Centre universitaire de santé McGill | McGill University Health Centre

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ADDRESSOGRAPH

- INFORMED CONSENT DOCUMENT –

TITLE: **Non-invasive diagnosis of non-alcoholic steatohepatitis in liver transplant recipients: a prospective, longitudinal study employing serum cytokeratin 18 and transient elastography (Fibroscan)**

FUNDING: Canadian Society of Transplantation, Canadian National Transplant Research Program (CNTRP)

PROTOCOL NUMBER Version 1.2

MUHC or McGill Study Code: 15-002-MUHC

PRINCIPAL INVESTIGATOR: Dr. Giada Sebastiani

STUDY SITE: MUHC solid Organ Transplant Unit

A. Information about the Study

INTRODUCTION

Before deciding to participate in this research study, you should understand the content of this consent form, the risks and benefits to make an informed decision, and ask questions if there is anything you do not understand. Please read this entire consent form which contains a full explanation of the study and take your time to make a decision. If you decide to participate in this research study you will be asked to sign and date this form, and a copy will be given to you. Feel free to ask any questions at any time throughout the study.

BACKGROUND

Liver transplantation is a life-saving procedure for people with cirrhosis. Making sure that your new liver continues to work well after transplantation is very important to the doctor treating you. Fatty liver is a common reason for liver transplantation due to obesity and diabetes. Fatty liver can happen again to your new liver and it is often due to metabolic risk factors (including diabetes, rapid weight

gain, and immunosuppressive therapy, which are used to avoid rejection of your new liver). Some patients with fatty liver after liver transplant have non-alcoholic steatohepatitis (NASH) injury to liver the tissue (inflammation) and damage which is caused by a build-up of fat in the liver. This is a serious problem and can lead to cirrhosis and loss of the transplanted liver. There has been no detailed study into the recurrence of NASH. One reason for this is one of the only ways to detect fatty liver and NASH is to have a liver biopsy, which can be painful and have complications. Recently, a new technology (Fibroscan) and a simple blood test (cytokeratin 18) have been developed which can tell doctors how much a liver is damaged and how much fat it contains without pain or complications.

PURPOSE OF THE STUDY

The main objective of this study is to use non-invasive diagnostic tests, Fibroscan and a simple blood test, to diagnose NASH in patients who undergo liver transplantation.

STUDY DESCRIPTION

The study will last approximately one year. You will be asked to come to the study site for an initial (screening) visit and then for 3 study visits 6, 9, 12 months, in conjunction with your routine visit.

Forty (40) participants will be enrolled in the study at the McGill University Health Centre.

STUDY PROCEDURES & ASSESSMENT

If you agree to take part in this study, you will undergo the following tests to determine if you are eligible for the study. Please see attached Study plan.

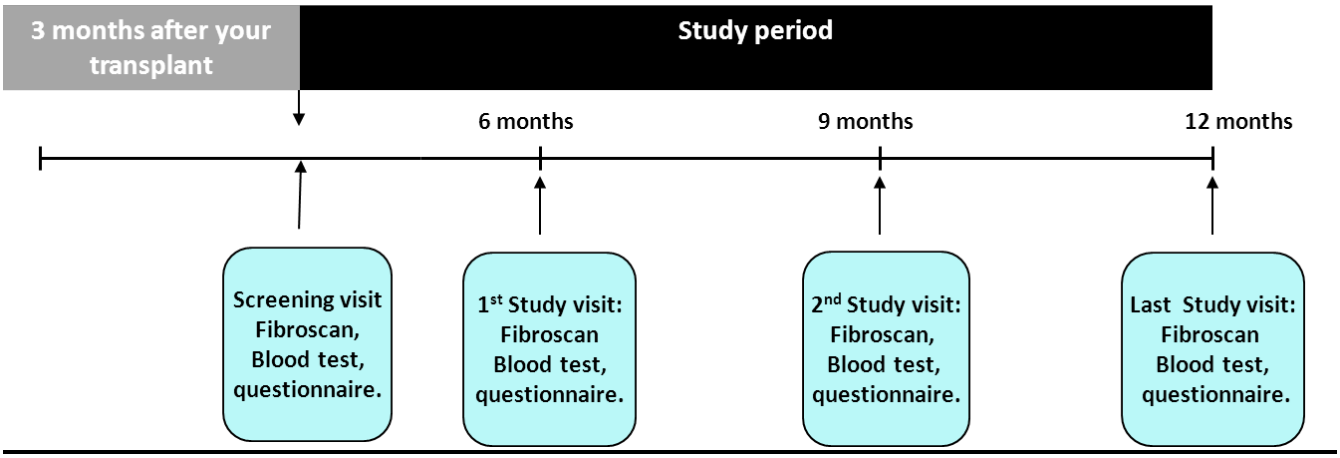
Screening visit

Study questionnaire consists of nine pages, in which we ask for information about your current medication, medical history, drugs, smoking, alcohol consumption, diet and exercise, Hepatitis C and B status. This questionnaire will take about 10 minutess to complete. If you feel uncomfortable with any question, you may choose not to answer them, take a break and continue later. If you find information or question asked to be sensitive, the study team is available to discuss your concerns and/or to help you find the appropriate resources.
A Fibroscan will be done at this visit.
A blood test CK-18 (about 7 mL of blood) will be drawn.
The visit is estimated to take an hour of your time

Study visits at months 6, 9 and 12 post liver transplant

Study questionnaire consists of eight pages, in which we ask for information about your current medication, medical history, drugs, smoking, alcohol consumption, diet and exercise,
Serum CK-18 levels and Fibroscan/CAP measurement
The visit is estimated to take an hour of your time

Study visits



Fibroscan
You will need to fast for 4 hours before the Fibroscan, sips of water are acceptable. The Fibroscan technique will be used to measure how much damage there is in the liver in a **non-invasive,** causing no damage to the surface of your skin, **and painless manner**. Performed at the bedside in the clinic, a mechanical pulse, (a light tap), will be generated at the skin surface, which will spread through the liver. The speed of the wave will be measured by ultrasound. The speed of this wave is related to the stiffness of the liver, which in turn reflects the degree of liver damage – the stiffer the liver is the greater the damage to the liver. You will be given an information sheet explaining all the necessary information about the Fibroscan, which you may take home.

Blood CK 18 samples
7mls of blood will be taken at every visit during this study for CK 18 levels.

POTENTIAL RISKS AND DISCOMFORTS

Blood Draw Risks
Blood drawing may cause some discomfort, bleeding or bruising where the needle enters the body (1%). A small blood clot may form at this site or there may be swelling in the area. Rarely, fainting or local infection may occur. Care will be taken to prevent these complications.

Fibroscan Risks
No cautions or contraindications relating to patient safety have been identified; however the manufacturer advises that the following are contraindications to Fibroscan: Pregnancy, Pacemaker or other implantable device, and ascites.

PREGNANCY

You cannot take part in this study if you are pregnant, think that you may be pregnant, or are trying to get pregnant. You should inform your study doctor if you suspect to be or become pregnant during the study.

SIGNIFICANT FINDINGS

You will be told by the study doctor or his/her staff of any significant new findings that develop during the course of this study that may affect your willingness to continue participating in this study. You may then use this information to make a decision about remaining in the study. Also, at the end of the study your physician will inform you of the research findings.

POTENTIAL BENEFITS

You will or will not benefit by taking part in this study. But, the study results may help add medical knowledge in this area and better treatment for people in the future.

REIMBURSEMENT AND COMPENSATION

You will not be paid for taking part in this study and there will be no cost to you. You will receive $25 for the cost of travel and/or parking and inconvenience because you took part in this study. If you chose to stop taking part in this study or are removed from it before the study is complete, you will be paid only part of this money depending on the length of time you took part.

COMPENSATION IN CASE OF INJURY OR LOSS AND THE RIGHTS OF THE RESEARCH PARTICIPANT

If you suffer any injury or loss due to a research study procedure, you will receive all the care and services needed to treat you as covered by the Regie de l'Assurance Maladie du Quebec (RAMQ).

By accepting to take part in this study, you do not give up any of your legal rights and you do not free the investigators or the McGill University Health Centre of any of their civil and professional responsibility toward you.

CONFIDENTIALITY

While you take part in this study, the study investigator and team will collect and take down information about you in a research study file. Only information necessary for the research study will be collected.

The information in your study file could include your past and present medical history, information about your daily life and test results from exams and procedures done during this study. Your file could also contain other information, such as your name, sex, date of birth and ethnic origin.

All the information collected about you during the study will remain confidential as the law requires. To protect your privacy, your information will be identified with a series of numbers and or letters. Only the investigator in charge of the study knows the numbers and/or letters that link them to you.

The study investigator will use the study information collected about you for research purposes, only to reach the study goals as they are explained in this Information and Consent Document. Your study information will be kept by the investigator in charge of the study for 7 years from the date of publication.

The study information could be printed in medical journals or shared with other people at scientific meetings, but, it will be impossible to identify you.

To make sure the study is being done properly; your research study file as well as your medical file could be checked by a person authorized by:

- A representative of the Research Ethics Board who may also contact you to ask about your experience as research participant;
- The Canadian Society of Transplantation;
- Canadian National Transplant Research Program (CNTRP);
- The Research Institute of McGill University Health Centre.

For your safety and to be able to reach you quickly, your family name, first name, coordinates and the date you started and ended the study will be kept for one year after the study ends in a separate list kept by the investigator in charge of the study or by the McGill University Health Centre.

You have the right to look at your study file in order to check the information gathered about you and to correct it, if necessary, as long as the study investigator or the McGill University Health Centre keeps this information.

However, you may only have access to certain information once the study or your participation has ended

VOLUNTARY PARTICIPATION AND THE RIGHT TO WITHDRAWAL

You may choose whether you would like to take part in this study. If you choose to take part now, you can change your mind later and stop at any time and for any reason. Tell the investigator in charge of the study or one of the members of the research team about your decision.

The investigator in charge of the study, the granting agency (Canadian National Transplant Research Program) or the Research Ethics Board of McGill University Health Centre, may take you off the study without your consent at any time if:

- New information shows that taking part in the study is not right for you;
- You are unable to follow the requirements of the study.
- The study must be stopped for safety or administrative reasons.

If you choose to stop taking part or are taken off the study, the information that was already collected from you during the study will be stored as long as needed to ensure your safety as well as that of other participants in the study and for as long as legally required.

There is a chance that we may learn new information while you take part in the research study. This information may affect your health or wellbeing or change your decision to continue taking part in the study. You will be told any new information as it becomes available, and it will also be given to you in writing.

FUNDING OF THE RESEARCH PROJECT

This clinical trial is being funded by the Canadian Society of Transplantation through the Canadian National Transplant Research Program (CNTRP) and is being run by Dr. Giada Sebastiani. The study doctor is not being paid for including you and looking after you during your participation in this study.

CONTROL OF THE ETHICAL RESEARCH ASPECTS OF THE RESEARCH PROJECT

The Research Ethics Board of the McGill University Health Centre approved this study and is responsible for following the study and making sure that you are protected. Before any change is made to the Information and Consent Form or to the study, it must first be approved by the Research Ethics Board.

CONTACT INFORMATION

If you have questions about this clinical research study, you may contact, Dr Giada Sebastiani during working hours at (514) 843-2090.

In case of emergency during clinic hours (8:00-16:00), contact Dr Giada Sebastiani at 514 843-2090. After working hours, call 514 934-1934, ext. 33333 and ask for the physician-on-call for the Hepatology or liver transplant surgeon.

If you have questions concerning your rights as a Research Participant and wish to discuss them with someone not connected to the clinical research study, please contact the Ombudsman of the McGill University Health Centre (514) 934-1934 extension 35655.

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B. DECLARATION OF CONSENT

Participant's consent:

I have read and reviewed the entire consent document, and I voluntarily agree to participate in this research study, understanding that I may withdraw my participation at any time. I have had the opportunity to ask questions and all of my questions have been answered to my satisfaction. I have been given sufficient time to consider the above information and to seek advice. I grant direct access to my study and medical records, and that my primary physician may be informed of my study participation. I will be given a copy of this signed and dated Informed Consent Form. By signing and dating this consent form, I am not giving up any of my legal rights and, I give permission to access my medical records at the McGill University Health Centre.

Research Participant Name (printed)	Research Participant Signature	Date of consent Dd/mmm/yyyy

C. DOCUMENTATION OF CONSENT

Person(s) who conducted the study and consent discussion:

I have explained to the participant the conditions of taking part in the study as stated in this Consent Document and I answered all her/his questions.

Name of the person who obtains the consent (printed)	Study Role of the person who obtains consent
Signature	**Date of consent Dd/mmm/yyyy**