PARTICIPANT INFORMATION AND INFORMED CONSENT FORM

Protocol Number: NC-009
Protocol Title: A Phase 2, partially-blinded, randomized trial assessing the safety and efficacy of TBAJ876 or bedaquiline, in combination with pretomanid and linezolid in adult participants with newly diagnosed, drug-sensitive, smear-positive pulmonary tuberculosis

Participant Initials:_____ Participant Number:_____

Introduction

We invite you to take part in a study with a new medicine called TBAJ876.

If your local laws allow, you will review and sign the informed consent form (ICF) electronically. After you have read and understood the contents of this ICF and if you decide to take part in the study, you will be asked to sign the ICF electronically to show your willingness to participate.

Please read this information sheet before you agree to take part. This document will answer the following questions:

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If you have any other questions that are not answered in this document, please ask someone from the study staff for more information.

It is very important that you understand this information sheet before you agree to take part in this study. We would like you to ask as many questions as you need. If there is anything that you do not understand, please discuss this with the study doctor, the study staff, your own doctor or with your family.

1. Is the study safe? 1

The <<name of Ethics Committee as applicable>> and <<name of Regulatory Authority as applicable>> have checked and approved this study because it complies with medical and ethical standards.

In addition, the study will be done according to the Declaration of Helsinki 2013, and the International Conference on Harmonisation-Good Clinical Practice (ICH-GCP) <<and list any other appropriate guidelines e.g. South African GCP Guidelines>>.

One of the purposes of these regulations is to make sure that the rights of people taking part in research studies are protected. If you would like to read any of these guidelines and regulations, please ask your study doctor to give you a copy.

2. Do I have to take part? 2

Your participation in this study is totally voluntary (out of free will). You may choose not to be in the study or leave the study (withdraw your consent) at any time by telling the study doctor.

If you decide not to be in the study or if you withdraw your consent, you will not lose any benefits that you otherwise would have had. The study doctor will refer you to the TB clinic where they will give you the standard TB treatment available to all TB patients, according to your country's National TB Treatment Guidelines.

3. Why are you doing the study? 3

You have been diagnosed with pulmonary Tuberculosis (TB). This means that TB bacteria, or germs, are present in your lungs.

Some TB germs, known as drug-sensitive TB (DS-TB), can be treated with medicines that we know work well, but need to be taken for at least 6 months.

We want to do this study to see if TBAJ876, a new medicine, works against TB. Its safety will also be tested. Until now it has been tested in the laboratory, on animals and on healthy human volunteers and has shown to possibly be effective against TB and safe for use.

4. How will the study work? 4

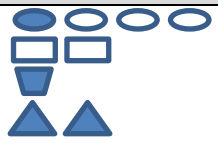
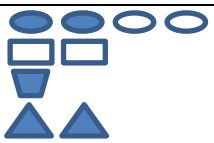
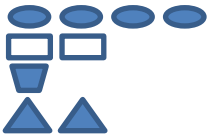
About 300 people (called participants) will be taking part in this study. All the participants will be between the ages of 18 and 65 years old and it is planned that they will be from the following countries: Georgia, the Philippines, South Africa, Tanzania and Uganda.

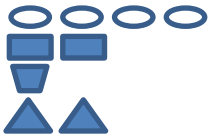
Participants from other countries may also take part. We expect that you will be in this study for about 18 months.

TBAJ876 is an experimental medicine that has not been approved in any country. Pretomanid, Linezolid and Bedaquiline have been approved for use in TB treatment in most countries. HRZE (combination tablet containing Isoniazid, Rifampicin, Pyrazinamide and Ethambutol in each tablet, HR (combination tablet containing Isoniazid and Rifampicin in each tablet) have been approved in many countries for the treatment of TB.

Vitamin B6 is recommended by most countries to be taken as a daily supplement, when taking the HRZE/HR medicine. Your study doctor will decide and tell you if you must take Vitamin B6.

If your study doctor decides that you qualify to be in this study you will be randomly assigned (purely by chance, like flipping a coin) to a treatment group. You have an equal chance of being assigned to any group, between 1 and 5, like in the table below.

Group	**Day 1 to Week 8** *Once daily for 8 weeks*	**Tablets per Day**	**Week 9 to Week 15 or 26** *Once daily for 7 or 18 weeks*	**Tablets per Day**
1	TBAJ876 **25mg** Pa-L		HR	Up to 5
2	TBAJ876 **50mg** Pa-L		HR	Up to 5
3	TBAJ876 **100mg** Pa-L		HR	Up to 5

Group	**Day 1 to Week 8** *Once daily for 8 weeks*	**Tablets per Day**	**Week 9 to 26** *Once daily 18 weeks*	**Tablets per Day**
4	**B-Pa-L**		**B-Pa-L**	
5	**HRZE**	Up to 5	**HR**	Up to 5

Key

 *TBAJ876 25mg tablet*
 Bedaquiline 100mg tablet
 *TBAJ876 placebo*
 Bedaquiline placebo
 *Pretomanid 200mg tablet*
Linezolid 300mg tablet

If you are in group 5, you and your study doctor will know which study medicine you will receive. If you are in groups 1 to 4, neither you nor your study doctor will know which study medicine you will receive between Day 1 and Week 8: this is called 'blinding'. Blinding is done by giving everyone the same number of tablets.

Some participants receive tablets that look like the TBAJ876 or Bedaquiline study medications, but do not contain either of these medicines and these are called placebo.

This is how we make sure that the study is blinded during the first 8 weeks. You will always receive study medicine.

If there is an emergency and the study doctor needs to know what treatment you are receiving, they can quickly and easily find this out.

If you get medication from the groups 1, 2, 3 or 4 the study doctor may decide that your linezolid medicine dose needs to be reduced or paused or stopped. Your study doctor will speak to you about this, if it happens.

You should return all used and unused study medicine at each visit.

5. What will happen to me in the study? 5

You must be willing to follow all study procedures and requirements. For this study to be successful and for your own safety, it is important that you co-operate fully with the study doctor and follow his/her instructions exactly throughout your time in the study.

Depending on your response to the medicine and study procedures, there may be some slight changes to the treatment visits and procedures and how long you stay in the study. To help you understand what will happen at each of the visits, we have described these below:

Demography	→	This is personal information about your year of birth, gender and race.
Medical history	→	Your medical history and other medicines, including prescription, herbal and traditional you may have taken in the last 30 days, or are currently still taking.
Alcohol, smoking history and drug use	→	Alcohol, smoking history and drug use.
Eligibility assessment	→	This is a process of checking that you meet the study requirements to make sure it is safe for you to take part.
Sputum collection	→	We will ask you to cough up sputum (phlegm, not spit) into a small cup at different times in the study. The sputum is used to check that you have TB, what type of TB you have, how many TB bacteria you have and what medicines will work on the TB bacteria. We will store the TB bacteria in our laboratory for future research. This has no effect on you.
HIV, CD4 count and viral load	→	This is a test to see if you have HIV. If you do, we will test your CD4 count (a cell that fights infection). We will also test the amount of HIV in your blood (viral load). We will talk to you about HIV before the blood tests and again when we give you the results (pre and post counselling). We will ask you to sign a separate informed consent form before we test you for HIV.
Blood tests	→	We will take blood from you by inserting a small needle into a vein in your arm. A total of about 340 millilitres (68 teaspoons) of blood will be collected over the whole study. No more than about 20 millilitres (4 teaspoons) will be taken at a study visit. The blood will be tested to check if you are healthy.

		There may be bruising, soreness or possible bleeding from the vein when the blood is taken and sometimes a person may become dizzy for a short period.
Urine tests	→	You will be asked to provide a sample of your urine in a small cup when you are at the clinic. The urine will be tested to check if you are healthy. Your urine will also be tested to see if you have taken any drugs like cannabis, cocaine, amphetamines, opiates, benzodiazepines and barbiturates.
Pregnancy test	→	If you are a woman who can have children, your urine will be tested to see if you are pregnant, whether you are sexually active, or not.
TB and health questionnaires	→	You will be asked to tell your doctor about your TB symptoms and they will also check how you are feeling, and ask you how TB may affect your life.
ECG	→	A test that is done by placing 12 sensors (like stickers) to your skin for a short time to check how your heart is working, to monitor the electrical activity of your heart. The sensors, or stickers, may cause slight discomfort when they are removed from your skin.
Chest X-ray	→	This is a photograph of your lungs, taken by exposing you to a small amount of radiation that is not likely to be a risk to your health.
Physical check-up	→	This is an assessment of your body to check for signs of disease.
Vital signs	→	A measurement of your blood pressure, heart rate, breathing rate, body temperature, height and weight.
Pharmacokinetic (PK) test	→	Blood will be taken at some visits to check what happens to the medicines once you swallow them. These blood samples will be taken at the same time as the blood tests.
Eye check-up	→	This is a check of your vision by asking you to read the letters or symbols off a chart.
Nerve check-up	→	We will ask if you feel any pain, burning, stinging, tingling, pins and needles or numbness in your arms and legs. While sitting on an examination table with your legs hanging over the side, the doctor will use a small tool to lightly tap below your knee to see how your leg responds.
Study medicine check	→	You will be asked how much study medicine you have or not taken, since the last time you were at the clinic.

This is a list of all the study visits and what will happen at each visit. Sometimes the study doctor may ask you to come back to the clinic to repeat these tests, to check the result or to perform other tests to make sure that you are safe.

Visits	**Screen**	**Treatment Period 1**												**Treatment Period 2**						**Post EOT Follow-up**						**Early Discontinuation**
Study Procedures	Up to 11 days before 1st IMP dose	Day 1	Day 4	Day 8	Day 11	Day 15	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	[1] EOT Make-up Period 1	Week 9	Week 12	Week 15 or EOT	Week 20	Week 26 or EOT	[2]EOT Make-up Period 2	FU Week 4	FU Week 8	FU Week 16	FU Week 26	FU Week 38	FU Week 52	
Sign informed consent form	X																									
Demography	X																									
Medical, alcohol and smoking history and drug use	X																									
Urine, blood and *PK tests	X	X		X		X	X	X	X	X	X	X	X	X	X	X	X	X	X							X
Pregnancy test	X	X						X		X		X			X			X				X			X	X
Eligibility check and randomise	X	X																								
HIV, CD4 count and viral load	X							X				X						X							X	X
Chest X-ray	X														X			X					X		X	X
Sputum collection	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Eye check-up	X					X		X		X		X			X	X	X	X		X		X				X
Vital signs and height	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
*ECG	X	X				X						X	X		X			X	X							X
Physical check-up	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Nerve test	X					X		X		X		X	X		X	X	X	X	X			X				X
TB symptoms and health questionnaire		X						X				X	X			X		X	X				X		X	X
Check side effects, study and other medicines	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X

**On Day 15 and at Week 8 PKs and ECGs will be done at 4 different times during these visits, only if you are in groups 1-4.*

If you are in groups 1-4 and you get TB again, the study doctor will give you HRZE/HR TB medicine for 6 months and ask you to visit the clinic for another 6 months to check if you are healthy.

This is a list of all the study visits and what will happen at each visit.

Visit	**Re-Treatment**						**Follow-up**		
Study Procedures	Day 1	Week 2	Week 4	Week 8	Week 16	Week 26	Week 8 after EOT	Week 16 after EOT	Week26 after EOT
Chest X-ray	X					X			X
Sputum collection	X	X	X	X	X	X	X	X	X
Eye check-up	X					X			X
Vital signs and height	X	X	X	X	X	X	X	X	X
Physical check-up	X	X	X	X	X	X	X	X	X
Blood test	X	X	X	X	X	X			
Check side effects, study and other medicines	X	X	X	X	X	X	X	X	X

6. What can go wrong in the study?

6

There are some possible risks and inconveniences of being in the study. The risks listed below will only apply to you for the actual treatment you receive. However, at the time when you agree to take part, you may not know which treatment this will be, so you need to know of all the possible risks and inconveniences.

You should **not drink alcohol** while you are taking study medication or other TB drugs as alcohol may damage your liver. You should tell your doctor if you have **heart problems**, including a slow heart rate, or if you have low thyroid hormone levels.



Details of the risks of taking the medicines in this study are noted below:

Liver problems	→	May be associated with symptoms such as nausea or vomiting, stomach pain, fever, weakness, itching, unusual tiredness, loss of appetite, light coloured bowel movements, dark coloured urine, yellowing of your skin or the white of your eyes. Liver problems may also be suggested by blood tests that show abnormalities in measures of your liver enzymes and other measures of how your liver is working. In rare	Pretomanid, Linezolid, Bedaquiline, HRZE, TBAJ876

		cases liver problems may be serious and even lead to death.	
Headache	→	pain in any part of the head	Pretomanid, Linezolid, Bedaquiline, HRZE
Heart problems	→	A QTc interval prolongation is a change in a measure of the heart's electrical cycle, which may lead to heart rhythm problems.	Bedaquiline
Stomach problems	→	Tenderness or pain of the stomach area	Linezolid TBAJ876
Stomach problems	→	Feeling like you want to throw up, or actually throwing up. Also, not feeling hungry, having diarrhoea (loose bowel movements) or having an upset stomach.	Pretomanid, Linezolid, Bedaquiline TBAJ876
Skin problems	→	Inflamed areas on your skin, which may be red, itchy and/or painful.	Pretomanid, HRZE
Fever	→	When your body temperature goes higher than 38 °C or 100.4 °F.	Linezolid
Dizziness	→	A feeling of being 'drunk' or 'light headed', especially when you stand up or sit down quickly.	Linezolid, Bedaquiline, HRZE
Signs of nerve disturbances	→	This is sometimes called 'peripheral neuropathy', which may be experienced as a painful burning, or stinging, tingling, sensation of pins and needles or numbness in your arms and legs. In some cases, this can be permanent.	Linezolid, HRZE
Eye problems	→	Eyes itching, burning, and/or making more tears, making it difficult to see clearly.	HRZE
Convulsions or seizures	→	These are also commonly known as 'fits'. A convulsion is when the body muscles contract and relax quickly and repeatedly / uncontrolled shaking of the body. A seizure is when there is a change in the normal electrical activity of the brain.	Linezolid
Joint pain	→	One type of joint pain that may be caused or worsened by some medicines is called gout. Gout is caused by too much of a normal chemical in your body called uric acid. Uric acid is a chemical that is created when the body breaks down substances called purines. Purines are found in some foods (like seafood) and drinks (like beer).	Bedaquiline, HRZE
Tiredness	→	A feeling of tiredness	HRZE
Photosensitivity	→	This occurs when your skin reacts to sunlight. Your skin may also develop rash and itching.	HRZE
Low blood sugar	→	This is often seen in patients with diabetes who must take insulin or other medicines	Linezolid

The following are a list and description of side effects that are unique to each of the medicines:

TBAJ876

The following side effects could happen based on a study with a low number of participants and from studies not involving humans.

Below is a list of potential side effects of this study medicine, that all got better in a few days:

General muscle damage	→	Can be seen after strenuous physical activity
Muscle spasm	→	Also known as muscle cramps
Myalgia	→	Muscle aches and pains
Pancreas problems	→	The pancreas may swell and cells in the pancreas may make more lipase (this is called an enzyme) than normal.
Heart muscle damage	→	This was only seen in the animal studies. These side effects were not seen in any of the participants, but we will continue to watch out for any possible side effects of the heart.
Stomach problems	→	Some participants had stomach cramps, diarrhoea or constipation but these got better in a few days.

In addition to the listed side effects above, your study doctor has information on side effects that may occur less often and your study doctor could discuss these with you.

Pretomanid

Besides the side effects mentioned above, the other side effects seen in studies are:

Reproductive organ changes	→	Results from people studies showed no signs that pretomanid damages the male reproductive organs. This was only seen in some animal studies. The people studies showed an improvement in male hormones in participants who had low male hormones before they received the medicine. However, we will continue to watch out for any possible effects on the testes.

Linezolid

Besides the side effects mentioned above, the other **most common** side effects seen in patients who took linezolid are:

Changes in taste	→	certain food or drinks may taste different to you
Tongue discolouration	→	the colour of your tongue changes
Fungal infections	→	when a fungus causes the infection
Vaginal moniliasis	→	a fungal infection in the vagina
Oral moniliasis	→	a fungal infection in the mouth

Other side effects seen in patients who took linezolid include, but are not limited to:

Myelo-suppression	→	This is a lack of certain cells in your blood that your body needs to function. It can make you feel tired and make your body being unable to fight off other illnesses or heal an injury. This could also make you bleed or bruise easily.
Inflamed peripheral nerves	→	when your peripheral nerves become swollen and painful. peripheral nerves = nerves from your central nervous system (brain and spinal cord) connected to the rest of the body (arms, legs, etc.)
Lactic acidosis	→	a build-up of waste products in your blood that can cause constant nausea and vomiting.
Serotonin syndrome	→	when linezolid is given with serotonergic agents*, including antidepressants such as selective serotonin reuptake inhibitors* (SSRIs), this rare but serious condition may occur. Be sure to tell your study doctor about all prescription and non-prescription medications you are taking. It can cause many different symptoms, for example confusion, restlessness, tremors, blushing, sweating and fever.
High blood pressure	→	causing a rise in blood pressure when used with other medicines
Optic neuropathy	→	A type of damage to the nerves in your eye that can lead to blindness if it is not treated. This can be permanent.
Low blood sugar	→	This is often seen in patients with diabetes who must take insulin or other medicines.

Bedaquiline

Besides the side effects mentioned above, the other **most common** side effects seen in patients who took bedaquiline are:

QTc interval increase	→	An increase in the measure of the heart's electrical activity. This was seen on the ECG in patients taking bedaquiline and in those taking other TB drugs. This may increase the risk that the heart does not beat in its normal, regular rhythm, which in rare cases cause death.
Build-up in the body	→	Bedaquiline leaves your body slowly after the last tablet is taken. It takes about a year for all the medicine to be removed from your body.

HRZE

HRZE tablets contain a mixture of the 4 medicines normally used for the treatment of TB: rifampicin, isoniazid, pyrazinamide and ethambutol.

Besides the side effects mentioned above, the other **most common** side effects seen in patients who took HRZE are:

Flushing	→	skin or face becomes red and hot

Confusion	→	feeling confused, or feeling like you do not know where you are (disorientation), and seeing or hearing things that are not real (hallucinations)
Inflamed peripheral nerves	→	when your peripheral nerves become swollen and painful. peripheral nerves = nerves from your central nervous system (brain and spinal cord) connected to the rest of the body (arms, legs, etc.)
Discoloured body fluids	→	urine, tears, etc. turning orange

It is important that you follow your study doctor's and/or study nurses' instructions exactly. You must inform your study doctor immediately if:

- you take any local or herbal remedies, prescribed or non-prescribed medicines,
- your medical condition changes,
- you have any side effects,
- you have any complications, or
- you have any injuries while taking the study medicine.

Your study doctor and/or nurse will ask you at every visit about any other medication you may have taken and how you are feeling. Some medicines cannot be taken close to the time that you take your study medicine. Your study doctor will tell you when to take your study medicine, and any other medicines.

It is possible that your condition will stay the same or get worse while you are in this study. However, the study doctor will watch you closely and if they feel that participating in the study is not good for your health, they will immediately take you off the study.

There may be risks with the use of the study medicine that we do not yet know of. If we become aware of these, we will tell you of any new important findings that may affect your willingness to stay in the study.

7. Are there things that I cannot do while I am in the study? 7

You cannot take part in this study if you are breastfeeding, pregnant or trying to get pregnant.

This is because there may be risks to becoming pregnant and to an unborn child that we may not yet know of. If you can get pregnant, we will test you before you take the study medicine and during the study to see if you are pregnant.

Women participants, and male participants' female sex partner, who CAN become pregnant:

You must use 2 methods of birth control. You need to use birth control for as long as you are taking the study medicine and for up to 6 months after you have taken the last dose of study medicine.

When taking the study medicine, birth control methods that are based on hormones only, such as the contraceptive pill or injection, may not work as well as usual. Because of this, either you must be willing not to have sex, or you need to use 2 methods of birth control, for example:

a) Double (2 different types) barrier methods, which may include a male condom, diaphragm, cervical cap, or female condom; OR
b) 1 barrier method described above used together with a hormone-based birth control (tablet or injection), or an intra-uterine device

Please note that it is your own responsibility to get the correct birth control for you from your family planning or birth control clinic. Please speak with your study doctor if you are unsure of where to get the correct birth control.

If you do become pregnant while you are in the study, it is very important for you to tell the study doctor immediately. If this happens, the study doctor will discuss with you what to do.

Since there might be unknown risks to an unborn child, we will ask you to stop taking part in the study. We may have questions about your pregnancy and the baby and we may ask you to visit the study doctor at certain times during and after your pregnancy to check your health status and collect information on the outcome of your pregnancy.

Women participants, and male participants' female sex partner, who CANNOT become pregnant:

You do not need to use birth control if you are:

a) Not an active heterosexual male or female participant, or you do not practice sex; OR
b) A female participant or male participants' female sex partner, and have had an operation to remove both ovaries, or both ovary tubes have been tied and or the womb removed, or you have not had a period for at least 12 months in a row; OR
c) A male participant or you are a female participant whose male sex partner, who has had both testes tubes tied or cut, or had both testes removed at least 3 months before the study.

Meals and Food

Tyramine is a natural substance found in some plants, meat and cheese. Some examples are smoked or dried meats and fish, pickled vegetables, old cheese and soya sauce. You should avoid foods containing tyramine while you are on the study.

8. How can the study help me? 8

There is a chance that your TB may get better because you are in this study, but we cannot guarantee this. If the study medicine does not work well you will not get any benefit from being in the study. However, the information that we get from the study can help in making future treatments for TB, and in the long run it will likely help other TB participants.

The close medical attention you will get by taking part in the study may help you to learn useful information about your health status.

9. What are my other choices for treatment? 9

You do not have to take part in this study. If you decide not to take part, you will not be disadvantaged and you will still receive care and treatment for your TB.

If you do not take part in the study you should immediately start TB treatment at the TB clinic per your country's National TB Treatment Guidelines. This treatment is well-known and effective.

10. What will happen if I am injured in the study? 10

The sponsor has taken out insurance in case you get injured in this study. The sponsor will pay you for all reasonable medical expenses you may have because you are injured in this study, per the guidelines of the Association of the British Pharmaceutical Industry (2014 ABPI guidelines). These guidelines recommend that the sponsor of the study, without any legal commitment, should pay you, without you having to prove that it is at fault, for any injury resulting from giving the study medicine or other procedures carried out in accordance with the protocol for this study. Your study doctor has a copy of the ABPI guidelines if you would like to see them.

The APBI guidelines do not require the sponsor to pay you if the injury:

- resulted from a medicine or procedure that is not required by the study or if you did not stick to the rules of the study;
- was not a serious injury that will last a long time and disable you;
- was caused by other registered and currently available medicines that you were given so that they could be compared to the study medicine.

Because of the following reasons, you may be paid less or the sponsor may not have to pay you at all under the ABPI Guidelines:

- how serious the disease is that is being treated, how likely you are to have adverse reactions and any warnings that were given to you;

- the risks and benefits of normal or standard treatments compared to the risks and benefits that we know the study medicine have or think that it may have;
- a wrongful act of someone outside the study, or if the study doctor does not properly deal with an adverse reaction;
- if you have been negligent.

Any payment that the sponsor makes to you because of the ABPI guidelines does not mean that the sponsor is legally responsible for your injury. You will not lose any of the legal rights you have if you are injured just because the sponsor has agreed to follow the ABPI guidelines. Please ask if you want more information on this.

11. What will happen to my personal information? 11

All paper records and electronic systems with information that can identify you will be kept confidential and, as far as the applicable laws and regulations allow, will not be made publicly available.

The sponsor has contracted a vendor called Clinical Ink, to provide electronic consent services and to collect trial data. Clinical Ink has put in place the appropriate administrative, physical, and technical measures to make sure that your data is stored in a confidential way which complies with the applicable privacy and security laws.

The study doctor and research team will use personal information about you to carry out this study. This may include your name, address, medical history and information from your study visits. However, this personal information will stay at the study site and will not be included in the study data that we will send to the sponsor or representatives of the sponsor. You will only be identified by a coded number in reports or publications that are produced from this study (study data).

To confirm that the study data collected about you is correct and related to you, selected people working for the sponsor including Clinical Ink, auditors, as well as representatives of government regulatory authorities and ethics committees will have access to your personal information at the study site. These persons know that they must keep your information confidential. By signing this document, you are agreeing to let them have access to your information. Clinical Ink may also be used to remotely view the study data in a safe manner.

The sponsor may send your coded study data that were collected from your country to other countries. However, they will obey all local and international laws and regulations on data privacy to protect your personal and other information, even in countries where data privacy laws are less strict.

The sponsor or representatives may use this study data for the following purposes:

- To see if the study medicine works and is safe.
- To compare the study medicine to other medicines.
- For other activities related to the study medicine.

You have the right to ask the study doctor about the data we are collecting about you. You can ask the study doctor to allow you to see your personal information and you can ask him/her to make any corrections, if needed.

The results of the study will only be available once all participants have completed the study, the information has been collected and checked, and the results have been analysed (looked at and a decision made about them). If you want to know the results of the study you may contact your study doctor and they will tell you the results if they are ready.

The results of this study will be made available to national and international medicine regulatory agencies to help them decide if the new treatments are helping to treat TB. In addition, the results may be published in international medical journals so that doctors and other health workers might learn from this work. You will not be named in any reports/publications.

A description of this clinical trial will be available on www.clinicaltrials.gov, as required by United States law *<<and other countries as required, e.g. www.sanctr.gov.za, as required by South African law>>.* These websites will not show information that can identify you. At most, the websites will include a summary of the results. You can search these websites at any time.

12. Will I be paid to take part in this study? 12

You will not be paid to take part in this study. However, the sponsor will pay you back for out-of-pocket expenses such as for transport to and from the study site and other various costs that you may have because of your study participation. The site will also give you vouchers or money, if needed, to make sure that you have enough airtime to contact your study doctor.

You will get, depending on your out of pocket expenses, an amount of *<<specify amount and frequency e.g. x per visit>>*. If your study related costs are more than the specified amount and you have proof of such costs, please discuss it with your study doctor.

13. Do I need to pay anything to be in this study? 13

The sponsor will pay all costs related to the study such as the study medicine, treatment, tests, examinations and procedures specified in the protocol. Not you, nor your healthcare provider will have to pay for these expenses. In other words, you will not have to pay for anything that is needed for your participation in this study.

Should you need to visit any doctor, besides your study doctor, or you are hospitalized for any illness, including to treat your TB, then you will need to visit the doctor or hospital as allowed by your healthcare provider. These medical visits, that are not part of the clinical study, are not paid for by the study.

14. Who is in charge of the study? 14

The study is sponsored by the Global Alliance for TB Drug Development (TB Alliance), a not-for-profit organization based in New York.

The TB Alliance will pay the study staff for doing this study. The study doctor will not benefit unduly if you are included in the study.

15. What happens if I do not want to or cannot be in the study anymore? 15

Your participation in the study may be stopped for the following reasons:

- You do not follow the study doctor's instructions.
- You do not take the study medicine as prescribed.
- The study doctor decides that it is in your best interest (e.g. you experience certain side effects during the study).
- If you ask to stop (you don't have to explain why).
- If the TB Alliance asks you to stop.
- If the TB Alliance stops the study or closes the study site.
- If you become pregnant (women who can get pregnant).

If you decide to withdraw from the study, please tell us immediately. If you withdraw from the study, it will not change your access to other medical care or the quality of the care.

If you leave the study, the doctor would like to ask you some questions and check your health to make sure that you are safe and that any possible side effects from the study medicines are treated.

If your treatment is stopped or you withdraw from the study completely, your study doctor/site staff may need to perform certain procedures previously mentioned in the "What will happen to me in the study" section. We may ask you to come to the hospital/study site to complete these procedures.

Once you have left the study, the study doctor might refer you to your local TB clinic for further treatment of your TB.

16. Whom can I contact if something worries me? 16

You can call the study doctor or another person at the study site at any time of the day or night (24 hours) on Tel: *<<add>>* or *<<add>>*.	

For questions about <u>your rights</u> as a participant in a study:

If you want any information about your rights as a study participant, or if you have complaints about this study, you may contact *the <<add name of Ethics Committee>>*, which is an independent committee established to help protect the rights of research participants. Their contact details are as follows:

<<Add name, address and contact telephone/fax numbers>>

For <u>complaints</u>, if you think that the study doctor or ethics committee did not help you:

<<include per country as appropriate>>

<<For South Africa only: "If you have questions about this study you should first discuss them with your study doctor or the above-mentioned ethics committee. After you have talked with your study doctor or the ethics committee if you are not satisfied with their answers, you should contact the South African Health Products Authority (SAHPRA):

insert latest SAHPRA contact details>>

17. How do I agree to be in this study? 17

If you want to take part in this study, please read the consent statement and sign on the next page.

Personal doctor / specialist notification option:

Please mark below, by writing your initials in the correct block, if you want me to tell your personal doctor or your specialist that you are taking part in this study:

Participant Initials	**YES**, I want my study doctor to tell my personal doctor / specialist that I am taking part in this study.
Participant Initials	**NO**, I do not want my study doctor to tell my personal doctor / specialist that I am taking part in this study.
Participant Initials	**I do not have** a personal doctor / specialist.

Participant Notes

PARTICIPANT INFORMED CONSENT FORM

By signing below, I agree that:

- I understand that all electronic medical communications carry some level of risk as described in this information sheet.
- I have read, or someone has read the information sheet and consent form for this study to me, and I understand it.
- I have had the chance to ask questions and I am happy with the answers.
- I have had time to discuss the information with others and to decide if I want to take part.
- I will get a signed and dated copy of this consent form on the day that I sign it.
- I agree of my own free will to take part in this study. I know I have the right to stop taking part at any time, without giving any reason. If I stop taking part, it will not change my medical care or legal rights.
- Site staff, representatives from the sponsor, including auditors, regulatory authorities and ethics committees can have direct access to my medical records. They will treat my information as confidential.
- If I withdraw from the study, study data collected about me up to the point of my withdrawal may still be used to carry out this study.
- Female participants only: If I become pregnant while on the study, follow up information on the outcome of my pregnancy can be collected, if needed.

_____

Printed Name of Participant

_____ _____

Signature/mark of Participant | Date and Time
(Participant/witness must write date and time)

_____

*Printed Name of Person Conducting Consent
(If other than investigator)

_____ _____

*Signature of Person Conducting Consent
(If other than investigator) | Date and Time
(Person conducting consent must write date and time)

I, _____ (Insert name of investigator)

hereby confirm that the above participant has been fully informed about the nature, conduct and risks of the above study.

Signature of Investigator	Date and Time (Investigator must write date and time)

By signing below, I verify that the above participant gave verbal informed consent. The participant has been informed about the risks and the benefits of the study, understands such risks and benefits and can agree to participation, without coercion, undue influence or inappropriate incentives.

*Printed Name of Witness	

*Signature of Witness * Where applicable	Date and Time (Witness must write date and time)