Instructions for Follow-up in the EuroSIDA Study

Dataset 52, Autumn 2024

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EuroSIDA

Instructions for Follow-Up in the EuroSIDA Study

Dataset 52, Autumn 2024

Please study these instructions, and the list of definitions for the various diseases before you start entering data into the REDCap forms.

General information

The EuroSIDA follow-up in REDCap consists of the following forms:

- **EuroSIDA Follow-up form (FU52 Autumn 2024)**
- **Cause of Death (CoDe) event form**
- **RESPOND Event Form**
- **EuroSIDA Event Form for use of long-acting cabotegravir or rilpivirine**
- **EuroSIDA hepatotoxicity event form**

Access to REDCap forms
Detailed instructions for REDCap can be found below.

Historically reported data has been pre-uploaded to the EuroSIDA follow-up form. Kindly make sure that you complete all forms for all uploaded participant forms.

All principal investigators should have received a username and a password for REDCap by email. Contact the coordinating centre if you or anyone from your team need access to REDCap or have questions regarding the REDCap forms.

Unresolved queries of missing event forms may be listed and attached. Resolve all requested information and return the list to the coordinating centre by e-mail.

For sites that report data in an Electronic Access database

Electronically submitted data should be submitted in the RESPOND Electronic Submission Tool (REST). This web-based submission tool allows you to submit your data in the predesigned Access template through the CHIP website. The tool can be used to test the data quality and completeness as well. REST generates a report of errors, and the data are not submitted before a final submission step. This means that REST may also serve as a tool to check for, and correct errors *before* submitting the data. A REST guide will be sent to all the sites that submit their data in this way. Sites reporting data in REST are kindly asked to still complete the following forms in REDCap:

- **RESPOND Event Form**
- **Cause of Death (CoDe) form**
- **EuroSIDA Event Form for use of long-acting cabotegravir or rilpivirine**
- **EuroSIDA Hepatotoxicity event form**

Unknown dates
Unknown dates for previously reported data are reported as “dummy dates”. See the instructions for reporting unknown dates at the top of each section in REDCap, or in the SOP for electronic data transfer.

Below detection limit

Indicate measurements below detection limit (DL) as "-1".

Case definitions

Find the "List of Definitions on Clinical Events" for AIDS-defining diagnoses (except malignancies) enclosed in this document or find it on the EuroSIDA website. The updated Manual of Operations of Clinical Events can be found on the EuroSIDA website as well: https://www.chip.dk/Studies/EuroSIDA/Study-documents.

The EuroSIDA Follow-up form (FU 52 Autumn 2024)

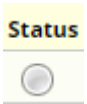
Please complete all requested information for all patients.

Present visit

Enter the date of the present visit (i.e., the data of the patient's most recent clinic visit). If the patient has not been seen since last reported visit, please provide the reason. You may then leave the remaining sections blank and continue straight to the final "Status" section. If the patient has died, complete the Cause of Death (CoDe) event form. If the patient has been seen since last follow-up, ensure that all sections of the follow-up form are completed.

Events

See the "List of Definitions on Clinical Events" for the relevant events collected in EuroSIDA. If a new event has occurred since the last follow-up, report the event and the 'date of event' in the follow-up form. If the patient has experienced a bone fracture or been diagnosed with AIDS or non-AIDS defining cancer, end stage liver disease (including liver transplantation), end stage renal disease (including renal transplantation), myocardial infarction, invasive cardiovascular procedure, or a stroke since the last follow-up (DS51), follow the link in the follow-up form to complete the RESPOND Event Form.



The 'Status' section must be completed for *all* patients when all available data has been entered. By completing this form, you indicate that all available data has been entered and that the follow-up form is complete.

Cause of Death (CoDe) event form

Provide the 'date of death' and a brief narrative of the sequence of events leading to death. Provide a summary of the causal relation between the conditions leading to death and upload any relevant source documentation (e.g. admission letter for the admission related to death, a discharge letter, an autopsy report or the like).

RESPOND Event Form

Complete the event form for patients who have experienced one or more of the following events:

- Bone fracture

- Cancer, AIDS and Non-AIDS defining
- End stage liver disease or liver transplantation (ESLD)
- End stage renal disease or kidney transplantation (ESRD)
- Invasive cardiovascular procedure (ICP)
- Myocardial infarction (MI)
- Stroke

See the Manual of Operations (MOOP) for clinical events in RESPOND and EuroSIDA for the definition of the individual events.

> ***Note***: The date of the event should still be indicated in the Follow-up form, but further details are collected in the separate REDCap RESPOND event form.

EuroSIDA Event Form for use of long-acting cabotegravir or rilpivirine

This form should be completed for participants who have started long-acting injectable drugs Cabotegravir, or Rilpivirine, or both. The form is open-ended, meaning it can be updated annually with all injections since last follow up, each year.

EuroSIDA Hepatotoxicity Event form

This form should be completed for participants who has discontinued cabotegravir due to suspected hepatotoxicity.

REDCap instructions for Follow-Up in the EuroSIDA Study

Dataset 52, Autumn 2024

ACCESS TO REDCap

Enter the address: https://chip-crf.info/redcap/ into your browser and log in with your username and password. If you have lost your username/password, or if you have not received one yet, contact the Coordinating Centre at eurosida.rigshospitalet@regionh.dk.

The first time you log in, you will be asked to change the password and set up a password recovery question. Note that your access is personal, and if more staff at your site need access, contact the Coordinating Centre.

FIND YOUR PROJECT

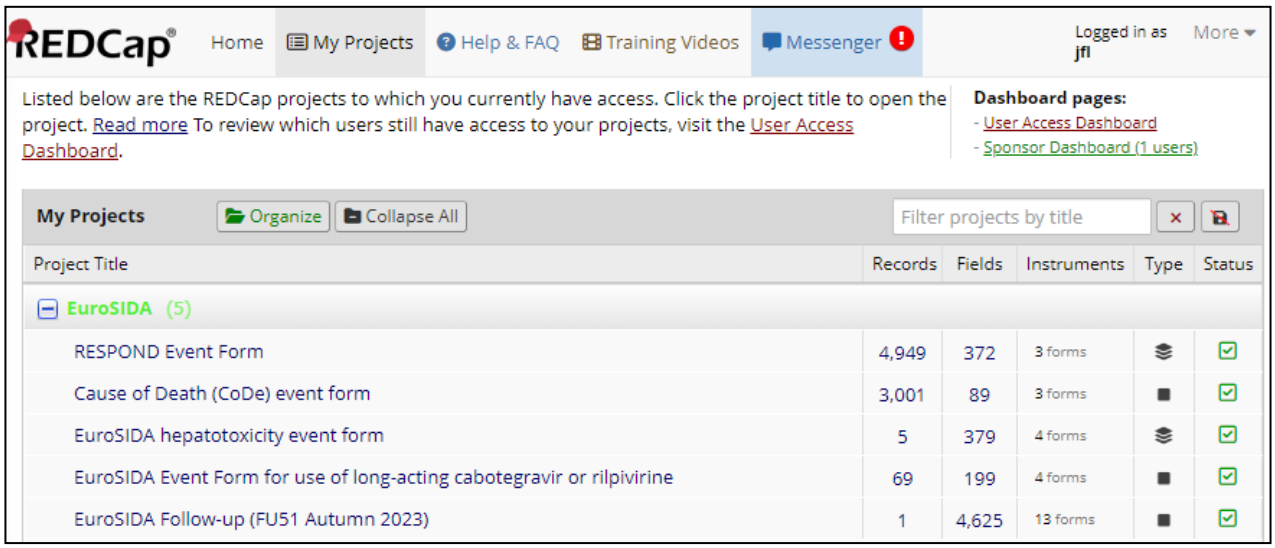
Go to **My Projects** tab and find the list of all the forms.

EuroSIDA Follow-up (FU 52 Autumn 2024): Follow-up forms for all your patients should be completed in REDCap. The follow-up form contains several sections, which should all be reviewed and/or completed unless there are no new data since last follow-up. If there is no new information since the last follow-up, indicate the reason in section A, and then complete the section and the final status form.

Note: *All 'Must Provide Values' must be completed (marked in the FU form with* *must provide value*, *unless the patient is dead, lost to follow-up or has not been seen since the last follow-up, indicated in Section A.* If there are no new values to enter in a given field, you should mark this with 'No', instead of leaving the field blank. **Reimbursement will be based on the completeness of 'Must Provide Values'.**

The following forms in REDCap should be completed in real time. Study sites in EuroSIDA provide information on their participants **continuously** in the following forms:

- **RESPOND Event Form**
- **Cause of Death (CoDe) Form**
- **EuroSIDA Event Form for use of long-acting cabotegravir or rilpivirine**
- **EuroSIDA hepatotoxicity event form**

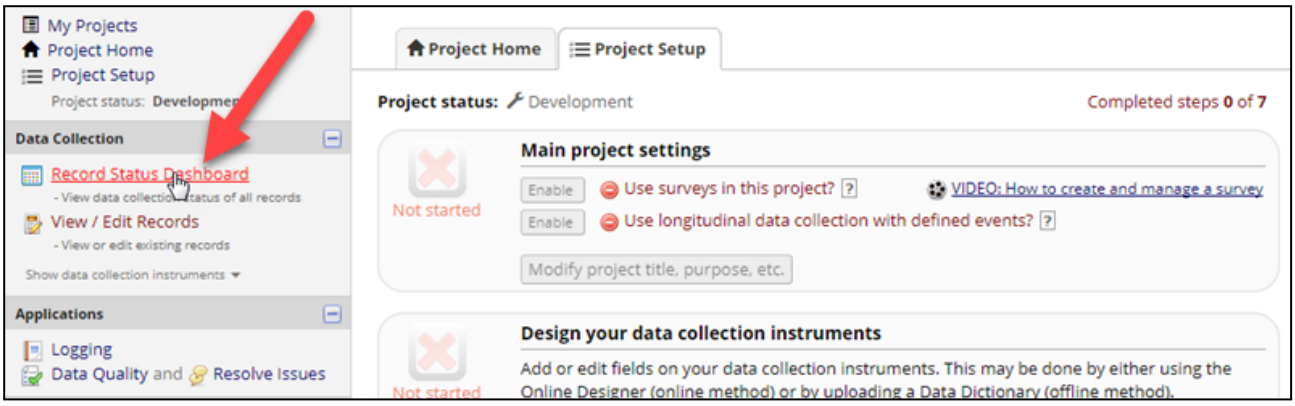


FIND A PATIENT's FOLLOW-UP FORM/PATIENT RECORD

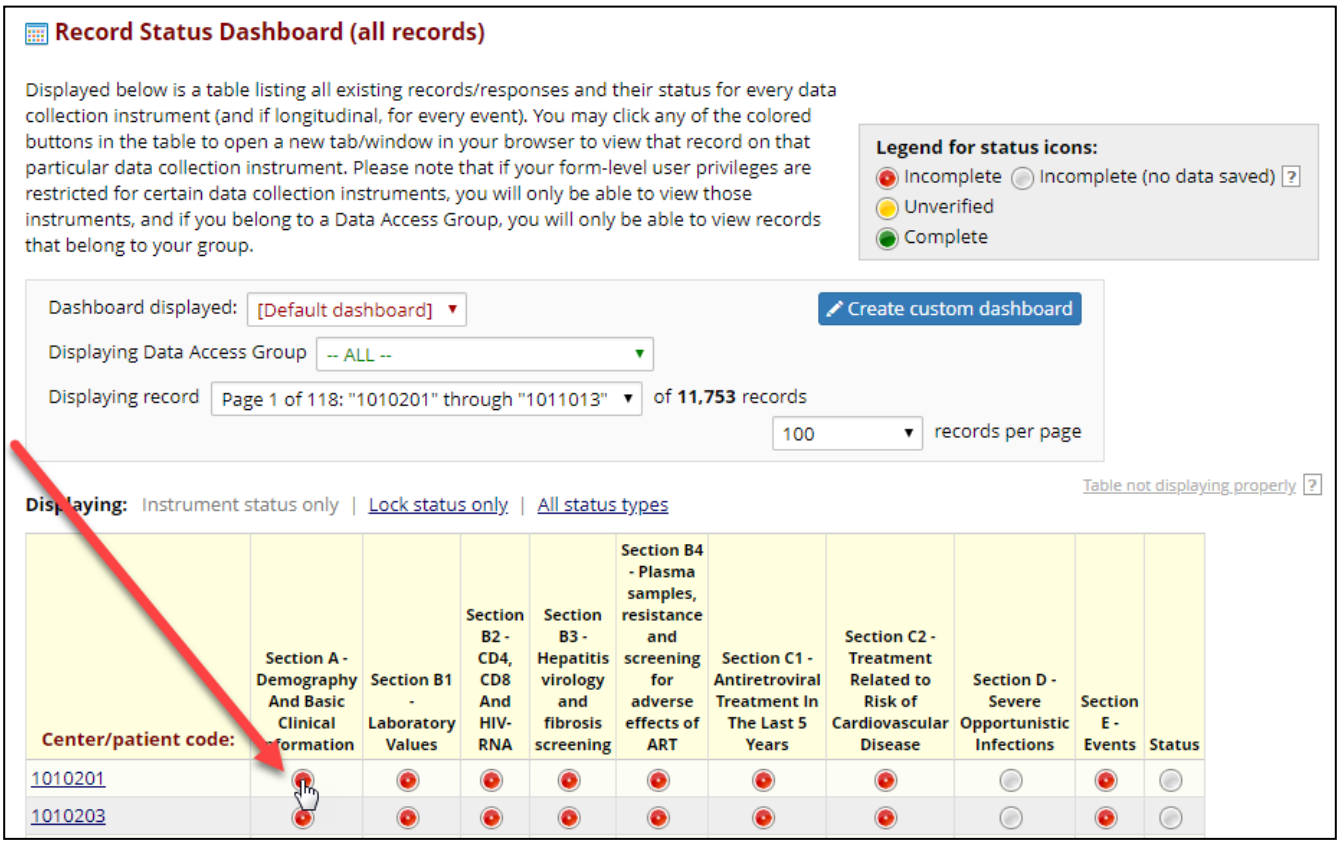
The EuroSIDA Follow-up form (FU 52 Autumn 2024) has preloaded patient records with the historical information you have previously recorded in enrolment and/or previous follow-up forms. Preloaded data is listed in grey fields. To find a patient record:

1. Click on the project EuroSIDA Follow-up (FU52 Autumn 2024). The project setup page will then appear.

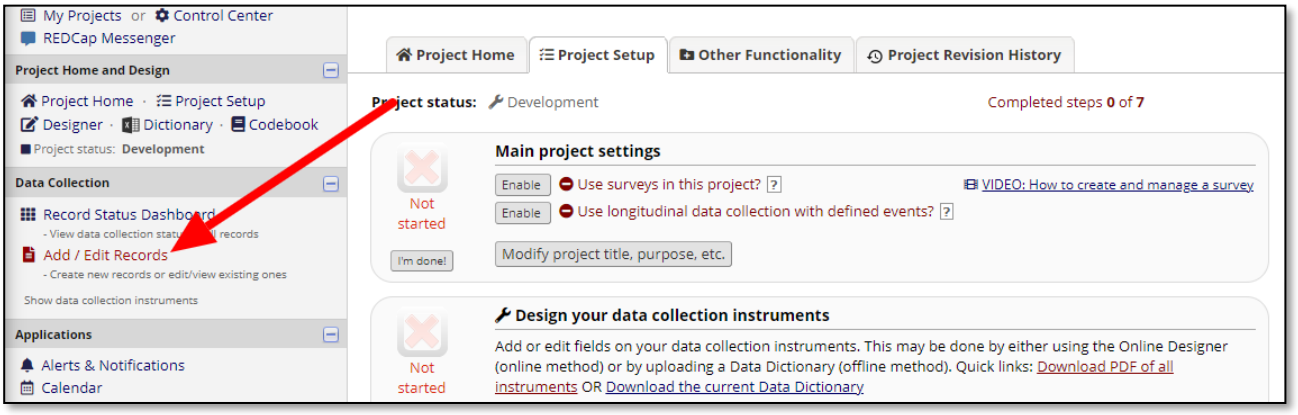
2A. Click on the **Record Status Dashboard** on the left-hand side under Data Collection:



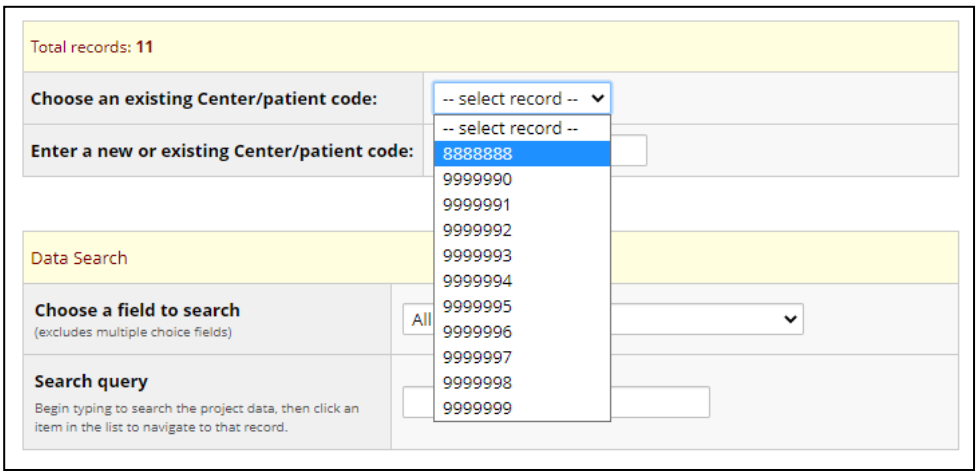
2B. Then click the status icon for the patient and section you wish to edit:



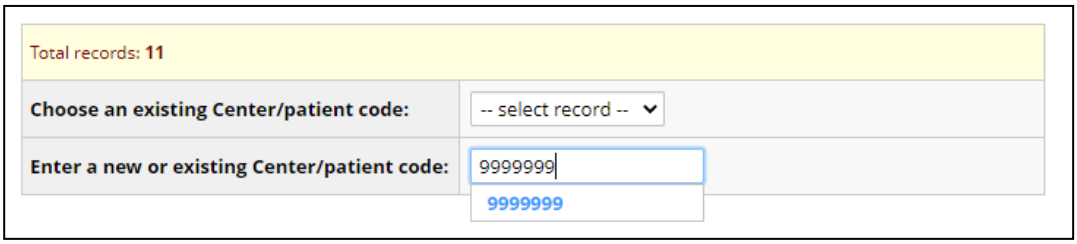
2C. Or click **Add/Edit Records** on the left-hand side under Data Collection:



Find the record using the **Choose an existing Center/patient code** drop down box:

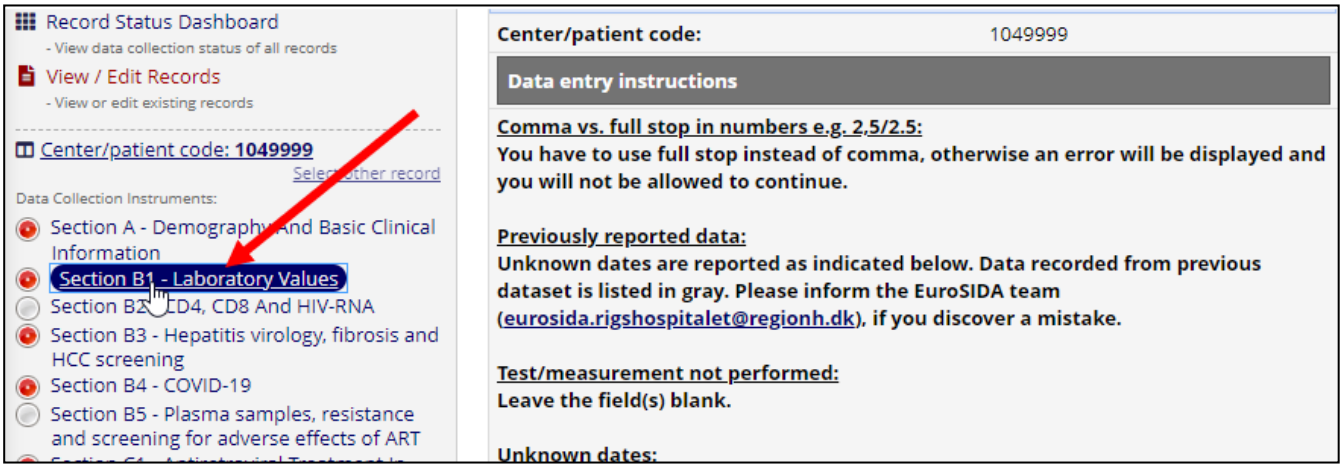


Or by entering the PID in **Enter a new or existing Center/patient code:**

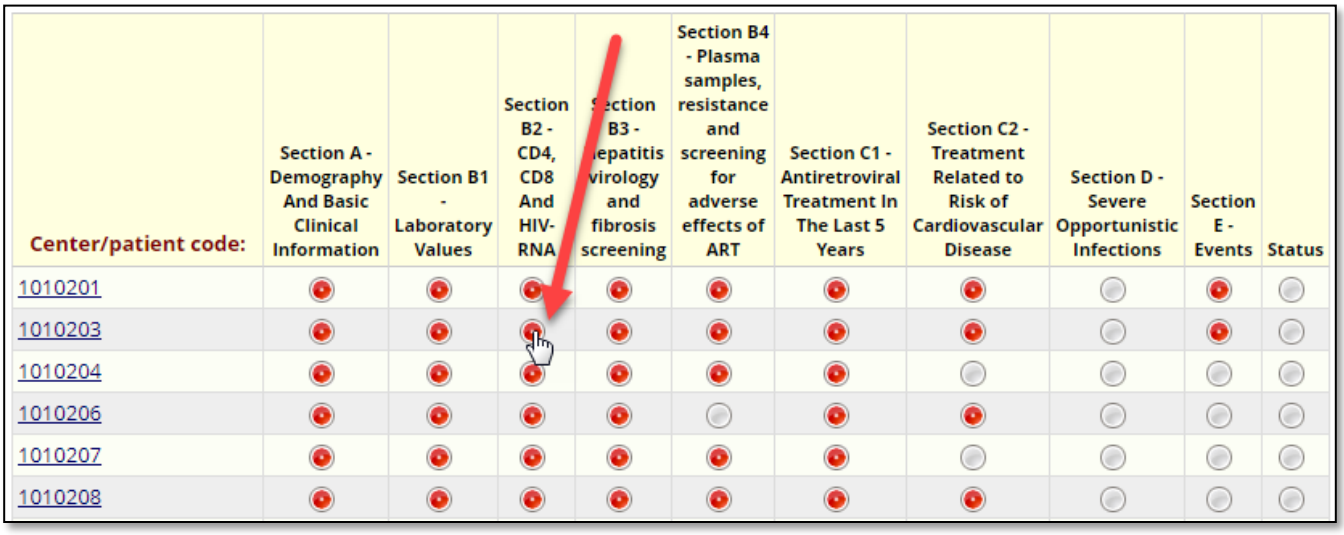


ENTER DATA INTO THE PATIENT FOLLOW-UP FORM/PATIENT RECORD

1. The EuroSIDA Follow-up (FU52 Autumn 2024) contains a form for each section. You can navigate between the different sections using the links on the left-hand side:



Or the Record Status Dashboard:



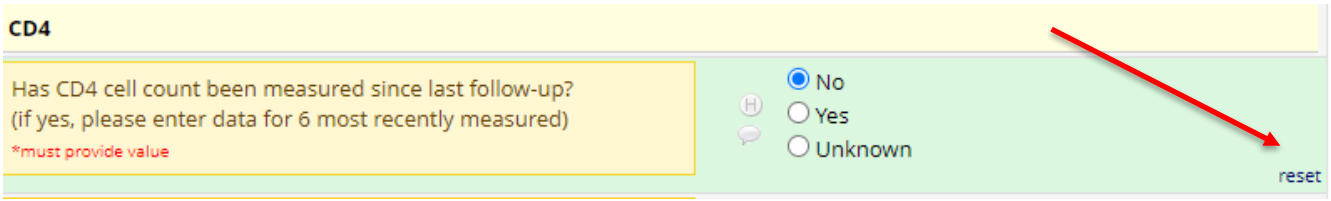
Center/patient code:	Section A - Demography And Basic Clinical Information	Section B1 - Laboratory Values	Section B2 - CD4, CD8 And HIV-RNA	Section B3 - Hepatitis virology and fibrosis screening	Section B4 - Plasma samples, resistance and screening for adverse effects of ART	Section C1 - Antiretroviral Treatment In The Last 5 Years	Section C2 - Treatment Related to Risk of Cardiovascular Disease	Section D - Severe Opportunistic Infections	Section E - Events	Status
1010201										
1010203										
1010204										
1010206										
1010207										
1010208										

The colored icon in front of the form denotes the status, i.e.:

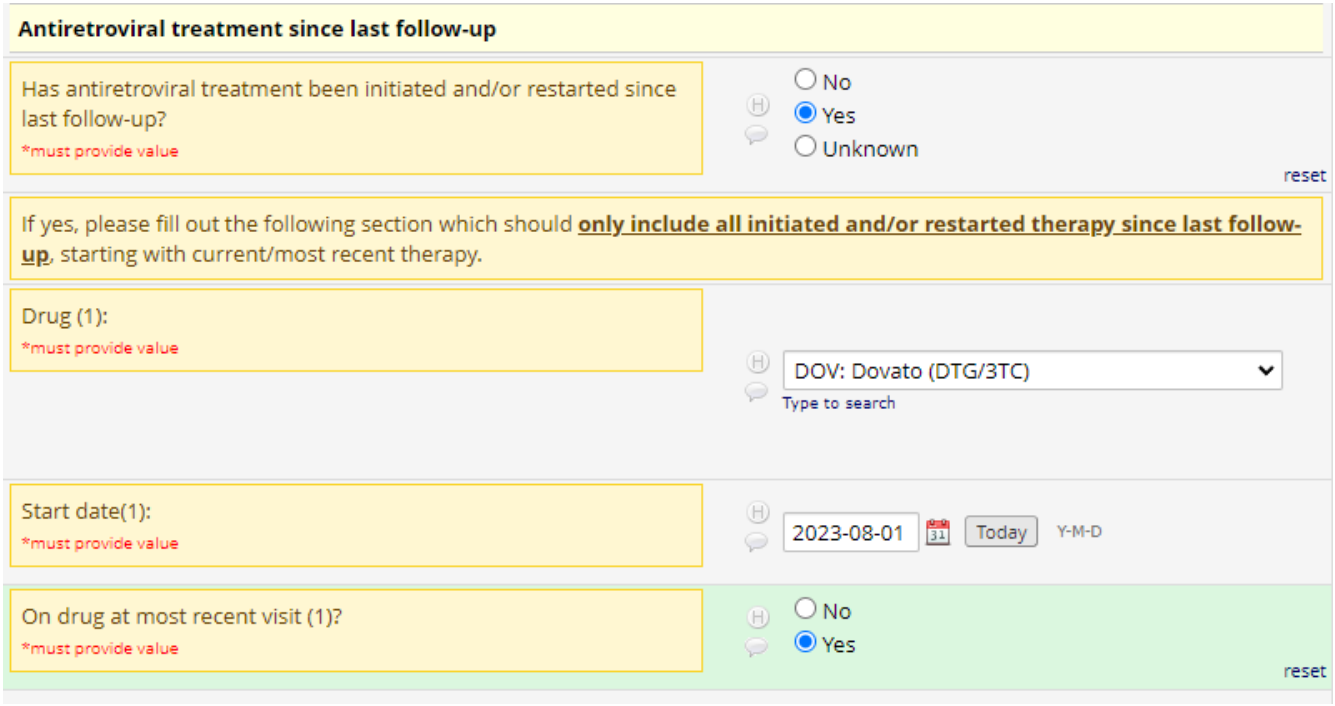
- **Green** (complete): The form/section is complete.
- **Yellow** (unverified): The form/section has been edited but is incomplete.
- **Red** (incomplete): The form/section contains preloaded data and has not been reviewed and/or the form/section has been saved, but data is incomplete and will be completed/reviewed later.
- **Grey** (incomplete): No data has been entered/saved.

2. Fill out the forms/sections. Data should be entered in the yellow fields. Previously reported data is displayed in grey fields. **You cannot edit previously reported data. If you find an error, send an email describing the PID, section and the correction to the EuroSIDA email** (eurosida.rigshospitalet@regionh.dk). In some sections, e.g., section C1, the yellow fields are located amongst the grey field's historical data.

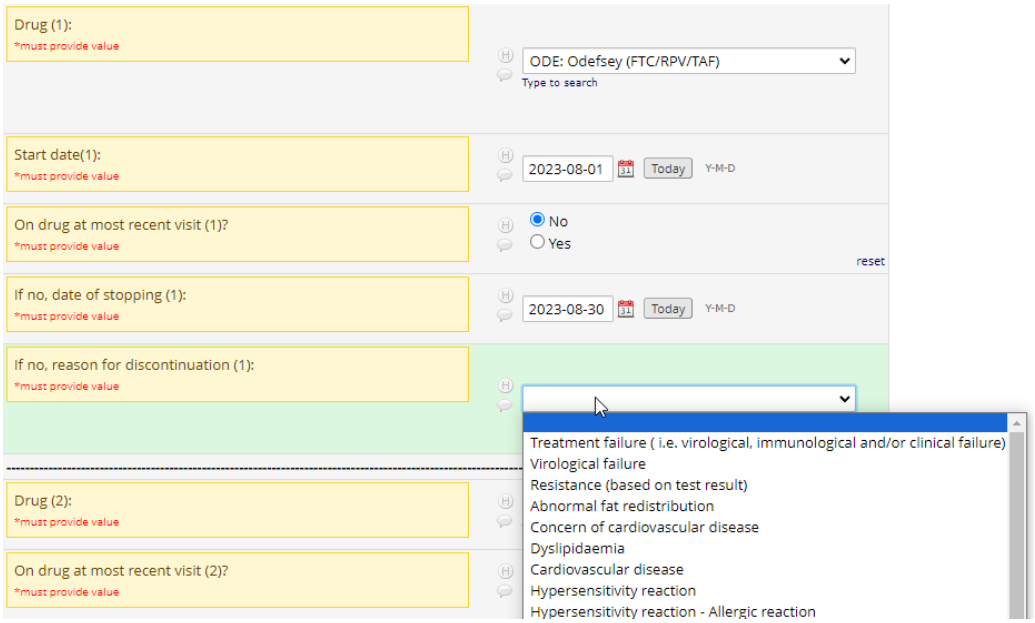
To remove an answer, click **Reset**.



This screenshot shows you how to report that the patient has started a new antiretroviral treatment:

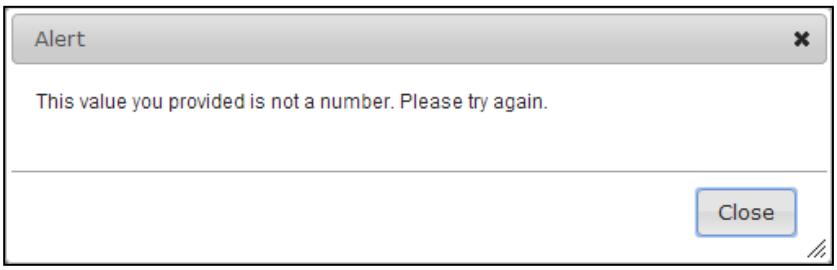


This screenshot shows you how to report, that the patient has stopped antiretroviral therapy, which he/she/they was receiving at the last visit. Indicate the date and the reason for discontinuation:



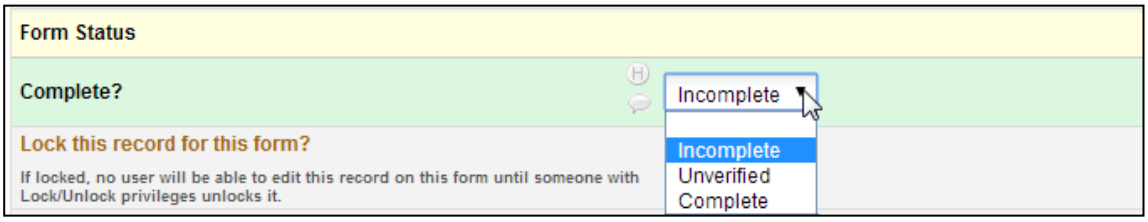
Comma vs. full stop

Use a full stop instead of a comma. Otherwise, you will receive this error:



3. **Select status** at the bottom of the form/section.

Incomplete: The form/section contains incomplete data and will be completed later.
Unverified: The form/section contains incomplete data and will be completed later. Use this status if you are interrupted and need to come back to it later. Using this status will make it easy to find the form again via the Record Status Dashboard.
Complete: The form status/section contains all available data.

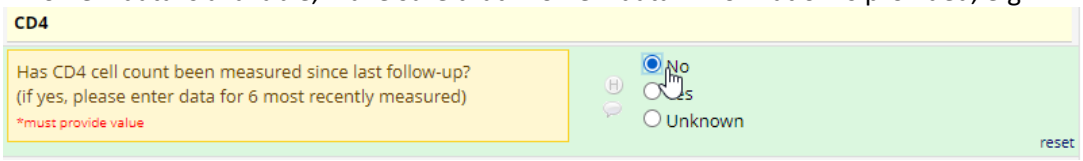


4. Click **Save & Exit Form**, **Save & Stay** or **Save and go to Next Form**.

FINALIZE EACH PATIENT RECORD

Before finalizing a patient record, make sure that you have:

- Entered <u>all data available</u> for the patient.
- If no new data is available, make sure that “no new data” information is provided, e.g.:



- If the patient has died and no new data is available *or* if the patient has not been seen since last follow-up, indicate this in Section A of the Follow-up form and complete the final Status Section.
- Completed all sections in all applicable forms.

Click “Status” in the left side menu and confirm that you have finalized your data collection by choosing “Complete” in the dropdown menu. By changing the status of this form to **"Complete",** you confirm that there is no more available data for the patient during the current follow-up period.

SAVE OR PRINT RECORD FOR YOUR USE

If you wish to download your reported data from REDCap, contact the coordinating center detailing which forms or data you wish to download.

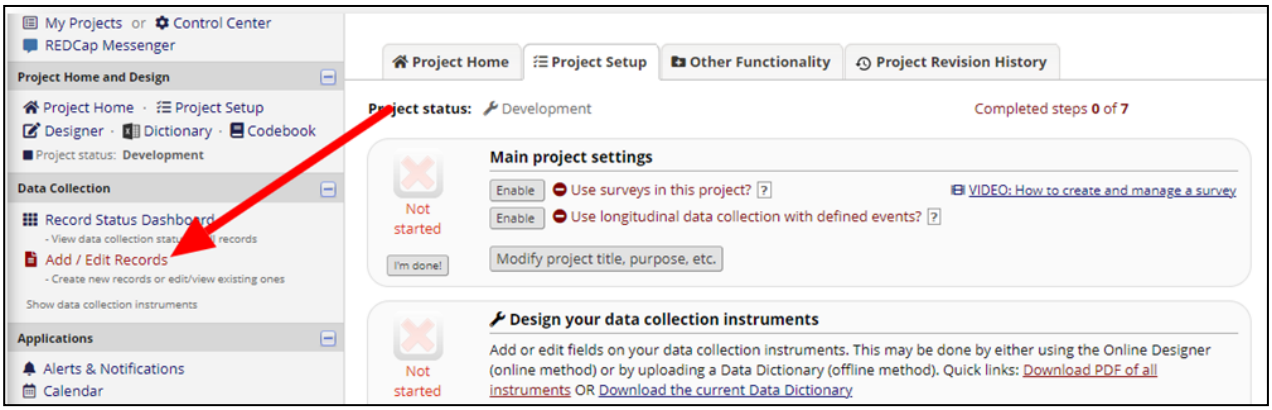
ADD NEW PATIENT RECORD

The RESPOND Event form, the CoDe form, the cabotegravir form and the hepatotoxicity form do not have preloaded patient record data – a new record needs to be added manually.

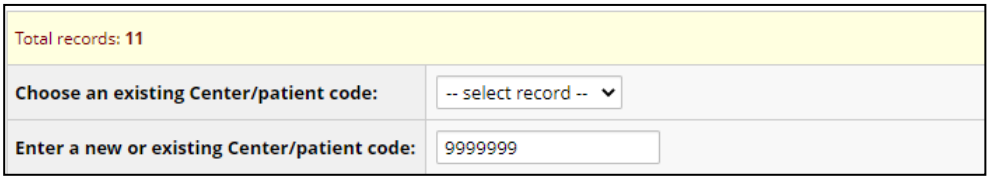
To add a new record:

1. Click on one of the projects (i.e., RESPOND Event form or CoDe form). The project setup page will appear.

2. Click **Add/Edit Records** on the left-hand side under 'Record Status Dashboard':



3. Type the EuroSIDA Patient Identification code [center code (3 digits) followed by patient code (4 digits) e.g., 1502001] and press **ENTER**:



4. Click on the circle under event 1 (only relevant for the Respond Event form):

Choose the Event 1 by clicking here.

EuroSIDA

List of Definitions for Clinical Events for the EuroSIDA Study

Dataset 52, Autumn 2024

LIST OF DEFINITIONS

The list below is definitions for the AIDS-defining events collected in EuroSIDA. The diagnostic criteria and duration required for classifying as a "definitive" or a "presumptive" event are indicated (for opportunistic infections only). For the definitions of clinical events where completion of a RESPOND Event Form is indicated, see the **Manual of Operations (MOOP) for clinical events** in RESPOND and EuroSIDA.

Section D: Severe opportunistic infections

DEM: AIDS dementia complex

Definitive:	Disabling cognitive and/or motor dysfunction, and no other causes by CSF exam and brain imaging or by autopsy
Presumptive:	Same as above, but no CSF and brain imaging performed

BCNE: Bacterial pneumonia, recurrent (≥ 2 episodes within 1 year)

Definitive:	X-ray evidence of pneumonia not present on previous X-rays and culture of bacteria that typically cause pneumonia (other than *M. Tuberculosis*)
Presumptive:	Acute radiological findings (new X-ray evidence not present earlier) and acute clinical findings

CANO: Oesophageal candidiasis

Definitive/autopsy:	Gross inspection by endoscopy/autopsy or by microscopy (histology)
Presumptive:	Recent onset retrosternal pain on swallowing and confirmed oral or pharyngeal candidiasis

CRCO: Cryptococcosis, extrapulm

Definitive/autopsy:	Microscopy, culture of, or antigen detection in affected tissue

CRSP: Cryptosporidiosis (duration > 1 month)

Definitive/autopsy:	Microscopy. Duration of diarrhoea for more than 1 month

CMVR: Cytomegalovirus retinitis

Presumptive:	Loss of vision and characteristic appearance on serial ophthalmoscopy, progressing over several months

CMVO: Cytomegalovirus (pneumonia, oesophagitis, colitis, adrenalitis, other organs)

Definitive/autopsy:	Microscopy (histology or cytology)

HERP: Herpes simplex ulcers (duration > 1 month) or pneumonia/oesophagitis

Definitive/autopsy:	Microscopy, culture of, or antigen detection in affected tissue

HIST: Histoplasmosis (extrapulm.)

Definitive/autopsy:	Microscopy, culture of, or antigen detection in affected tissue

WAST: HIV wasting syndrome

Definitive:	Weight loss (over 10% of baseline) with no other cause, and 30 days or more of either diarrhoea or weakness with fever

ISDI: Isosporiasis diarrhoea (duration > 1 month)

Definitive/autopsy:	Microscopy (histology or cytology). Duration of diarrhoea for more than 1 month

LEU: Progressive multifocal leukoencephalopathy (PML)

Definitive/autopsy:	Microscopy (histology or cytology)

Presumptive:	Progressive deterioration in neurological function and CT/MR scan evidence

MC: Mycobacterium MAC/Kansasii (extrapulmonary only)

Definitive:	Culture

MCP: Mycobacterium tuberculosis, pulmonary

Definitive:	Culture or PCR positive for Mycobacterium Tuberculosis
Presumptive:	Smear positive for acid fast bacilli or a biopsy suggestive of Mycobacterium Tuberculosis by histology

MCX: Mycobacterium tuberculosis, extrapulmonary

Definitive:	Culture or PCR positive for Mycobacterium Tuberculosis
Presumptive:	Smear positive for acid fast bacilli or a biopsy suggestive of Mycobacterium Tuberculosis by histology

MCPO: Mycobacterium, other type (pulmonary)

Definitive:	Culture (indicate type)
Presumptive:	Smear positive for acid fast bacilli (species not identified by culture)

MCXO: Mycobacterium, other type (extrapulmonary)

Definitive:	Culture (indicate type)
Presumptive:	Smear positive for acid fast bacilli (species not identified by culture) on microscopy of normally sterile body fluid/tissue

PCP: Pneumocystis jirovecii pneumonia

Definitive:	Microscopy (histology or cytology)
Presumptive:	Recent onset of dyspnoea on exertion or dry cough, and diffuse bilateral infiltrates on chest X-ray and pO_2 <70 mmHg and no evidence of bacterial pneumonia or viral pneumonia caused by SARS-CoV-2

SAM: Salmonella bacteraemia (non-typhoid) (≥ 2 episodes)

Definitive:	Culture

TOX: Toxoplasmosis, brain

Definitive:	Microscopy (histology/cytology)
Presumptive:	Recent onset focal neurological abnormalities or reduced level of consciousness, and mass effect lesion on scan, and specific therapy response

Shipping and Storing Plasma Samples for the EuroSIDA Study

Dataset 52, Autumn 2024

Shipping and Storing Plasma Samples

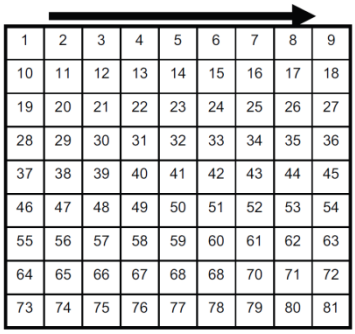
When shipping plasma samples from a site to CHIP, send the following information to Annette H. Fischer at annette.hauberg.fischer@regionh.dk:

1. How many vials do you have?
2. Are they stored in 1.8 ml cryovials?
3. Are they stored in grid boxes?
4. Who is the contact person for Optimize Courier?
5. What is the contact person's telephone number for Optimize Courier?
6. What is the exact address for Optimize Courier to pick up the samples?

When ordering cryovials and/or grid boxes, send the following information by email to Annette H. Fischer at annette.hauberg.fischer@regionh.dk:

1. How many vials do you want?
2. The exact address for shipping the vials.

Order in which the samples should be placed in the grid box:



1	2	3	4	5	6	7	8	9
10	11	12	13	14	15	16	17	18
19	20	21	22	23	24	25	26	27
28	29	30	31	32	33	34	35	36
37	38	39	40	41	42	43	44	45
46	47	48	49	50	51	52	53	54
55	56	57	58	59	60	61	62	63
64	65	66	67	68	68	70	71	72
73	74	75	76	77	78	79	80	81

Remember to complete the EuroSIDA List of stored samples and enclose a copy. Alternatively, you can find the list as a PDF file on CHIP´s webpage using the following link:
http://www.chip.dk/Portals/0/files/pdf_folder/Eurosida%20samplelist.pdf

Keep track of which specimens have been placed in which boxes on the corresponding EuroSIDA List of stored samples. For example, the sample on the top of the list should be placed in position 1 in the grid box and so on.

EuroSIDA

Hospital: _____ Country: _____

Centre Code: _____ Investigator: _____

Centre/patient code _____ - _____	**Date of sample (dd/mm/yy)**	**Number of tubes/vials**	**Grid box number**

Reimbursement Rates for the EuroSIDA Study

Dataset 52, Autumn 2024

EuroSIDA Reimbursement Rates

	Reimbursement rates*
EuroSIDA Follow-up form	20 €
Cause of Death (CoDe) form	30 €
RESPOND event form	30 €
Plasma samples (1 per participant per year)	6 €
EuroSIDA Hepatoxicity event form	50 €
EuroSIDA Event form for use of long-acting cabotegravir or rilpivirine (Annual reimbursement based on updated form with all injections)	100 €

**Note that reimbursement is based on provision of a set of core data that should be available for all patients.*