

National Research Ethics Service

ANNUAL PROGRESS REPORT TO MAIN RESEARCH ETHICS COMMITTEE (For all studies except clinical trials of investigational medicinal products)

To be completed in typescript and submitted to the main REC by the Chief Investigator. For questions with Yes/No options please indicate answer in bold type.

1. Details of Chief Investigator

Name:	Professor Deborah Symmons and Dr Kimme Hyrich
Address:	Arthritis Research UK Centre for Epidemiology
	Institute of Inflammation and Repair
	The University of Manchester
	Stopford Building
	Oxford Road
	Manchester
	M13 9PT
Telephone:	0161 275 5041
Email:	Deborah.symmons@manchester.ac.uk
	Kimme.hyrich@manchester.ac.uk
Fax:	0161 275 1640

2. Details of study

Full title of study:	Prospective Observational Study of the long term hazards of anti- TNF therapy in rheumatoid arthritis	
Name of main REC:	North West MREC	
REC reference number:	MREC 00/8/53	
Date of favourable ethical opinion:	1 st December 2000	
Sponsor:	The University of Manchester	

3. Commencement and termination dates

Has the study started?	<u>Yes</u> / No		
If yes, what was the actual start date?	1 st October 2001		
If no, what are the reasons for the study not commencing?	21/0		
What is the expected start date?	N/A		
Has the study finished?	Yes / No		
	If yes, complete and submit "Declaration of end of study"		
	form, available at <u>www.nres.npsa.nhs.uk</u>		

If no, what is the expected completion date? If you expect the study to overrun the planned completion date this should be notified to the main REC for information.	Four cohorts are currently open to recruitment: i) participants starting tocilizumab ii) participants starting certolizumab iii) Anti-TNF comparison cohort iv) participants starting a biosimilar All participants recruited to these cohorts will be
If you do not expect the study to be completed, give reason(s)	followed up for at least 5 years. N/A

4. Site information

Is this a study requiring site-specific assessment (SSA) and ethical approval of each site and local Principal Investigator?	Yes / <u>No</u>
If yes, how many UK research sites have been recruited	Proposed in original application: Actual number recruited to date:
Has the Site Specific Information Form (SSIF)* been submitted to the local REC for each local Principal Investigator?	Yes / No / <u>Not applicable</u>
*or Part C or Annex D of the former MREC application form if submitted prior to 1 March 2004	S. Delielle of steady
Is this study "SSA-exempt"? *	Yes / No This is a national study; all rheumatology
If yes, how many UK sites are currently involved in facilitating this research?	departments prescribing biologic therapy in the UK are participating. Local investigators are only required to inform LREC/R&D of study
* or was previously designated as a "no local investigator" or "no local researcher" study	participation – see original MREC approval (dated 01/12/2000)
Do you plan to increase the total number of UK sites proposed for the study?	Yes / No
If yes, how many sites do you plan to recruit?	Only if new rheumatologists treat patients with biologic therapy.
In the case of studies requiring SSA, all sites must be approved by the main REC as part of the favourable opinion.	Hae the study staned? If yes, what was the actual stan dete?

5. Recruitment of participants

*Number of participants recruited:	Proposed in original application:
	16,000 biologic patients , 1,100 rituximab patients,
	1050 tocilizumab patients, 2,000 certolizumab
	patients, 2,000 biosimilar patients and 4,000 patients
	to the anti-TNF comparison cohort. In addition to
	this, there was a recruitment target of 4,000 patients
	in the non-biologic DMARD comparison cohort.
	Actual number recruited to date:
	- 15,014 patients to the original biologic cohorts
	(recruitment now closed)
	- 1,500 rituximab patients (recruitment now closed)
	- 3,775 DMARD comparison patients (recruitment
	now closed)
	- 1113 certolizumab patients
	- 999 tocilizumab patients
The second secon	- 1492 anti-TNF comparison cohort patients
A service in a service of the contribute and the	- 16 biosimilar patients
*Number of participants completing trial:	Proposed in original application:
maignos Arti une antige este di seastana (ii)	All participants are being followed-up until at least
(UCUP-67 (COEE (REAL) PIORES	2018.
*Number of withdrawals due to:	
(a) lack of efficacy	0 (n/a)
(b) adverse events	0 (n/a)
(c) self-withdrawal	387
(d) non-compliance	0 (n/a)
Total number of withdrawals:	387
Have there been any serious difficulties in recruiting	John no sampai lancha yas anni safi
participants?	Yes / <u>No</u>
If Yes, give details:	
lleg all litrog dow a gnigolovsh ozis are alw	N/A
Do you plan to increase the planned recruitment of	
participants into the study?	Yes / No (unless new targeted therapies for RA
the oneinal saper based system. Any require	are licensed in the UK in the future)
Any increase in planned recruitment should be notified to the main	
REC as a substantial amendment for ethical review.	

^{*} In the case of international trials, please provide separate figures for UK and non-UK participants.

6. Safety of participants

Have there been any <i>related</i> and <i>unexpected</i> Serious Adverse Events (SAEs) in this study?	Yes / No – <u>Not Applicable</u>
	This is an observational cohort study to monitor long term safety of new therapies for rheumatoid arthritis. It is therefore the responsibility of consultant/nurse to assess causality and report to the regulatory authorities as necessary.
Have these SAEs been notified to the Committee?	

If no, please submit details with this report and give reasons	Yes / No /Not applicable
for late notification.	
Have any concerns arisen about the safety of participants in this study?	Yes / <u>No</u>
If yes, give details and say how the concerns have been addressed.	

7. Amendments

Have any substantial amendments been made to the trial during the year?	<u>Yes</u> / No
If yes, please give the date and amendment number for each substantial amendment made	Date approved: Amendment 20 approved 16/03/2015
239-todissimate patients 2492 anti-1395 cont. action cohort patients 16 bioshnika patients	Reason: This amendment covers (i) the addition of biosimilar drugs to the BSRBR-RA study
High de pervetos sue pervetos de la	(ii) increase in size of the anti-TNF comparison cohort (from 2000 to 4000)

8. Other issues

Are there any other developments in the wish to report to the Committee?	the study that you	<u>Yes</u> / No	
wish to report to the Committee? Are there any ethical issues on which further advice is required?		We would like to make the committee aware that we are currently developing the study web portal clinicians/nurses to enter baseline and follow-up data. This will run alongside the original paper bas system until fully operational. This amendment was approved by the committee in 2010.	
AM		We are also developing a web portal for patients to	
Yes / No funies; new proceed therapies are ileeased in the UK in the future	olument of beautos	better communicate news about the study and also to enter follow up data. This will also run alongside the original paper based system. Any required changes will be presented to the committee as a	
	AMES)	substantial amendment for approval prior to implementation.	
genes for UK seld non-UK penicipants	A Stateggy Glavou.	스 보고 있는데 그는 사람들은 10년 1일 전에 10년 10년 10년 11년 11년 12년 12년 12년 12년 12년 12년 12년 12	
gurea for UK and non-UK penicipania	a dategas aswau.	implementation. Yes / No If yes to either, please attach separate statement	
gures for UK aild nor-(VK participants Yes rivo - <u>Nos Agalicabis</u>	a stateges enwous	implementation. Yes / No	
This is an observational cohort study to more tone to me therapies for mental activities. It is therefore the responsibility of consultant/wave to assess causality and raise consultant/wave to assess causality and raise	a bissequa esacu.	implementation. Yes / No If yes to either, please attach separate statement	

9. Declaration

Signature of Chief Investigator:	Dymnam.
Print name:	DPM SYMMONS.
Date:	3/12/15