UNIVERSITY OF OXFORD

TRUST LOGO

PATIENT INFORMATION SHEET

Version 5.0_21APR2017

PATH-2 STUDY: Platelet Rich Plasma in Achilles Tendon Healing

A study looking at the best way to heal your torn Achilles tendon

If you are 18 years of age or over and have a torn Achilles tendon you may be suitable for a research study that is taking place in this hospital.

Reading this information now may help you decide if you want to take part in the study if the clinical team confirms you are suitable.

- Joining the study is entirely up to you
- Before you decide to take part, it is important for you to understand why the research is being done and what it will involve for you
- While we would like you to have as much time as possible to consider taking part in the study, as your injury is an unexpected event that may need prompt treatment, you may have to make a decision **in clinic today** regarding whether to take part in the study
- This is because the injection we are using in the study (further information over the page), would need to be given before you have your cast, splint or boot fitted
- If you decide to take part you would still be free to withdraw from the study at any time without giving a reason. This would not in any way affect the standard of care that you receive

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How to contact us:

If you have any questions about the study please talk to a member of the local research team on:

Telephone: xxxxxxxx

The local lead surgeon is:

Mr/Miss xxxxxxxxx,

Telephone: xxxxxxxxx

See study website: http://path2.octru.ox.ac.uk/
Or scan the QR code

PATH2 Platelet Rich Plasma in Achilles Tendon Healing

PART ONE

Why are we carrying out this study?

- The Achilles tendon is the largest tendon in the body. It connects your calf muscles to your heel bone and is used when you walk, run, and jump. The Achilles tendon is found at the back of the ankle. A rupture or complete tear of the tendon is a common injury. One out of every five major tendon ruptures are in the Achilles tendon. It accounts for approximately 20% of all major tendon ruptures and usually happens during strenuous exercise.
- The main aim of Achilles tendon treatments is to ensure (1) the two ends of the tendon are brought back together and (2) the repairing scar between the ends of the tendon is protected until it is strong enough to manage the strain it is put under during use of the injured leg.
- Standard treatment for Achilles tendon tears not requiring an operation is to place the ankle into a cast, splint or boot. The cast/splint/boot limits movement of the ankle and this helps bring the two ends of the injured tendon together during the natural repair response.
- A new treatment has been developed, using an injection of 'Platelet Rich Plasma' (PRP). The aim of PRP is to improve the repair of the tendon. PRP aims to take advantage of the body's normal healing abilities to help repair injuries. The cells in PRP contain special growth and regeneration factors that stimulate the body's healing response in the injured tendon.
- PRP is made using a sample of a person's own blood. The blood sample is taken using a needle and syringe. The blood is spun in a machine called a centrifuge and after spinning what remains is the platelet rich plasma.
- The person's own PRP is then injected into their Achilles tendon at the site if the injury. A local anaesthetic is given at the tendon area before the PRP injection to help ease any discomfort.
- The PRP injection is applied immediately prior to the cast, splint or boot.
- PRP has been shown to accelerate healing in a small group of patients. A larger study (the PATH-2 Study) is now underway to look into this further to improve the evidence as to whether this is an effective treatment.

Important information you should know

- The PATH-2 Study is currently taking place in this Trust [name] and many other NHS hospitals in the UK. We are asking 214 patients to participate in total.
- During the course of the study we collect (anonymised) information from those taking part, about their activities, health and tendon; this tells us how well patients have returned to normal activity.
- The patients who take part in PATH-2 Study will be allocated to receive one of two possible injections – the PRP injection that was described above or an imitation injection that just consists of a needle being put into the damaged Achilles tendon gap but there is nothing in the injection.
- To try to make sure the groups are the same to start with, each patient is put into a group by chance (randomly). A computer, using an approach similar to tossing a coin, selects the group you will be in. Patients will have a 50:50 chance of being allocated to either the 'PRP injection' group or the 'imitation injection' group. This is called random allocation.
- People that agree to take part in the study would not know which injection they would have, as research has shown that knowing which treatment a person has received can sometimes, in some people, affect a person's response to recovery. For example some people may feel the new treatment is 'better' and feel disappointed not to receive it and this can affect their participation in the research and bias the results.
- If you are allocated to receive the PRP injection a portion of your blood sample will be used in the injection. Blood samples for the PRP injection and the imitation injection group are sent to a central

laboratory in the University of Birmingham for detailed analysis. The careful storage and analysis of these blood samples are detailed in section two of this information sheet.

- Do ask a member of your clinical or research team if anything is unclear

If I agree to take part: what happens immediately?

Your injury is an unexpected event that may need prompt treatment and therefore you may receive study treatment in clinic today. The table below outlines what will happen. If after talking to a research team member you are happy to take part, you will be asked to sign a consent form, complete a questionnaire and have a blood sample taken (up to 55 ml (11 teaspoons)).

Then the following things will happen:

Activity	Place	Activity/Information collected
Study injection/ Treatment	Outpatient Department	• You will be asked to lie face down on the clinic bed • Local anaesthetic applied near the injured tendon • **If you are allocated to receive the PRP injection**: a portion of your blood sample will have been placed in a centrifuge and filtered to produce your own PRP sample. This will be injected into the tendon gap. A cast, splint or boot will be applied. • **If you are allocated to receive the imitation injection:** A needle will be inserted in the tendon gap. No blood or PRP will be injected, the process simulates the injection process only. A cast, splint or boot will be applied. • You will receive a standard recovery and physiotherapy programme. This makes sure everyone in the study receives similar treatment after the injection.
Immediately following treatment	Outpatient Department	• After the injection you will be given a pain diary to take home and complete for two weeks. A pre-paid envelope will be provided for you to return the completed diary by post. • We will take contact details from you (including your home telephone, your mobile and any email address) so we can be in touch to carry out further study follow up assessment, and remind you when these will be. Your NHS number will be recorded to facilitate follow-up

The questionnaire completed at this time will ask you general, pain and health related questions, and ask about your activities and what your recovery goals are.

If I agree to take part: what happens later after I have gone home?

We would like to carry out 5 study follow up assessments; at 4 weeks, 7 weeks, 13 weeks, 24 weeks and 2 years after your injection, to see how you are getting on. All five assessments involve collecting your responses to study questions on a questionnaire.

For the first 3 we may collect your responses over the telephone, or a member of the team may meet you face-to-face during an outpatient visit (if this coincides with a visit your local NHS medical or physiotherapy team have asked you to come into the hospital for). A member of the research team will contact you to organise a convenient time. Each follow-up assessment should take around 10 minutes.

The 24 week follow-up is a face-to-face meeting with a physiotherapist (or member of the local research team). This will take place in your local hospital. You will complete a questionnaire containing study questions and carry out a short muscle strength test. The physiotherapist or researcher will instruct you on how to perform the test. The test involves standing on one leg and raising the heel up and down until the muscle gets tired. The test is completed on both legs so the injured leg can be compared with the uninjured leg. The physiotherapist or researcher will be with you throughout the test. You will not be asked to do more than you are comfortable with and can stop the test at any time. As with normal exercises that work a muscle, the calf area may ache for a few days after the test. The movements are recorded electronically via a sensor that will be secured to the back of your heel. While the test itself is likely to take less than 10 minutes you will be at this appointment for around 45 minutes.

You will be asked for your permission to video your foot undertaking the exercise – please note it would only be your foot/leg being videoed, not your face.

At the end of the assessment you will be asked to complete a short questionnaire about your study experience. This includes a question asking for your permission to allow us to contact you should we carry out any long term follow up of people in this study. If you agree, at 2 years after your treatment, we will send you a short questionnaire by post. If we do not receive your questionnaire, or a blank questionnaire to indicate that you are opting out, we will follow up with telephone calls.

The table below gives an overview of what will happen if you agree to take part:

Time	Place	Information
Weeks 1-2	Home	• Complete a pain diary each day for 2 weeks at home
At 4 weeks	Telephone or Outpatient Department	• Questionnaire: questions relating to your Achilles tendon, general health and recovery goals. Any complications and rehabilitation progress.
At 7 weeks	Telephone or Outpatient Department	• Questionnaire: as above
At 13 weeks	Telephone or Outpatient Department	• Questionnaire: as above
At 24 weeks (6 months) after your treatment	Outpatient Department	Meet local physiotherapist/research team member • Short heel-rise muscle-strength test to collect tendon movement data • Questionnaire: as above plus questions relating to your current employment and pain relief use. • Updated email address if you would like a summary of the study results. • Study experience questionnaire

Optional, at 2 years (24 months)	Postal or Telephone	• Postal questionnaire: questions relating to your Achilles tendon, general health and complications; if there is no response, a second postal questionnaire will be sent. If there is no response to the second questionnaire we will follow up with telephone calls. • To opt out, a blank questionnaire may be returned by post.

Expenses and payments

The 24 week follow up appointment is an additional hospital visit and therefore travel expenses such as car parking will be reimbursed on request according to the policy of the University of Oxford who is managing the study.

We will send a £5 shopping voucher and a pen with the postal questionnaire at 2 years after your treatment, which are yours to keep whether or not you choose to participate in the optional 2-year follow-up.

Confidentiality

- All information collected about you, either from you personally or from your medical records, will be kept strictly confidential.
- Study data is anonymised as all participants are given a unique study number to make sure they cannot be identified outside of the study.
- The consent form and the contact details you provide will contain your name and other identifying details and we ask your permission to use this information for study purposes on the consent form.

Are there any benefits or risks for me in joining the study?

- You may receive the PRP injection which may aid or speed your healing. The PRP is not generally applied outside of the study.
- We are not aware of any risks over and above those when receiving any injection. The PRP used in the study is from your own blood sample.

What happens if I don't want to take part?

- Your participation in this study is optional and should you decide not to take part your care will not be affected.

What should I do if I want to take part?

- Please read the further information below
- Your clinician will confirm your suitability for the study during your examination
- If you would like to take part a member of the local clinical or research team will go through the study information with you.
- You will be asked to sign and date an Informed Consent form giving your written agreement to participate in the study.

THANK YOU FOR READING THE ABOVE. IF YOU ARE CONSIDERING PARTICIPATION, PLEASE CONTINUE TO READ THE ADDITIONAL INFORMATION IN PART TWO BEFORE MAKING ANY DECISION.

PART TWO: FURTHER INFORMATION

When did the study begin and when will it end?

- The project started in October 2014 and recruitment of participants began a few months later.
- The project will close at the end of November 2019, with study results available shortly afterwards.
- You will be in the study for a total of 24 months after your study injection if you participate in the optional extended follow-up, and for 24 weeks if you do not.

Who is organising and funding the study?

- The PATH-2 Study has been set up by researchers in the University of Oxford and University of Birmingham and is managed by the research team in the Oxford Clinical Trials Research Unit at the University of Oxford.
- Funding up to the 24 week follow-up has been provided by the Efficacy and Mechanism Evaluation (EME) Programme. Funding for the 2 year follow-up is provided by the Kadoorie Centre Trauma Research Charitable Fund. The doctors and research staff involved in this study do not receive any payment other than what is required to cover the necessary expenses. The study is independent of any commercial organisation.

Who has approved the study?

- All research in the NHS is reviewed by an independent group of people called a Research Ethics Committee which is there to protect your safety, rights, wellbeing and dignity.
- This project has been reviewed and was given a favourable review by the South Central – Oxford A Research Ethics Committee.

What happens to my blood sample?

- Anonymised blood samples are sent to a central laboratory in the University of Birmingham for later analysis.
- Only those involved in the research process will have access to the sample.
- You are giving your blood sample as a donation, i.e. without receiving a payment and without attaching conditions. The PATH-2 Study is operating on a non-commercial basis, meaning it does not sell your sample to make a profit and will not allow anyone else who is working with the sample to do so either. If your sample contributes to the knowledge that helps to treat tendon ruptures you will not receive any compensation or payment.
- Samples will be used for this study only and will be discarded at the end of the study.
- The results of the scientists looking at your blood are not reported back to you or the local clinical team and will not affect any future treatment you have.
- The scientists are interested to see if people recover differently and if this is the case, if there is anything in particular in the blood that might be the reason for the different recovery.

How will information about me be kept confidential?

- Every person that takes part will be given a unique study number to make sure they cannot be identified outside of the study.
- Any information about you that is included in any reports will use only your study number to ensure you cannot be recognised.
- All information collected about you during the course of the study will be handled and treated as strictly confidential.
- Your medical notes may be seen by authorised members of the research team so they can collect information needed for this research study and also check that it is correct. The confidentiality of your medical record will be respected at all times.

- All information collected during the course of the study is centrally managed by the research team at the University of Oxford who will receive your anonymised study data.
- Your details will be forwarded to the central study office based in Oxford. These will be securely stored and used to coordinate the postal follow up and other study processes as appropriate.
- All study data will be stored in a restricted-access study database managed by the Oxford Clinical Trials Research Unit in the University of Oxford. The study database will be password protected and will only be used by named researchers working on this study under the direct supervision of the senior scientific investigators.
- We may check your contact details using NHS Digital and other central UK NHS bodies and ask them to provide other basic study related information that may be needed for follow-up.
- Responsible members of the University of Oxford or the local NHS Trust may be given access to data and or medical records for monitoring and/or audit of the study to ensure we are complying with regulations.

How long will my data be stored?

- Anonymised study data is kept for at least 5 years from the end of the study by the University of Oxford both as a paper copy and on a secure database.
- We do not use this data for any other purpose without further permission from the Research Ethics Committee and you.
- Personal identifiable information (such as your name, contact details and NHS number) will be held securely and separately from the anonymised data collected in the study. The research team may wish to invite you for an additional follow-up after 24 months to see how you are doing. We would therefore like to keep your details so that we can contact you.
- All centrally held study information will be disposed of responsibly in accordance with the University of Oxford guidelines.

What if new information becomes available during the study?

- Sometimes we get new information about the treatments being studied before we have recruited all the participants we had planned to.
- If some significant information came to light that would mean the research was no longer likely to add anything regarding the treatment of Achilles tendon injuries, the study would be stopped early.
- If this happens your local research team will tell you about it.

How do I withdraw if I want to do so?

- Your legal rights will not be affected by agreeing to take part in or if you decide to withdraw from the study.
- You are free to withdraw from the study at any time without giving a reason.
- If you decide to withdraw from the study this will not affect the standard of your routine care in any way. Your clinical team will continue to treat you with the same level of care.
- Your anonymised sample, and anonymised data collected to the point of withdrawal, will be used for analysis unless you indicate otherwise.

What happens if I have any concerns or complaints about <u>the study</u>?

- If you have any concerns or complaints about any aspect of this study you should ask to speak to one of the local research team who will do their best to answer your questions:

Lead Surgeon: [PI name, title here]	PI local contact details here
Local Research team including: [Associate name, title here]	Research Associate contact details here

- If you would like to write to the person in charge of the study please send your letter to:

  Professor Keith Willett
  The PATH-2 Study
  (University of Oxford)
  Kadoorie Centre
  John Radcliffe Hospital
  Oxford OX3 9DU

  Your letter will be replied to promptly in writing, unless you enclose your telephone number and wish to discuss your concerns with us.

- Or contact the PATH-2 Study research team in Oxford:

  The study office on Tel: 01865 226540
  or email us on path-2.study@ndorms.ox.ac.uk

- You may also contact the University of Oxford's Clinical Trials and Research Governance Office: Tel: 01865 572221

What happens if I have any concerns or complaints about my care?

- If you wish to complain formally about your care you can do this through the NHS Complaints Procedure.

What happens if there is a problem?

- NHS indemnity operates in respect of the clinical treatment with which you are provided. The University of Oxford, as Sponsor, has appropriate insurance in place in the unlikely event that you suffer any harm as a direct consequence of your participation in this trial.
- In the event that something does go wrong and you are harmed during the research because of someone's mistake, then you may be able to claim compensation against the hospital but you may have to pay for your legal costs. The study also has safety procedures in place that monitor such events and take appropriate action.

Can I have a summary of the study results?

- At the end of the study the anonymised data collected will be analysed and published in a medical journal.
- We will ask you at your 24 week follow up and 2 year follow-up to provide a current email address if you would like to receive a summary of the results. We will email the results summary to the address you provide or any updated email address you notify us of during the course of the study.
- Results will also be available on publicly accessible websites. The identity of patients who took part in the study will always remain confidential.

General information about research

- Further information about medical research and taking part in a study or trial is available through the National Institute for Health Research Clinical Research Network website http://www.crn.nihr.ac.uk/ see Patient and Public section or search the term 'clinical trial'.

Thank you for considering participation in this study and for taking time to read this information sheet