



UK CLL Trials
Biobank

Patient Information Sheet (version 5.1 22nd April 2016)

Giving Samples for the UK CLL Trials Biobank

About the UK CLL Trials Biobank

The Biobank has been set up primarily to collect samples from patients with chronic lymphocytic leukaemia (CLL) entering into clinical trials. Researchers throughout the UK investigating CLL will apply to use the stored material for a range of research projects in order to find new ways to diagnose, treat and prevent CLL. Research Tissue Banks are the best way for researchers to study patient samples in the laboratory. Your doctor has agreed to help the UK CLL Trials Biobank collect samples from patients entering into trials.

What are we asking you to do?

If you are entering a clinical trial, we are asking you to give blood and saliva for research. If you are having liquid bone marrow taken for analysis as part of the trial, we will ask for a little bit extra to be taken for research.

If you have previously given material for a test as part of the trial, we will ask that any surplus material left over from the test may be transferred to the biobank and used for research.

Research with human tissues and blood can help to find answers about the causes of CLL, how to prevent it and how to treat it. We would like to use your samples and data for such research.

What will happen if you say yes?

The first thing you will need to do is give your written permission (consent) by signing the form attached to this leaflet. Keep this information sheet to remind you of what you were asked to do.

Once you have agreed to take part, the following will happen if you are to begin a trial:



- Whilst attending the hospital, you will normally give blood samples for tests to be carried out. Either at this time or at a different time we would like to ask you to allow the staff to take additional samples so that they can be used for research. This will be just like any other blood test and should not affect you. We will ask for 50 mls of blood; 10mls for a clotted sample and 40mls unclotted blood. (In total this will be just over 3 tablespoons of blood)
- And you will also be required to spit into a collection bottle provided. We require 2mls, so this may require spitting 10-15 times into the bottle.
- If you are having liquid bone marrow taken for testing as part of the trial, we will ask for an extra 5ml (1 teaspoon) to be taken for the Biobank. This will not involve any additional biopsy procedures.

If you agree to take part, you will be giving samples and information that will be treated as gifts that could help research to benefit those affected by CLL in the future.

What will happen if I say no?

You are free to say no- the choice is yours. Your decision will NOT affect the standard or type of care you will receive from the hospital or doctor, now or in the future. If you say no, we will not take any samples from you nor will we collect any information. We may ask you to help us understand why you said no – but you do not have to tell us.

What happens if you change your mind?

You can change your mind at any time by contacting your original hospital or the UK CLL Trials Biobank directly to let us know, by email or letter. You do not need to tell us why. Our contact details are given at the end of this sheet.

If you tell us that you have changed your mind, all samples in storage will be destroyed in the way human tissues and blood from hospitals are normally destroyed. Similarly, the information we store about you will be deleted so that it cannot be used again.

If you change your mind after a long time the samples may have already been used. The UK CLL Trials Biobank cannot recall samples or information from researchers once they have been used. If, by then, your gift has already helped create new knowledge, that new information cannot be undiscovered and will contribute to medical understanding. However, UK CLL Trials Biobank will request the disposal of any samples that remain so that your gift will not be used in any further research.



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What are the benefits to you?

It is unlikely that you will personally benefit from the research as it usually takes many years for research to produce advances in the way CLL is diagnosed, treated or prevented. The results of research will NOT be put in your health records or told to you, your relatives or your doctors because the researchers will not know who you are and your details are kept secret from them. **The only exception to these arrangements is if you agree to take part in the Genomics England 100,000 genomes project. This study is entirely optional and is explained on pages 5-8 of this document.**

You can benefit from the knowledge that you are personally helping research to find out what causes CLL, how to prevent it or how to treat it. The test and treatments being used for you were developed with the help of patients who took part in research years ago. Research might make faster progress as more human samples are studied. Also, by using human samples there may be less need to study laboratory animals.

What are the risks to you?

There are NO significant health risks to donating samples for research purposes to The UK CLL Trials Biobank. There are no more risks to giving samples for research than there are for being a blood donor or giving any routine sample for testing.

Your hospital, medical team, the UK CLL Trials Biobank and the Trials Unit in charge of the trial you have entered will take every security precaution to prevent researchers from obtaining any information that identifies who you are. The only people who will know your identity are the hospital staff and a few trained staff dealing with patient records in the UK CLL Trials Biobank who are bound by a professional duty to protect your privacy. Researchers will NOT be provided with any personal information such as your name, address or phone number. The only information that they will be given for their work relates to your disease and treatment only and will NOT be directly linked to your identity. The link to your identity will be securely stored by the UK CLL Trials Biobank so that if a researcher gets approval to do a follow up study, the UK CLL Trials Biobank may be able to obtain further information about you and your progress. Researchers will, therefore, NOT be able to contact you directly about their research in future. **The only exception to these arrangements is if you agree to take part in the Genomics England 100,000 genomes project. This study is entirely optional and is explained on pages 5-8 of this document.**



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When the UK CLL Trials Biobank provides samples to researchers they are obliged to only use the samples for the research they said they would do. Researchers will be bound by a strict agreement to ensure this.

Other things you should consider?

The samples and information you have gifted will be made available to researchers who may be in the UK or overseas. They may work in universities, hospitals or in private/commercial companies that do medical research. You will not receive any personal financial reward for making your gift.

Research projects will require laboratory data generated from your donated samples to be linked to clinical data collected through the clinical trial you are participating in. For some projects this will involve the researcher passing the laboratory data on to the Clinical Trials Unit, whereas for other projects, clinical trial data will be passed on to the researcher. In addition, researchers will be asked to upload any data generated from your samples onto a master database. This will ensure that data generated by different researchers can be linked together to maximise the research value of your donated samples.

Sometimes samples are used for genetic research (about diseases that might be passed on in families, or changes that have occurred in the genetic code of diseased cells) but the results of this genetic research will NOT be fed back to you or your doctors. **The only exception to these arrangements is if you agree to take part in the Genomics England 100,000 genomes project. This study is entirely optional and is explained on pages 5-8 of this document.** The UK CLL Trials Biobank will NOT supply samples for research into reproductive cloning.

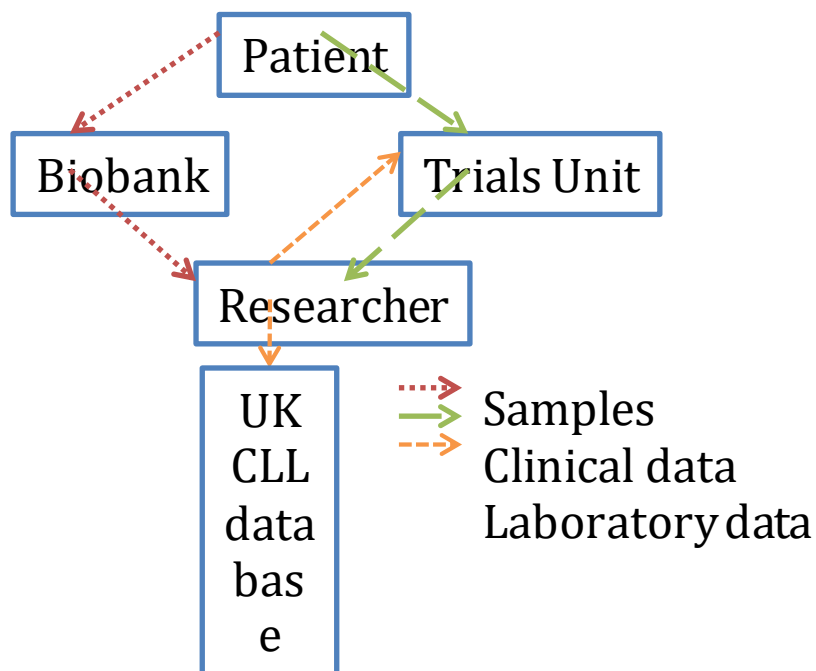
Your donation will be used only for medical research and will not be provided for any other purpose. This research may not always be directly linked to CLL but will always be relevant to understanding how the body works, which may eventually help understanding CLL and other disease.

The UK CLL Trials Biobank may ask researchers for fees to cover some of the costs it incurs. This is known as “cost recovery” as it is entirely for reinvestment to ensure the highest standards of safety and professionalism and to enable further medical research. The samples you have gifted will never be sold for profit.

If you have any questions or concerns about the donation of samples and information or the possible uses of them, please ask the person discussing donation with you and seeking consent.



Overview of how samples and data are handled



How to contact us

UK CLL Trials Biobank Manager: Dr Melanie Oates

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Liverpool,
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Where can I obtain further information?

General information about CLL can be obtained from the following websites:

- <http://www.ukcllforum.org/>
- <http://www.leukaemialymphomaresearch.org.uk/>
- <http://www.clisupport.org.uk/>
- <http://www.leukaemiacare.org.uk/>
- <http://clltopics.org/>

Sub-study: 100,000 Genomes Project – Cancer Sequencing Participant information



We would like to invite you to take part in a study that will analyse normal and tumour genomes, and will contribute to Genomics England's 100,000 Genomes Project.

It is completely up to you to decide whether you wish to join. Your decision will not affect your care in any way. Before you decide, it is important for you to understand what the study is about and what your participation would involve.

Please take time to read this sheet carefully. Talk to others about the study if you wish. Please ask us if there is anything that is not clear or if you would like more information.

Background



DNA is in our cells and contains the 'instructions' that control our growth, what we look like and how our bodies work. Our DNA and the information it contains is called our genetic code. A genome is an individual's full genetic code, and the process of understanding what this means is called genomics. Reading genetic code requires a technique called sequencing, and 'whole genome sequencing' allows us to read all the DNA in your cells. When someone has developed cancer, parts of the genome in the cancer cells are changed. The project will look at all of the genetic code in both possible cancer cells and normal cells.

What is the 100,000 Genomes Project?

The 100,000 Genomes Project is being carried out by Genomics England, a company wholly owned by the Department of Health. The project aims to sequence a total of 100,000 whole genomes from NHS patients and to develop a resource for researchers. The aim of the research will be to help doctors' understanding of health and disease, leading to better diagnosis and personalised care for patients.

Why am I being invited?

The focus of this part of the project is to understand changes in the genome that happen in cancer. You are being invited because you are undergoing treatment for CLL.

Do I have to take part?

No. It is completely up to you up to you to decide whether or not you wish to take part. If you decide not to participate, this will not affect the healthcare you receive in any way. You can take as long as you like to decide.

What would happen to me if I take part?

If you decide to take part:

- We will ask you to sign a consent form specific to this project.
- Some of your samples that are stored in the UK CLL Trials Biobank will be sent to Genomics England for DNA sequencing (see below)
- Your identity will be provided to Genomics England in anonymised form so they can link the sequencing data with clinical data collected as part of the trial you are participating in.
- Your unique NHS number would be provided to Genomics England so they can link the sequencing data with clinical data collected routinely through the NHS.
- Any results generated by Genomics England that might influence decisions about your CLL treatment will be fed back to your hospital consultant. Please note that we do not know how long it might take to feed back this information.



- You will allow Genomics England to contact you about future studies. Agreeing to be contacted does not oblige you to take part in any future research.

What would happen to any samples used for this project?

A complete set of genetic instructions is present in most of your cells; this is called DNA. We will extract DNA from your samples and read the genome of your normal cells, and the genome of any cancer cells that may be present. The genome (DNA sequence) will be analysed and stored for research. This information may be used in research aimed at understanding the genetic changes that contribute to cancer development. It might also tell us more about why some people get side-effects from treatment and why people respond differently to cancer treatment.

What would happen to any information I provide, and how will it be protected?

Personal information accessed by Genomics England (surname, date of birth, postcode and NHS number) will be held separately from your samples and clinical information, and only used to contact you and to retrieve and match up health information in the future.

All the information provided by you or retrieved from your medical notes or other health records as a part of this study, as well as the result of tests performed on your DNA, will be held on a secure research database within the NHS. (Since the Genomics England data storage facility is still under construction, sequencing data will be held on a secure database at the University of Oxford as a temporary measure).

Your samples and DNA will be assigned a code and your data will also be identified only by this number. However, your DNA is unique to you so it can never be completely anonymous. What this may mean is discussed in the next section.

In order to maximise the value of your genetic information, Genomics England would like to update other relevant details, such as diagnosis, factors that may affect disease, and information you have given about your lifestyle and family history. Genomics England may ask your medical care team for regular follow-up reports. This information will help Genomics England to understand the meaning of your laboratory findings.

Researchers will apply to be able to access and analyse anonymised versions of the data we collect within a secure site managed by Genomics England, but they will not be allowed to take the data away. Because they will do their work within a secure setting, Genomics England will be able to track their research questions and use of the data.

Exceptions to the data protection described above are

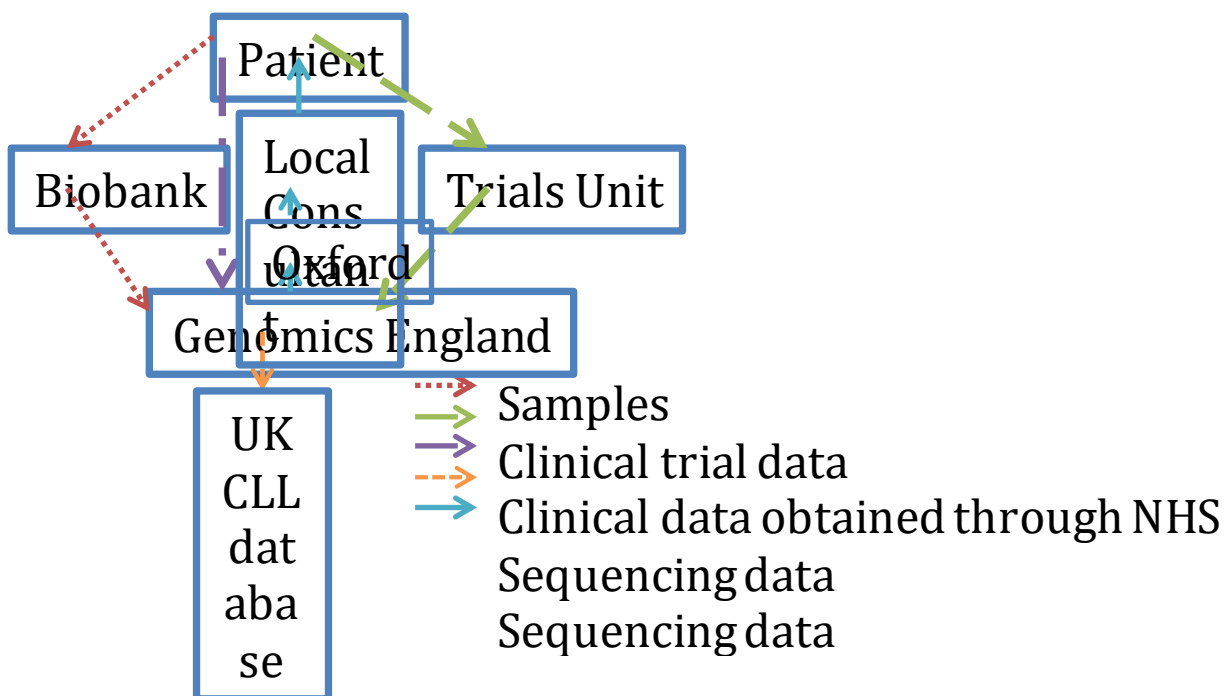
- Your NHS healthcare team, who would need to see your name together with results from genetic tests in case this might inform your care.



- Authorised representatives of Genomics England may ask for access to medical records, including your personal information, in order for them to check that the study is being conducted properly.

Both your healthcare team and the research monitors have a duty to maintain the confidentiality of your information.

Overview of how samples and data will be handled



What are the possible risks or disadvantages of taking part?

Information: The previous section described the measures we will take to safeguard your information and protect your privacy. Because your DNA is unique to you, it is in theory possible to link it to your identity. To do this may require another sample known to be your DNA, and specialised skills and equipment. To attempt deliberately to identify you in this way is against the law and contrary to good research practice. Anyone who misused data in this way, or their institution, could face criminal charges, substantial fines, and loss of research funding. If the law was broken and identification made, other parties would not be able to act on the information. Insurers, for instance, would not be able to use this information to deny insurance cover.



We cannot always predict the results of research, so as technology advances there may be new ways of linking information back to you that we cannot foresee now, and new privacy risks that we cannot predict. Also, while your particular genetic code is yours alone, you share parts of it with family members, who could be identified as being related to you.

What are the possible benefits of taking part?

Any clinically relevant results that will help your doctors to make decisions about your treatment, such as what drug might be most effective, will be fed back to them. They will explain and discuss the results with you. However, we cannot yet guarantee how long it will take to get these results, and there may be no results relevant for your treatment.

The research part of this study involves testing large numbers of samples from many different people to try to identify factors that influence disease. Findings often need many years of further research to prove whether and how they are important. You will be contributing to knowledge that may make it possible to improve care for patients in the future.

What if I change my mind?

If you agree to participate, you can still withdraw at any time and without having to give a reason. Please get in touch with the contact at the end of the leaflet.

Please note: Samples and data that have already been used to answer research questions cannot be taken out of that research.

Will I learn anything about my genome?

As already mentioned, information that might make a difference for decisions about the management of your current condition will be fed back to your clinician to discuss with you. We cannot guarantee how long it will take to issue these clinical reports; however, it might be several weeks or months.

Other information analysed or revealed by researchers will not be returned to you, even if there is a possibility that it might have relevance for your health, or that of your family. This is because samples and data used in research will not usually be processed and analysed in a way that would reliably inform medical decisions. What the research results show may be of uncertain or unknown significance for your health at the time that the research is done, so results might not be fed back to you even if they later prove to be linked to your current condition.

What if there is a problem?

If you have a concern about any aspect of this study, please speak to the study doctor or contact at the end of this leaflet. We'll do our best to answer questions and deal with concerns.



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What happens to the results of this study?

One of the aims of this study is to test the procedures and design of the 100,000 genomes project, and to do initial genetic research. Findings will be reported at conferences and in academic journals.

The other aim of the study is to contribute DNA sequences and clinical information into the national research database of the 100,000 genomes project. This database of genomes and related clinical data will have its own ethical approval and be under the control of Genomics England. They will allow access to the data, on a governed and audited basis, to researchers and organisations whose work may lead to new scientific discoveries and medical insights that can bring benefit to patients.

If more income is generated from data access than is spent on acquiring or managing the resource, that money will go back to the Treasury.

Who is organising and funding the research?

Genomics England is a company wholly owned by the Department of Health. It is providing the investment and leadership for the project.

Who has reviewed the study?

This study has been reviewed and given a favourable opinion by North West (Haydock) Research Ethics Committee.

Who can I contact for further information?

Please contact Dr Melanie Oates
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Thank you for reading this sheet and considering whether you would be willing to participate.