

## **Patient Information Sheet**

### **A Randomised Phase III Study comparing weekly paclitaxel with 3 weekly paclitaxel for the treatment of patients with metastatic breast cancer. ([www.taxol-uk.com](http://www.taxol-uk.com))**

You are being invited to take part in a research study. Before you decide it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully and discuss it with others if you wish. Ask us if there is anything that is not clear or if you would like more information. Take time to decide whether or not you wish to take part. Thank you for reading this.

#### **What is the purpose of the study?**

Paclitaxel (Taxol<sup>TM</sup>) is known to be potentially effective in patients with metastatic breast cancer who have previously had treatment with an anthracycline (such as doxorubicin or epirubicin). Usually paclitaxel is given as a 3 hourly intravenous infusion once every 3 weeks. Recently, studies have been carried out looking at paclitaxel given as an hour long infusion on a weekly basis.

In this study we would like to compare these two treatment schedules, looking at whether there is any difference in effectiveness and side-effects associated with each schedule. Patients will be randomly allocated to receive their paclitaxel on a weekly basis or once every 3 weeks. There is a 50-50 chance of receiving either of the two schedules.

We would also like to find out more about paclitaxel in patients with breast cancer, which may help us to determine whether some patients are more likely than others to respond to the drug and/or predict how tolerable the side-effects will be. This is known as pharmacogenomic analysis and would involve having 1 extra blood sample (10 mls) taken and submitting this for the analysis.

If you give approval for this, DNA (De-oxy Ribonucleic Acid, the genetic code of the cell), will be extracted from the extra blood sample and will be stored frozen either at your hospital or in the Northern Institute for Cancer Research in the University of Newcastle upon Tyne until the end of the study. The DNA will be used to study the genes which determine how your body handles injected chemotherapy drugs. The researchers involved in this study will be given access to some information about your health and diagnosis but they will not be given any personal information that will allow them to identify you. This process is known as link anonymisation. Similarly any results from the research project will not be traceable back to you.

### **Why have I been chosen?**

You are being asked to take part in this trial because your cancer has either come back after treatment with an anthracycline, the class of anticancer drug most commonly used in the initial treatment of breast cancer, or is no longer responding to current treatment with this type of drug. In these cases, treatment with a taxane (such as paclitaxel) would be the next option. We hope to recruit 600 patients from several hospitals in the UK.

### **Do I have to take part?**

It is up to you to decide whether or not to take part. If you do decide to take part you will be given this information sheet to keep and be asked to sign a consent form. You are free to withdraw from the study at any time without having to give a reason. A decision to withdraw or a decision not to take part will not affect the standard of care you receive.

### **What will happen to me if I take part?**

In order to make a fair comparison between weekly and 3 weekly paclitaxel, you will be randomly selected (randomised) to receive either a weekly infusion of paclitaxel or a 3 weekly infusion. This means that you will be assigned to a treatment schedule by chance, this is done using a computer programme. You will have an equal chance of receiving either schedule.

If your tumour has already been tested for over-expression of HER2 and is positive you may also receive Trastuzumab (Herceptin<sup>TM</sup>) if your doctor thinks this is appropriate.

Before this is done, you will have several screening investigations, which will help us to decide whether you are eligible for the trial. These will include:

- A physical examination by a doctor who will also take a medical history.
- Height, weight, blood pressure, pulse and temperature.
- A CT scan and/or chest x-ray.
- Blood tests
- A pregnancy test if appropriate

We will also ask you to complete a Quality of Life Questionnaire. This will not influence whether you are able to take part in the trial, but we need to collect this information before trial treatment starts.

If these tests are satisfactory you will be randomised (your treatment will be randomly allocated) and you will be told which treatment schedule you are going to receive.

You will have routine blood tests and a physical examination prior to each dose of chemotherapy. CT scans will be repeated every 6 weeks to assess whether you are

## NORTHERN CENTRE FOR CANCER TREATMENT

benefiting from the treatment. If you are receiving the weekly infusion of paclitaxel you will have potentially up to 12 weeks of chemotherapy. If you are randomised to have paclitaxel every 3 weeks you will have potentially up to 6 cycles (18 weeks).

Quality of Life Questionnaires will be repeated 9, 18, 27 and 52 weeks after randomisation. Quality of Life Questionnaires will be posted to your home to avoid any possible bias caused by filling these out when you are visiting the hospital. We will need to give your name and address to the researchers conducting the quality of life studies at the Scottish Cancer Therapy Network and request your permission to do this.

### **What do I have to do?**

There are no specific restrictions on what you can eat, drink or do while you are on treatment. You should let us know of any medication you are taking, including 'over the counter' at chemists or supermarkets.

### **What are the alternatives for treatment?**

Your doctor will have discussed the alternative treatments with you prior to talking to you about this trial.

### **What are the side effects?**

As with all chemotherapy there are side effects associated with paclitaxel:

- A fall in the white blood cell count. This will make you more prone to infection. Any signs of fever, persistent colds or generally feeling unwell should be reported to the nurse or doctor caring for you.
- A fall in the red blood cell count. This may make you feel tired or run-down. Should this become a problem you may need to have a blood transfusion.
- Sore mouth occasionally. This can be treated if it occurs.
- Nausea, vomiting and diarrhoea is not common and if it occurs is usually mild.
- Slowing of the heart rate occasionally, but this does not usually cause the patient a problem. We will be checking your pulse and blood pressure regularly for the first hour of your infusion.
- Occasional numbness of fingers and toes, this usually gets better after treatment has stopped.
- You may notice some changes in your finger and/or toe nails. If this occurs they should get better once treatment has been completed.
- Some joint, muscle or bone pain which does not last long and can usually be controlled with paracetamol.
- Complete loss of all body hair which usually grows back once treatment stops. A wig will be provided.
- Some patients have complained of headaches, altered taste, tiredness and pain at the site of the injection.

## NORTHERN CENTRE FOR CANCER TREATMENT

- Some patients have developed an allergy to paclitaxel. This usually causes low blood pressure, breathlessness and/or an itchy skin rash. In order to help prevent this allergic reaction a "premedication" will be given before you have paclitaxel. This will be given intravenously 30 minutes prior to chemotherapy and consists of dexamethasone, cimetidine (or ranitidine) and piriton. It is very rare for a patient to develop an allergic reaction once this premedication has been given.

If you are to receive Herceptin the side effects are most frequently seen on the first infusion and are as follows:

- Fever and chills
- Pain, weakness and nausea (these are not often experienced)
- Allergic reactions such as shortness of breath, wheezing, a fast heart rate and breathing difficulties have been reported but are not common.
- Some patients have shown signs of heart failure which has led to treatment being stopped.

### **What are the possible disadvantages and risks of taking part?**

The effects of paclitaxel on the unborn child are unknown. You must use effective contraceptive precautions while you are receiving chemotherapy.

### **What are the possible benefits of taking part?**

There may or may not be any direct medical benefits to you from taking part in this study. However, paclitaxel is a standard form of chemotherapy for the treatment of advanced breast cancer. The information gained from this study may help optimise treatment schedule for future breast cancer patients.

The results of the research using DNA from the patients in this trial may identify genetic factors important in the type of treatment you have received. Information from these studies may help to improve treatment for future people with breast cancer and possibly lead to improved strategies for tailoring treatment to individual patients.

### **What if new information becomes available?**

If any new information becomes available about the treatment whilst you are on study, your doctor will tell you about it and discuss whether you want to continue. If you decide to withdraw from the study your doctor will make arrangements for your care to continue. If you decide to continue in the study you will be asked to sign an updated consent form.

Also, on receiving new information your doctor might consider it to be in your best interests to withdraw you from the study. This will be discussed with you and alternative treatments will be arranged.

**What will happen when the research study stops?**

The treatment planned in this study is of a fixed duration, and will normally stop after the course specified in the trial protocol. However, paclitaxel is licensed for use in patients with breast cancer who are not in clinical trials. Therefore, once you have completed the trial, or if you have to withdraw, your doctor may elect to continue treatment with paclitaxel or an alternative agent if they feel this is appropriate and in your best interests.

In the unlikely event that it is decided to end the study early then your doctor will tell you the reason for this and will discuss what other treatments are available.

**What if something goes wrong?**

If you are harmed by taking part in this research project, there are no special compensation arrangements. If you are harmed due to someone's negligence, then you may have grounds for a legal action but you may have to pay for it. Regardless of this, if you wish to complain, or have any concerns about any aspect of the way you have been approached or treated during the course of this study, the normal National Health Service complaints mechanisms should be available to you.

**Will my taking part in this study be kept confidential?**

If you consent to take part in this study any of your medical records may be inspected by authorised people from the Scottish Cancer Therapy Network, part of the NHS in Scotland. They may also be looked at by people from the regulatory authorities to check that the study is being carried out correctly. Your name, however, will not be disclosed outside the hospital. Your GP is routinely contacted about any treatment you receive at the hospital and with your permission they will be informed of your participation and progress in this study.

**What will happen to the results of this study?**

The results of the study will be available after it finishes and will be published in a medical journal. You will not be identified in any report or publication.

**Who is organising and funding the research?**

This study is being organised by the Anglo-Celtic Co-operative Oncology Group. The use of paclitaxel is now a standard treatment for advanced breast cancer following its recommendation by the National Institute for Clinical Excellence (NICE). Your doctor will not receive any extra payment for your taking part in this study, although there will be a contribution towards the additional expense to the Hospital associated with your participation.

**Who has reviewed the study?**

This study was reviewed by the Northern and Yorkshire Multi Research Ethics Committee and the Local Research Ethics Committee for Newcastle and North Tyneside.

**Contacts for further information**

If you require any further information or have any concerns while taking part in the study please contact a member of Dr Verrill's medical/nursing team at:

Department of Medical Oncology  
Northern Centre for Cancer Treatment  
Newcastle General Hospital  
Westgate Road  
Newcastle upon Tyne  
NE4 6BE

On weekdays (8.30am-5.30pm), telephone 0191-219-4268 to speak to one of the Research Nurses. At other times please telephone switchboard (0191-219-4200) and ask for the doctor on call for NCCT.

**PATIENT CONSENT FORM**

---

Will Weekly Win for Taxol in the UK: Comparison of Outcomes in Metastatic and locally advanced breast cancer with weekly vs. 3 weekly administration of paclitaxel  
(www.taxol-uk.com)

**A randomised 2-arm, prospective, multi-centre, open-label Phase III trial comparing the activity and safety of a weekly versus a 3 weekly Paclitaxel treatment schedule in patients with advanced or metastatic breast cancer**

- 1) I confirm that I have read and understand the information sheet dated 5 June 2002 for the above study and have received satisfactory answers to my questions.
- 2) I understand that my participation is voluntary and that I am free to withdraw at any time without my medical care or legal rights being affected.
- 3) I am willing to allow access to my medical records but understand that strict confidentiality will be maintained. The purpose of this access is to check that the study is being carried out correctly.
- 4) I am willing to allow anonymised information about me to be collected, analysed, reported, and transferred to others within and outside Europe for healthcare and/or medical research purposes.
- 5) I am willing to allow the use of DNA from blood samples collected in the course of this study to be used to study factors affecting drug metabolism. This data will not allow me to be identified. All of these samples will be destroyed at the end of the study.
- 6) I agree that my GP, or any other doctor treating me, will be notified of my participation in this study.
- 7) I agree that my name and address can be released to researchers for the sole purpose of sending quality of life questionnaires.
- 8) I agree to take part in the above study.

\_\_\_\_\_  
Name of Patient

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name of Doctor Obtaining Consent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name of Witness