

**Date: February 1<sup>st</sup>, 2022**

**Study Protocol and Statistical Analysis Plan**

Study Title	A Novel, Non-pharmacological, Intervention for the Management of ADHD in Adolescents
Protocol ID	VIZO_004
ClinicalTrials.gov ID	NCT05835336

## Protocol Synopsis

<b>Device Name</b>	VIZO Glasses
<b>Objectives</b>	To Assess the Efficacy and Safety of a Novel Device (VIZO Glasses) in the Management of ADHD in Adolescents.
<b>Study Group</b> <u>Investigational Group</u>	VIZO Glasses: Eyeglasses with personalized peripheral retinal stimuli
<b>Key Eligibility Criteria</b>	
<u>Inclusion Criteria</u>	<ul style="list-style-type: none"> <li>• Documented history of primary ADHD diagnosis by certified clinicians</li> <li>• Age 12-17 y</li> <li>• Minimum total of 24 on the parent ADHD-IV Rating Scale (ADHD-RS)</li> <li>• Written informed consent</li> <li>• Able and willing to complete all required ratings and assessments</li> </ul>
<u>Exclusion Criteria</u>	<ul style="list-style-type: none"> <li>• Any current psychiatric/neurological comorbidity (e.g., epilepsy, Autism, depression, TBI, etc.), other than ADHD</li> <li>• ADHD Medications (stimulants, non-stimulants, other)</li> <li>• Undergoing Neurofeedback, cognitive training</li> <li>• Any other reason that, in the opinion of the investigator, prevents the participant from participating in the study</li> </ul>
<b>Endpoints</b>	
<u>Primary</u>	<p>Primary Outcome Measure: Change in the ADHD Rating Scale (ADHD-RS) Parent-report Questionnaire - Total Score [Time Frame: Baseline, 2-month]</p> <p>The ADHD-RS is a parent report questionnaire that is used to aid in the diagnosis of ADHD in children ranging from ages 5-17. The questionnaire contains 18 symptom items corresponding to the DSM-V criteria for ADHD. The parent rates each symptom item on a 4-point Likert scale ranging from 0 ('Never or Rarely') to 3 ('Very Often'). The total score goes from 0 up to 54. Higher scores mean more symptoms and higher ADHD impairments.</p> <p>Change in the ADHD Rating Scale (ADHD-RS) Parent-report Questionnaire - Inattention Subscale [Time Frame: Baseline, 2-month]</p> <p>The Inattention subscale of the ADHD-RS contains 9 symptom</p>

	<p>items, that are designed to measure the child's attention level on tasks or play activities. The items are rated by the parent on a 4-point Likert scale ranging from 0 ('Never or Rarely') to 3 ('Very Often'). The total score goes from 0 up to 27. Higher scores mean more symptoms and higher ADHD impairments.</p> <p>Change in the ADHD Rating Scale (ADHD-RS) Parent-report Questionnaire - Hyperactivity-Impulsivity Subscale [Time Frame: Baseline, 2-month]</p> <p>The Hyperactivity-Impulsivity subscale of the ADHD-RS contains 9 symptom items, that are designed to measure the child's hyperactivity level and impulsivity level. The items are rated by the parent on a 4-point Likert scale ranging from 0 ('Never or Rarely') to 3 ('Very Often'). The total score goes from 0 up to 27. Higher scores mean more symptoms and higher ADHD impairments.</p> <p>Change in Behavior Rating Inventory of Executive Function (BRIEF) - Metacognitive Index [Time Frame: Baseline, 2-month]</p> <p>The Metacognition Index (MI) of the BRIEF reflects a child's ability to self-manage and monitor tasks cognitively. The subscale is composed of the Initiate, Working Memory, Plan/Organize, Organization of Materials, and Monitor scales of the BRIEF. It uses a Likert-type response format ranging from 1 to 3, where 1 is never, 2 is sometimes, and 3 is often. High scores indicate executive deficit.</p>
<u>Secondary</u>	<p>Secondary Outcome Measures:</p> <p>Clinical Global Impression-Improvement (CGI-I) [Time Frame: 2-month]</p> <p>Based on an interview with the participant, the clinician rates the total improvement on a 7 point scale as follows: 1=very much improved since the initiation of treatment; 2=much improved; 3=minimally improved; 4=no change from baseline (the initiation of treatment); 5=minimally worse; 6= much worse; 7=very much worse since the initiation of treatment.</p> <p>Change in Behavior Rating Inventory of Executive Function (BRIEF) - Global Executive Composite [Time Frame: Baseline, 2-month]</p> <p>The BRIEF is a standardized measure that captures views of</p>

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	executive functions or self-regulation in the everyday environment. The BRIEF is composed of 86 items, where each item is rated by the parent, using a 3-point Likert scale ranging from 1 ('Never') to 3 ('Often'). The Global Executive Composite (GEC) is an overarching summary score that incorporates all of the BRIEF clinical scales. High scores indicate executive deficit.
<b><u>Other Outcomes</u></b>	Adverse events will be monitored and documented.
<b>Follow-up Visits Schedule</b>	This was a two-month, open-label study in which eligible ADHD-diagnosed adolescents were provided with a pair of VIZO-Glasses featuring a personalized visual stimuli pattern for each participant. A baseline assessment of the participants' ADHD clinical profile pre-intervention included the ADHD-RS and the Behavior Rating Inventory of Executive Function (BRIEF) questionnaires. In addition, participants completed the Conners' Continuous Performance Test-3 (CPT-3). Optical centration parameters and demographic information were collected for each participant. Participants were then invited to complete a personalization process in which they were fitted with personalized VIZO-glasses. Participants were instructed to wear their Vizo-glasses for at least two hours daily for two months. A follow-up assessment at the end of the intervention re-assessed ADHD performance on the ADHD-RS and BRIEF questionnaires. In addition, participants completed the CPT-3 test while wearing their VIZO-glasses. The Clinical Global Impression-Improvement (CGI-I) rating scale was administered by a clinician.
<b>Sample Size</b>	Given the exploratory nature of the study, the sample size was chosen to be sufficiently large to detect significant within subject effects of at least 0.5 (Cohen's D) for a 2-Tailed test, at alpha-0.05 with a power of 80%.
<b>Analysis Plan</b>	Paired samples t-tests will be used to test the effect of the VIZO-glasses intervention, comparing the baseline and end-of-intervention performances. No corrections for multiple testing will be applied due to the exploratory nature of the study. The safety analysis will include all available data on the intent-to-treat (ITT) population.