Amendment Tool

v1.6 06 December 2021

For office use

QC: No

Short project title*:	BADBIR							
IRAS project ID* (or REC reference if no IRAS project ID is available):	32990							
Sponsor amendment reference number*:	Substantial Amendm	ient 13						
Sponsor amendment date* (enter as DD/MM/YY):	01 August 2022							
Briefly summarise in lay language the main changes proposed in this amendment. Explain the purpose of the changes and their significance for the study. If the amendment significantly alters the research design or methodology, or could otherwise affect the scientific value of the study, supporting scientific information should be given (or enclosed separately). Indicate whether or not additional scientific critique has been obtained (note: this field will adapt to the amount of text entered)*:	 Dermatologists Biolo Extension to the du includes collection of only. After this, clinic This amendment alte participants after yea Addition of two new Psoriasis diagnosis (Change to Biologic 	anges to protocol have been made to accommodate changes in the British Assoc matologists Biologics & Immunomodulators Register (BADBIR): dension to the duration study participants complete questionnaires. Existing prot udes collection of patient-report outcome measures from patients up to year 3 of <i>y</i> . After this, clinical follow-up continues but data not collected from participants di s amendment alters schedule for a once annual collection of questionnaire data fi ticipants after year 3 of participation. ddition of two new disease severity measures for patients with Generalised Pustu briasis diagnosis (GPPGA & GPPASI) hange to Biologic Exposed Cohort eligibility criteria to allow entry of biologic-exper- ients commencing new Small Molecule therapies						
				Specific stu	ıdy			
Project type (select):				Research tis Research da				
Has the study been reviewed by a UKECA-recognised Res Committee (REC) prior to this amendment?:	search Ethics	Y	es		No			
Committee (REC) prior to this amendment /:								
What type of LIKECA-recognised Research Ethics Commit	tee (REC) review			NHS/HSC R	EC			
What type of UKECA-recognised Research Ethics Commit is applicable? (select):	tee (REC) review				EC efence (MoDREC			
	esearch Ethics	Y		Ministry of D				
is applicable? (select): Is all or part of this amendment being resubmitted to the Re Committee (REC) as a modified amendment (i.e. a substa	esearch Ethics antial	Y England Yes	'es Wales No	Ministry of D	efence (MoDREC			
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Section 2: Summary of change(s)

Please note: Each change being made as part of the amendment must be entered separately. For example, if an amendment to a clinical trial of an investigational medicinal product (CTIMP) involves an update to the Investigator's Brochure (IB), affecting the Reference Safety Information (RSI) and so the information documents to be given to participants, these should be entered into the Amendment Tool as three separate changes. A list of all possible changes is available on the "Glossary of Amendment Options" tab. To add another change, click the "Add another change" box.

	Change 1								
Area of change (select)*:	Study Documents								
Specific change (select - only available when area of change is selected first)*:	Protocol - Non-substantial changes (e.g. not affecting safety or the scientific value of the trial)								
Further information (free text - note that this field will adapt to the amount of text entered):	Sections 6 and 8.7 o at study follow-ups. I the study (year 3). Th questionnaires once The rationale for this later follow-up years f now has many thous switching between di This extension of que on a more psoriasis t It is not anticipated th are able to enter que	n prior Protocol, pa his has been amer annually after year change is to captu for each participan ands of patients in ferent psoriasis the estionnaire collection reatments providin is will have signific	atient-completed d ided and participa 3 (FUP7+) until st re more patient-re t. With successful long-term follow-u erapies following t in will provide sign g the study with m ant impact on part	ata was not collec nts will be request udy end. ported severity an recruitment since p. In clinic, many heir initial registrati ificantly more patie lore comprehensiv icipating research	ted after FUP6 of ed to complete d outcomes data ir 2007, BADBIR patients are ion into BADBIR. ent-reported data ve data for analysis sites. Participants				
Applicability:		England	Wales	Scotland	Northern Ireland				
Where are the participating NHS/HSC organisations local by this change?*:	ted that will be affected	Yes	Yes	Yes	Yes				
Will all participating NHS/HSC organisations be affected b some? (please note that this answer may affect the cate change):		ļ	NI .	S	ome				
				Bomovo ollu	changes below				

Remove all changes below

	Change 2							
Area of change (select)*:	Study Documents							
Specific change (select - only available when area of change is selected first)*:	Protocol - Non-substantial changes (e.g. not affecting safety or the scientific value of the trial)							
Further information (free text - note that this field will adapt to the amount of text entered):	The core physician-a Psoriasis Area and S measures are used e chronic plaque psoria The BADBIR protoco baseline. Patients wi accurately measure v more appropriate: Ge Generalised Pustular the data collection at	everity Index (PAS xtensively in derm isis diagnosis. I allows registratio th a diagnosis of C vith PASI and PG/ meralised Pustula Psoriasis Area ar	SI) and the Physicia hatology outpatients of patients with Generalised Pustula A. There are two di r Psoriasis Physicia d Severity Index (C	n Global Assessi clinics for patien varied psoriasis p ar Psoriasis canno sease-specific se in Global Assessi	ment (PGA). These ts with generalised henotypes at ot have disease verity measures ment (GPPGA) &			
Applicability:		England	Wales	Scotland	Northern Ireland			
Where are the participating NHS/HSC organisations locate by this change?*:	ed that will be affected	Yes	Yes	No	Yes			
Will all participating NHS/HSC organisations be affected by this change, or only some? (please note that this answer may affect the categorisation for the change):		,	All	Some				
				Remove all	changes below			
	Change 3							

	C C
Area of change (select)*:	Study Design
Specific change (select - only available when area of change is selected first)*:	Inclusion/exclusion criteria - Minor change unlikely to affect safety or scientific value of study

Further information (free text - note that this field will adapt to the amount of text entered):

The Small Molecule study cohort was introduced to BADBIR in 2018 to reflect new additions to the psoriasis drug market in the real world. At this time, the new small molecule treatments were anticipated to be used pre-biologic therapy to treat psoriasis. The original eligibility criteria thus instructed patients joining this cohort must be naive to biologic therapy.

In 2022, there are further Small Molecule drugs upcoming in the pipeline to treat psoriasis. The newer products are anticipated to be used as alternative to or following a biologic treatment for psoriasis. To reflect real-world use of all new Small Molecule products, the eligibility criteria has been changed to allow registrations of biologic-experienced patients. If patient commencing new Small Molecule drug is naive to biologics, they will enter the Small Molecule cohort. If patient has been treated with a biologic previously, they will enter the Biologic-Exposed cohort.

Applicability:	England	Wales	Scotland	Northern Ireland
Where are the participating NHS/HSC organisations located that will be affected by this change?*:	Yes	Yes	Yes	Yes
Will all participating NHS/HSC organisations be affected by this change, or only some? (please note that this answer may affect the categorisation for the change):	ļ	AII	Sc	ome
			Remove all o	hanges below

	Change 4								
Area of change (select)*:	Study Documents								
Specific change (select - only available when area of change is selected first)*:	Other minor change to study documents (e.g. information sheets, consent forms, questionnaires, letters) that can be implemented within existing resource in place at participating organisations - Please specify in the free text below								
Further information In particular, please describe why this change can be implemented within the existing resource in place at the participating organisations (free text - note that this field will adapt to the amount of text entered)*	Minor changes made collection. Minor upd Chief Investigator (se Consent and PIS Ma • Patient Information • Patient Consent For • Parent or Guardian • BADBIR Children's • BADBIR Children's • BADBIR Young Per • BADBIR Very Youn Questionnaires: • Clinical Baseline Qu • Clinical Follow-up Q • Patient Baseline Qu • Patient Follow-up Q • Under 16 Patient Ba Patient Portal Docum • Patient Portal Invita N.B. This is a new do local sites to contact optional use by sites online Portal to recorr changes are permitte	ates to consent an e change 5 below) terials: Sheet v5.3 m v5.3 Consent Form v5. Information Sheet sons Information S g Children's Inform estionnaire v11 uestionnaire v11 estionnaire v7 aseline Questionna entation: tion Letter v1 cument and a vari- eligible patients in a to contact previous d questionnaire sa	d patient informati	on materials to ref ng Participant Invita nt. The Portal Invita ly participants to re	ation letter used by ration letter is for equest they join th				
Where are the participating NHS/HSC organisations locate	ed that will be affected	Yes	Yes	Yes	Yes				
by this change?*: Will all participating NHS/HSC organisations be affected by some? (please note that this answer may affect the categ change):					ome				
				Remove all o	changes below				
	Change 5								
Area of change (select)*:	Researchers								

Specific change (select - only available when area of change is selected first)*:	CI - New CI, or temporary arrangements to cover the absence of a CI							
Further information (free text - note that this field will adapt to the amount of text entered):	Named Chief Investigator for BADBIR study will change from Professor Chris Griffiths to Professor Richard Warren.							
Applicability:		England	Wales	Scotland	Northern Ireland			
Where are the participating NHS/HSC organisations locate by this change?*:	Where are the participating NHS/HSC organisations located that will be affected by this change?*:			Yes	Yes			
Will all participating NHS/HSC organisations be affected by some? (please note that this answer may affect the categ change):	A	JI	Some					

	Change 6									
Area of change (select)*:	Researchers	Researchers								
Specific change (select - only available when area of change is selected first)*:	Changes to the research team (other than CIs or PIs)									
Further information (free text - note that this field will adapt to the amount of text entered):	The Steering Committee appointed by BADBIR funder has changed. This has been updated on page 1 of the Protocol.									
Applicability:		England	Wales	Scotland	Northern Ireland					
Where are the participating NHS/HSC organisations locate by this change?*:	Yes	Yes	Yes	Yes						
Will all participating NHS/HSC organisations be affected by some? (please note that this answer may affect the categ change):	A	JI	So	Some						

Remove all changes below

	Change 7							
Area of change (select)*:	Participant Procedures							
Specific change (select - only available when area of change is selected first)*:	Participant procedures - minor change that can be implemented within existing resource at participating organisations - Please specify in the free text below							
Further information In particular, please describe why this change can be implemented within the existing resource in place at the participating organisations (free text - note that this field will adapt to the amount of text entered)*	In line with Change 1 described above, participants after year 3 in the study are now requested to complete questionnaires about their health once annually. Participants will be encouraged to do this directly through the online Patient Portal applications thus impact on participating organisations is limited.							
Applicability:		England	Wales	Scotland	Northern Ireland			
Where are the participating NHS/HSC organisations locate by this change?*:	d that will be affected	Yes	Yes	Yes	Yes			
Will all participating NHS/HSC organisations be affected by this change, or only some? (please note that this answer may affect the categorisation for the change):		A	JI	Some				
				Add anot	ner change			

 Section 3: Declaration(s) and lock for submission

 Declaration by the Sponsor or authorised delegate

 • I confirm that the Sponsor takes responsibility for the completed amendment tool

 • I confirm that I have been formally authorised by the Sponsor to complete the amendment tool on their behalf

 Name [first name and surname]*:
 Lynne MacRae

 Email address*:
 FBMHethics@manchester.ac.uk

Please note: This button will only become available when all mandatory (*) fields have been completed. When the button is available, clicking it will generate a locked PDF copy of the completed amendment tool which must be included in the amendment submission. Please ensure that the amendment tool is completed correctly before locking it for submission.

Lock for submission

After locking the tool, proceed to submit the amendment online. The "Submission Guidance" tab provides further information about the next steps for the amendment.

Section 4: Review bodies for the amendment

								F	Review	bodie	s								
			UK v	vide:			Eng	England and Wales:			Scotland:				Northern Ireland:				
	REC	Competent Authority MHRA - Medicines	Competent Authority MHRA - Devices	ARSAC	Radiation Assurance	UKSW Governance	REC (MCA)	CAG	SddWH	HRA and HCRW Approval	REC (AWIA)	РВРР	SPS (RAEC)	National coordinating function	HSC REC	HSC Data Guardians	Prisons	National coordinating function	Catego
Change 1:	N	υΣ	ΟΣ	A	Ľ	⊃ (Y)		0	I	エ (Y)	Ľ	<u> </u>	S	Z (Y)	I	I		Z (Y)	A
Change 2:	N					(Y)				(Y)				N				(Y)	В
Change 3:	N					(Y)				(Y)				(Y)				(Y)	A
Change 4:	N					(Y)				(Y)				(Y)				(Y)	С
Change 5:	Y					Y				(Y)				(Y)				(Y)	С
Change 6:	Ν					Ν				Ν				Ν				Ν	N/A
Change 7:	N					(Y)				(Y)				(Y)				(Y)	С
Overall reviews for the amend	ment:																		
Full review:	Y					Y				Ν				Ν				Ν	
Notification only:	N					Ν				Y				Y				Y	
Overall amendment type:	Su	bstant	ial			-				-	-	-	-	-	-	-	-		
Overall Category:	A																		
For national coordinating funct	ion office	use:																	
Update HARP:	En		nat HA	RP is											ier pro furthe				