PARTICIPANT INFORMATION SHEET

A single blinded, IDEAL stage 3, multi-centre, randomised controlled trial to assess NeuroSAFE Robotic assisted radical prostatectomy (RARP) vs standard Robotic assisted radical prostatectomy (RARP) in men with prostate cancer

Acronym: NeuroSAFE PROOF

Part A

PART A: SUMMARY PARTICIPANT INFORMATION SHEET

Your urologist has told you that you have prostate cancer and has recommended surgery to remove your prostate. This type of surgery is called radical prostatectomy.

We would like to invite you to take part in a trial that will allow us to compare the benefits and disadvantages of treating patients like you with different types of radical prostatectomy. **About 400 men will take part in this trial in the UK.**

If you decide to take part in the trial, your research nurse, trial practitioner or urologist will ask you to sign the consent form. You will then be treated as follows:

- A computer will be used to decide which type of surgery you receive. The computer will use a process called randomisation to allocate at random, half of the patients in the trial to one type of surgery, and the other half to a different type of surgery.

- You will not need to attend the clinic any more often than normal practice for your condition. However, when you do attend we will carefully assess your recovery to help us to understand reasons, if any, why one type of prostate cancer surgery is more beneficial than another. This will happen at 3 months, 6 months, 1 year and 2 years after your surgery.

- You will be asked to complete Quality of Life questionnaires about your physical health and wellbeing. We will ask you to do this at baseline (before your surgery), at 3 months, 6 months, 1 year and finally at 2 years after your surgery. In addition, at the same time points you will be given health resource diaries to complete. These are another type of questionnaire which relate to the costs associated with your condition and the healthcare you receive. The research team will continue to follow

you up for 3, 4 and 5 years after your surgery through your medical records. If you have moved hospital or GP practices, a member of the research team may phone you to check up on your health and wellbeing.

- If you decide not to take part, your surgery will proceed in line with the standard of care.
- If after reading Part A: Summary Participant Information Sheet you are interested in participating in the trial, please familiarise yourself with Part B: Detailed Participant Information Sheet on the following pages **before** signing the study consent form.

PART B: DETAILED PARTICIPANT INFORMATION SHEET

We would like to invite you to take part in this trial. Before you decide whether to take part, you need to understand why the research is being done and what it would involve for you. Please take time to read the following information carefully. Ask us if there is anything that is not clear or if you would like more information. Take time to make your decision. You can talk to others (such as your GP, family and friends) about the trial, if you wish, before reaching a decision.

1. What is the surgical technique being tested?

What is a radical prostatectomy?

Radical prostatectomy is a complex surgical procedure to remove the prostate because of cancer. In this procedure, damage to the nerves which run in the outer coverings of the prostate commonly causes erectile dysfunction (which can be permanent) and urinary incontinence (usually temporary). The standard surgical approach involves planning whether the nerves can be preserved (by carefully peeling them off the outside of the prostate during surgery) based on the results of the prostate biopsy and MRI scan along with an examination of the prostate at the start of the operation.

What is removed?

Your entire prostate and in some cases the lymph nodes (which drain the prostate) will also be removed.

What is NeuroSAFE?

NeuroSAFE is a technique developed in Germany to promote safe nerve sparing. This technique involves, during the operation (whilst you are still asleep), an examination of the prostate under a microscope by a pathologist to see whether prostate cancer is touching the nerves. If it is not, the nerve is left in place. If it is, the nerve and cancer cells are removed. This is the only difference between the NeuroSAFE technique radical prostatectomy and current standard care. We have performed over 110 cases of NeuroSAFE at UCLH and achieved cancer control comparable to the standard operative procedure.

2. What are the side effects of the surgery?

Radical prostatectomy, with or without NeuroSAFE, is a complex surgical procedure with side effects and potential complications. Your urologist will have already given you a separate information sheet with details about what you can expect to happen, and the potential side effects and complications associated with radical prostatectomy.

What is the purpose of the study?

The NeuroSAFE technique is designed to minimise side effects of the surgery without compromising cancer care. We plan to evaluate whether using NeuroSAFE is effective. This trial will evaluate, through a large scale multicentre randomised controlled study, the effects of use of the NeuroSAFE technique alongside radical prostatectomy in terms of improving potency, urinary continence, quality of life as well as preserving cancer control and compare this to current standard radical prostatectomy. A full evaluation of the cost effectiveness of the technique (informing about value for money for the NHS) will also be incorporated.

We hope this study will help us:

- To understand if the NeuroSAFE technique reduces side effects from radical prostatectomy
- To ensure that the NeuroSAFE technique does not result in worse cancer outcomes at 5 years
- To understand if the NeuroSAFE technique improves the quality of life and continence of men
- To investigate the cost of health resource use after radical prostatectomy for men who have had a NeuroSAFE radical prostatectomy and compare it to those who have had a standard radical prostatectomy

All the participants in the trial will receive radical prostatectomy with or without the NeuroSAFE technique.

3. What are the possible benefits of taking part?

We hope that the surgery you receive will be an effective treatment for your cancer, although this cannot be guaranteed. If you take part, you may benefit from seeing the same research nurse or trial practitioner at each of your assessment visits. You may also benefit from a more thorough review of your recovery after surgery. Information we get from this study may help us to treat patients with prostate cancers more effectively in the future.

4. What are the possible disadvantages and risks of taking part?

Treatment within this trial is very similar to what you would receive if you were not participating. Therefore, if you are already deciding upon surgery, the possible additional disadvantages compared to treatments outside of the trial are minimal. Other disadvantages and/or risks of taking part might include:

- The inconvenience of completing questionnaires about how you feel. If you find that you are unable or unwilling to complete them for any reason, please discuss this with your local urology team.

- Your clinical assessments could result in the research doctor finding a condition of which you were unaware. Your GP will be informed with your consent so the appropriate medical treatment can be given to you.
- If you are randomly allocated to have the NeuroSAFE technique during your radical prostatectomy surgery, your prostate will be examined under a microscope by a pathologist during the operation. This usually takes a further 45 minutes and will add a similar length of time to your operation but this is well tolerated and will not expose you to any increased risk.

5. Why have I been invited?

You have been invited to take part in this study because your urologist has found that you have a type of prostate cancer which is suitable for radical prostatectomy. About 400 men will take part in this study in the UK. This will allow us to comprehensively evaluate the NeuroSAFE technique and to see if it is good for men with the same condition as you around the UK.

6. Do I have to take part?

No, it is up to you to decide whether or not to take part in this trial. We will describe the trial to you. We will go through this Participant Information Sheet with you and give you a copy to keep. If you do not wish to take part, you do not need to give a reason, although if you were able to tell us why this would help us plan further studies. If you do decide to take part, you will be asked to sign a consent form.

If you consent to take part in the trial, you are always free to withdraw at any time without giving a reason. If you decide not to take part, or to withdraw after consenting to take part, it will not affect the quality of care you receive. You will have the opportunity to discuss with your urologist the alternatives for treatment and/or surgery if you choose not to take part.

7. What will happen to me if I take part?

If you choose to take part in the study, your research nurse, trial practitioner or urologist will ask you to sign the consent form. This consent form may be a paper copy if consent is taken in clinic, or it may be sent to you over email for you to sign. This form will then be countersigned by the person taking consent and sent back to you over email.

Your research nurse and/or urologist will assess your medical condition(s) and any recent investigations to make sure you are a suitable candidate, and then enter you into the trial. You will be allocated at random to either standard radical prostatectomy arm or the radical prostatectomy with NeuroSAFE technique arm and wont be told which one.

As part of the normal care pathway, you will need to attend a pre-operative assessment clinic at the hospital as an out-patient at least 1-2 weeks before your surgery to assess your health.

On the day of your surgery, you will be admitted and the operation will be performed. You will not be informed at this point as to whether you have had the NeuroSAFE technique (this

blinding to treatment allocation is an important measure to prevent bias within the results). After surgery, your care will be delivered as per local NHS hospital practice until 3 months post-surgery. Your routine appointments will then be coordinated and undertaken by the NeuroSAFE team. This means that the results of your histology following NHS practice will be given to you by hospital staff, and any decisions for further treatment based on this will be coordinated via the regional MDT (i.e. your normal doctors). For the purposes of the trial, you will have appointments at 3 months, 6 months, 12 months and 24 months. Your 24 month follow up visit will be conducted over the phone. The trial team will be aware of any further treatments recommended and will liaise closely with NHS care teams, either at your local referring hospital or where your surgery was performed. These follow up appointments will take place at the hospital you were treated at.

Preoperatively and at each postoperative visit you will be asked to complete 4 to 5 quality of life questionnaires about your physical health and wellbeing as part of the trial. You will need to complete these questionnaires during hospital assessment visits or over the phone for the 2 year follow up. You will also be given a health resource diary to assess your health care resource use, at these time points. We hope the questionnaires will help us to understand how your surgery has affected the quality of your life and out of pocket expenses. Your follow up appointments will be at 3 months, 6 months, 1 year and 2 years. The research team will continue to track your health for years 3, 4 and 5 post-surgery. These questionnaires will also be available to do electronically, and an email will be sent to you to fill these out on your computer at home.

We will follow ethical and legal practice and all information about you will be handled in confidence. When you consent to join the study, you will be allocated a unique subject number, this is how all forms for the trial will be identified to protect your identity. This information will be held securely at your hospital on paper and electronically under the provisions of the 2018 Data Protection Act. Any information about you that leaves the hospital will have your name and address removed so that you cannot be recognised from it. All tissue removed during the operation will be held by the pathology department of the hospital, for as long as the hospital policy requires. Some of your tissue may be stored in a biobank if you are a UCLH patient and have consented to this (please see below). Your GP will be notified of your participation in the trial if you choose to take part. Should we by chance pick up any significant clinical findings we will inform both you and your GP.

8. What do I have to do?

You will need to visit the hospital for your surgery and assessments, as described above. All of these assessments are normally recommended for patients who undergo radical prostatectomy and will not involve additional visits to your hospital.

It may be possible for you to participate in other research studies during your treatment but you should discuss this with your research nurse or urologist first. Please tell your research nurse or urologist if you have had any other treatments recently as they might make you unsuitable for this study.

9. What are the alternatives for treatment?

If you decide not to take part, your treatment will proceed in line with standard practice at your hospital.

10. What happens when the research study stops?

When all the participants have completed the trial, we will compare how participants have responded to the two types of surgery, and assess how quality of life, recovery and out of pocket expenses have been affected by the surgery they have received. The particular outcomes that we are interested in improving and evaluating are quality of life, cancer recurrence, erectile function recovery and urinary continence. The research team will make the results of the trial available to the public but you will not be named as a participant.

11. What if something goes wrong?

Any complaint about the conduct of the trial, the way you have been dealt with during the study, or any possible harm you might suffer, will be addressed. If something does go wrong and you are harmed during the research due to someone's negligence, then you may have grounds for a legal action for compensation against the organisations involved, including the sponsor (University College London), and the National Health Service (NHS) Trust. However, you may have to pay your legal costs. The NHS national complaints mechanisms will still be available to you (if appropriate). If you remain unhappy and wish to complain formally, you can do this through the Patient advice and liaison services (PALS) team.

PALS
Ground Floor Atrium
University College Hospital
235 Euston Road
London NW1 2BU

uclh.pals@nhs.net

Telephone: 020 3447 3042

Will my taking part in this trial be kept confidential?

Yes. We will follow ethical and legal practice and all information about you will be handled in confidence. Your GP will be notified of your participation in the trial with your consent if you choose to take part.

With your consent your medical records may be looked at by people who monitor and audit trials, UK regulatory authorities and representatives from the sponsor's office, to check that the study is being done properly. All will have a duty of confidentiality to you as a research participant.

12. What if new information becomes available?

Sometimes during the course of a research project, new information becomes available which may affect you. If this happens, your urologist will tell you about it and discuss with you whether you want to continue in the trial. If you decide to withdraw, your urologist will make arrangements for your care to continue. If you decide to continue in the trial, you may be asked to sign an updated consent form. On receiving new information your urologist might consider it to be in your best interests to withdraw you from the trial. Your urologist will explain the reasons and arrange for your care to continue.

13. What will happen if I don't want to carry on with the study?

You may withdraw from either the trial surgery or from the entire trial at any time. If you withdraw from surgery, we will ask your consent to keep in contact with us to let us follow-up

your progress. Information collected may then still be used. Alternatively, you can withdraw from the entire trial with no effect on your standard care, any information collected prior to your withdrawal of consent will be maintained, no further data will be collected once you withdraw consent.

14. What will happen to the results of the research study?

The results of this trial may be shown at medical meetings and submitted to major urology and cancer research journals for publication. You will not be identified in any way in any report or publication arising from the study. If you would like copies of publications please let a member of the research team know.

If you wish to know the results at the end of the study, please contact your urologist, trial coordinator or research nurse.

15. What will happen to my data?

UCL is the sponsor for this study based in the United Kingdom. We will be using information from you and your medical records in order to undertake this study and will act as the data controller for this study. This means that we are responsible for looking after your information and using it properly. UCL will keep identifiable information about you for 20 years after the study has finished as per UCLs archive policy.

Your rights to access, change or move your information are limited, as we need to manage your information in specific ways in order for the research to be reliable and accurate. If you withdraw from the study, we will keep the information about you that we have already obtained. To safeguard your rights, we will use the minimum personally-identifiable information possible.

You can find out more about how we use your information by contacting data-protection@ucl.ac.uk.

Your NHS hospital will collect information from you and your medical records for this research study in accordance with our instructions.

Your NHS hospital will keep your name, NHS number and contact details confidential and will not pass this information to UCL. Your NHS hospital will use this information as needed, to contact you about the research study, and make sure that relevant information about the study is recorded for your care, and to oversee the quality of the study. Certain individuals from UCL and regulatory organisations may look at your medical and research records to check the accuracy of the research study. UCL will only receive information without any identifying information. The people who analyse the information will not be able to identify you and will not be able to find out your name, NHS number or contact details.

Your NHS hospital will keep identifiable information about you from this study until the end of the study period.

UCL will collect information about you for this research study from your medical records. Information from your medical records will not contain any identifying information about you to UCL. We will use this information to track your health for years 3, 4 and 5 post-surgery.

When you agree to take part in a research study, the information about your health and care may be provided to researchers running other research studies in this organisation and in other organisations. These organisations may be universities, NHS organisations or companies involved in health and care research in this country or abroad. Your information will only be used by organisations and researchers to conduct research in accordance with the UK Policy Framework for Health and Social Care Research.

Your information could be used for research in any aspect of health or care, and could be combined with information about you from other sources held by researchers, the NHS or government.

Where this information could identify you, the information will be held securely with strict arrangements about who can access the information. The information will only be used for the purpose of health and care research, or to contact you about future opportunities to participate in research. It will not be used to make decisions about future services available to you, such as insurance.

Where there is a risk that you can be identified your data will only be used in research that has been independently reviewed by an ethics committee.

16. Who is organising and funding the research?

The Chief Investigator for the trial is Mr Greg L Shaw, based at University College London Hospital, UK. The study is funded by the National Institute for Health - Research for Patient Benefit fund and the Jon Moulton Charitable Foundation. University College London is acting as the sponsor for the study.

17. 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, well-being and dignity. This study has been reviewed by the London - Central Research Ethics Committee, by the sponsor's office at UCL and by the Health Research Authority.

Optional Biobanking at UCLH

We are inviting patients at University College London Hospital (UCLH) NHS Trust if they would like to donate tissue to the UCL/UCLH Biobank for Studying Health and Disease.

Please read the following information carefully and discuss it with others if you wish. Please ask us if there is anything that is not clear or if you would like more information. Please note that this is entirely optional and you do not need to donate any tissue if this makes you uncomfortable.

1. **What is the UCL/UCLH Biobank for Studying Health and Disease?**

The Biobank is a collection of human material including blood, urine, saliva, sputum, faeces and normal and diseased tissue (e.g. bone, breast, etc) from patients attending various hospitals in the UK and abroad. Samples from the Biobank are used in ethically approved research. Samples donated to the Biobank may be used in research using animal models.

2. **What is the purpose of the UCL/UCLH Biobank for Studying Health and Disease?**

The purpose of the Biobank is to have tissue available, now and in the future, for research projects investigating human disease and the normal functioning of the human body.

3. **What will happen to my sample?**

The Biobank will consider applications from all scientists conducting research in areas covered by the UCL/UCLH Biobank for Studying Health and Disease. Ethical approval is required for any research. Research may be conducted in the UK or overseas by either public sector or commercial organisations. In order to defray some of the costs of running the Biobank, researchers may be charged for the use of tissue.

4. **Do I have to take part?**

No. Whatever your decision, it will not affect any treatment or care you receive in this or any other hospital, now or in the future.

5. **What will it involve if I decide to take part?**

You will be asked to sign the optional section of the NeuroSAFE consent form that allows:

- your data to be stored on a secure database in a coded/anonymised form
- storing a small amount of tissue, that will be taken from your removed prostate for research projects including genetic research. Genetic analysis of your tissue and blood often explains why certain diseases develop and may help to decide on treatment

6. What are the advantages and disadvantages of taking part?

There are potentially no advantages to you if you participate in research but it may help others in the future. You will not receive a financial reward. Donated tissue is considered to be a ‘gift’ to the Biobank.

7. What will happen if new information becomes available?

We do not expect to report the results from the research on your samples to you although in some special circumstances a finding might be reported to your clinical team if it were considered that it may have an impact on your clinical treatment, and they would discuss this with you.

8. Will my information be kept confidential?

Yes. All information about you and your tissue samples will be treated in the strictest confidence. No information about you can be traced back to you by the researcher.

Results from genetic studies will be placed on a database to which only authorized individuals have access. Before having access to your clinical information and/or tissue samples researchers must agree to conditions which safeguard your confidentiality. You will not be informed of the results of genetic testing and donating tissue to the Biobank will have no impact on your medical insurance.

9. What if there is a problem or I require further information?

If you would like further information or you have concerns about this research at any time you can:

- discuss it with your doctor or nurse
- contact the Biobank Manager on 020 7679 7630, who will try to answer your question or will arrange for you to speak to an appropriate person

Normal NHS complaints procedures will apply

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

You are free to withdraw your consent at any time. This means that researchers will no longer be able to access any of your notes and your tissue samples in the Biobank will be destroyed. You do not have to give a reason for changing your mind. However, if some data have already been used it is not always possible to recall it. To withdraw your consent, please contact the Biobank Manager on 020 7679 7630, by email at ci.bbfhad- admin@ucl.ac.uk or write to us at UCL CI Biobank for Studying Health and Disease, UCL Cancer Institute, Room 201 Rockefeller Building, 21 University Street, London, WC1E 6BD.

11. Who is organizing and funding UCL/UCLH Biobank for Studying Health and Disease?

The Biobank is overseen by the Joint Research Office of UCL/UCLH. The cost of operating the Biobank will be funded by sponsors.

12. Who has reviewed the project?

The UCL/UCLH Biobank for Studying Health and Disease has been given a favourable ethics opinion from the National Research Ethics Service (NRES) Committee Yorkshire & The Humber – Leeds East. The REC number is 15/YH/0311.

If you are interested in contributing to this, please consent to the appropriate biobanking statements on the NeuroSAFE consent form. You do not need to agree to this to participate in the NeuroSAFE trial.

Contact for further information:

If you have any further questions concerning this study please contact your site research team:

Principal Investigator (**urologist)**:

Name: …… **on** …….

Or your **research/specialist nurse or trial practitioner**:

Name: …… **on** ……

Who else can I talk to?

Alternatively, if you or your relatives have any questions about this study you may wish to contact the following organisation that is independent of the hospital at which you are being treated:

Macmillan Cancer Support is a registered charity providing information about all aspects of cancer for patients and their families. They can provide useful booklets on prostate cancer, the treatments for prostate cancer and medical research in general. You may contact their specialist cancer nurses on **0808 800 1234**. You can also access their web site at **http://www.macmillan.org.uk**.

What to do next

If you are at all unsure whether to take part in this study, you can have more time to think it over.

You will be given a copy of this information sheet and the signed consent form to keep.

Thank you for taking the time to consider participating in the study and for reading this leaflet.

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