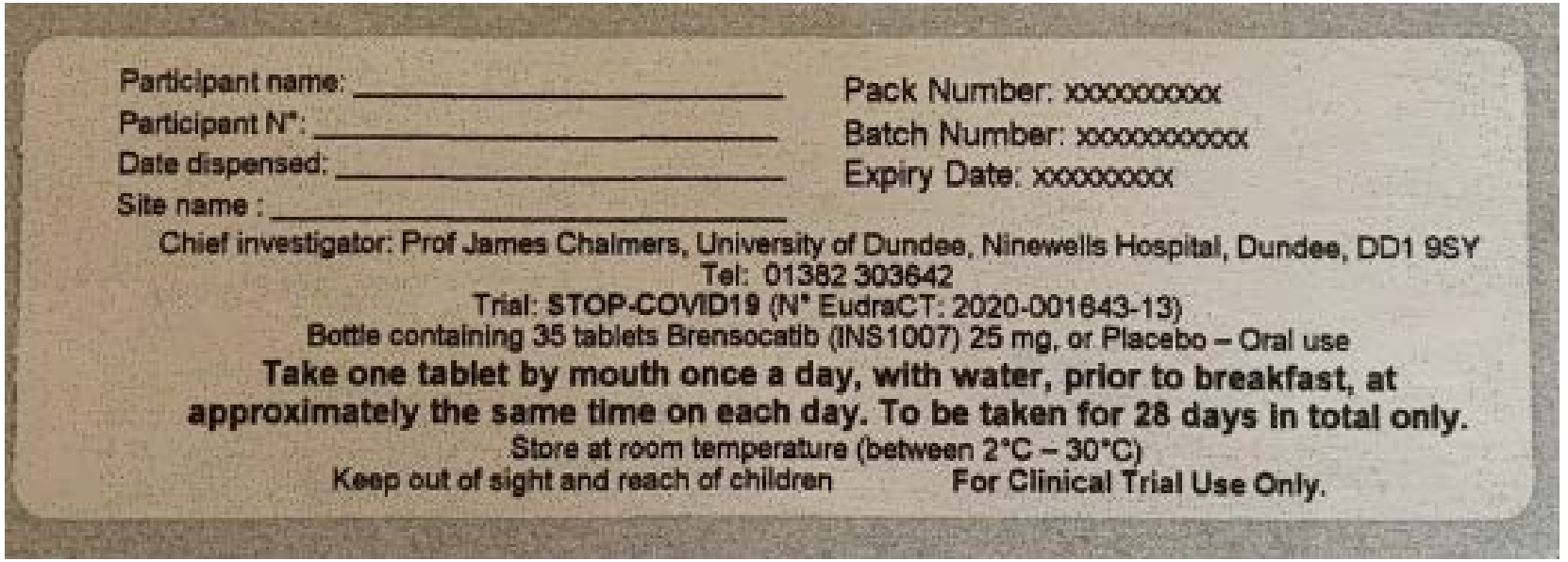
STOP-COVID19 | Superiority Trial Of Protease inhibition in COVID-19

IMP Management

V3 22-10-20

IMP



- Brensocatib (INS 1007) or Placebo
- Supplied by Insmed
- 25mg tablets supplied in bottles of 35 tablets, clinical trial label

Dosing

- Once daily for 28 days
- Before breakfast
- Administer with water
- Missed dose:
  - give within 10 hours, record as late dosing
  - if over 10 hours wait for next dose, record as missed.
- If naso-gastric tube: crush, dissolve in water, use syringe to push through tubs, flush with 10mL water, clamp for 30 mins then release.
- If discharged from hospital, remaining IMP taken home

IMP Supply

- Initial supply to site will be 10 bottles
- Sharp Clinical Services will supply IMP to Clinical Trial Pharmacy (CTP)
- QP Release Certificate and an Acknowledgement of Receipt with each shipment:
  - Acknowledgement of Receipt emailed to Sharp Clinical Services SCSUK-ShipmentRequests@sharpclinical.com & Trial Manager stop-covid19@dundee.ac.uk
  - QP Release Certificate & Acknowledgement of Receipt should be filed in the Pharmacy Site File (PSF)
- TCTU Trial Manager (TM)will manage stock:
  - If stock levels are causing concern, CTP should contact the TM.

IMP Storage

- Stored securely between 2°C and 30°C
- Daily temperature log whilst in pharmacy:
  - Retained for audit
  - PSF file note to detail location of log.
- Quarantine IMP if exposed to temperatures below 2°C or above 30°C:
  - Clinical Trial Pharmacy report to the TM
  - Site should provide the TM with temperature logs from the preceding 4 weeks
- Quarantined IMP must be clearly marked as in quarantine & stored separately
- In discussion with Insmed and the Sponsor, TM will identify what action is necessary.

Post-Randomisation IMP Release 1

- At point of randomisation TRuST (Tayside Randomisation System) will generate a pack ID:
  - ➢ This information will be emailed to Clinical Trial Pharmacy
  - ➢ RN take printed copy of the TRuST allocation email & STOP-COVID19 request form to Clinical Trial Pharmacy.
  - ➢ The STOP-COVID19 Clinical Trial Request Form will be filed in the PSF

STOP-COVID19

STOP-COVID19: Superiority Trial Of Protease inhibition in **COVID-19**
CLINICAL TRIAL REQUEST FORM

EudraCT	**2020-001643-13**	Sponsor	**University of Dundee and NHS Tayside**
IRAS	**281986**	Local CTP ID	

Chief Investigator	**Prof James Chalmers**	Tel No	**01382 386 131**
Principal Investigator		Tel No	

Participant ID:	
Participant Name:	
Date of Birth:	
Hospital Number/CHI:	
Date:	

Please Supply	**Brensocatib (INS1007) / Placebo** **1 bottle of 35 tablets**		
Dose	**25mg – one tablet once per day**		
Pack ID			

Investigator's or delegate's Signature:		Date:	

Complete at Time of Bottle Dispensing
Selected and labeled By: Date: Checked By: Date:

Post-Randomisation IMP Release 2

- Clinical Trial Pharmacy/delegated staff will verify that the pack ID on the bottle issued matches the number on the Request form.
- At time of release Clinical Trial Pharmacy/delegated staff adds to the IMP bottle :
  - participant name
  - participant number
  - site name
  - date of dispensing

Where possible check for contra-indicated medications: Itraconazole, Ketoconazole, diltiazem, verapamil, phenytoin or rifampicin, HIV treatments - current treatment with protease/integrase inhibitors or non-nucleoside reverse transcriptase inhibitors. (The Liverpool HIV checker (https://www.hiv-druginteractions.org/checker) should be used to check for any HIV drug interactions. Simvastatin could be used as a surrogate for Brensocatib as it metabolised similarly by CYP 3A4 pathway.)

IMP Handling (1)

- IMP should be prescribed on drug chart/equivalent as per local practice
- Highlight on electronic/paper drug chart that participant **should not receive excluded drugs**
- Where possible IMP should be **stored in individual patient drug lockers**
- Speak to as many to the ward staff as possible and highlight the requirements of the trial
- Ensure ward staff are aware of the **importance of giving IMP from the correct bottle**
- **Check drug charts when reviewing participants** to see if they are getting IMP every day before breakfast
- Where **handover sheets** are used in the ward add that the patient is on the STOP-COVID19 trial to ensure all ward nurse are aware

IMP Handling (2)

- **Liaise closely with ward staff when participants move ward or to/from ICU** to ensure IMP goes with the participant and the new ward is aware of requirements.
- **Liaise closely with ward staff when participants are due to be discharged** to ensure participants receive their IMP to take home
- When phoning participants after discharge **check that they have STOP-COVID19 IMP**. Some participants have thought that other discharge drugs e.g. dexamethasone are the trial IMP.

IMP Returns

- Participants discharged from hospital will be provided with the remainder of the IMP and instructions to complete 28 days treatment:
  - Participants will be given a stamped addressed envelope to post back returns.
  - Diary details instructions for participants
  - Returns should be handled as per local infection control policy
- IMP returned to Clinical Trial Pharmacy should be counted and entered on Accountability Log.
- IMP will be disposed of following local disposal policy and recorded on Disposal Form. This does not require further approval from Sponsor.
- A copy of the local disposal/destruction policy should be filed in the PSF (or file note to location).

Emergency unblinding

- Unblinding is only carried out where necessary for clinical safety:
  - If required, the clinician should contact the local PI or delegate
- PI or delegate will perform unblinding:
  - Log-in to access 24-hour TRuST unblinding
  - Complete & sign an unblinding form
- PI is responsible for ensuring that anyone delegated to this role has sufficient training & instructions
- Clinician will decide whether participant remains on IMP.
- Emergency unblinding training slide set provides details.

Emergency recall

- May be initiated by Sponsor, Insmed or Sharp Clinical Services
- Clinical Trial Pharmacies, Principal Investigators, Research Team Staff and the Chief Investigator will be alerted by email detailing required action:
  - For CTP stock, for example IMP disposal, quarantine or return
  - For participants in possession of the recalled IMP.