HIV Prevention Trials Network

LETTER OF AMENDMENT #1 TO:

HPTN 071

Population Effects of Antiretroviral Therapy to Reduce HIV Transmission (PopART): A cluster-randomized trial of the impact of a combination prevention package on populationlevel HIV incidence in Zambia and South Africa

Protocol Version 3.0 dated 16 November 2015

DAIDS Protocol ID: 11865

Date of Letter of Amendment: 23 August 2016

Information/Instructions to Study Sites from the Division of AIDS

The information contained in this Letter of Amendment (LoA) impacts the HPTN 071 (PopART) study and must be forwarded to your Institutional Review Board (IRB) and/or Ethics Committee (EC) as soon as possible for their review and approval. This LoA must be approved by all responsible IRBs/ECs before implementation.

The information in this LoA does not affect the Sample Informed Consent Forms.

Upon receiving final IRB/EC and any other applicable regulatory entity approval(s) for this LoA, your site should implement the LoA immediately. Your site is still required to submit an LoA registration packet to the DAIDS Protocol Registration Office (PRO) at the Regulatory Support Center (RSC). Your site will receive a registration notification for the LoA once the DAIDS PRO verifies that all the required LoA registration documents have been received and are complete. An LoA registration notification from the DAIDS PRO is not required prior to implementing the LoA. A copy of the LoA registration notification along with this letter and any IRB/EC correspondence should be retained in the site's regulatory files.

If the HPTN 071 (PopART) protocol is amended in the future, this LoA will be incorporated into the next version.

Summary of Revisions and Rationale

The HPTN 071 protocol v3.0, 16 November 2015 has been updated to reflect the changes listed in this Summary of Revisions and Rationale. All changes made are indicated in the next section, Implementation of the Protocol Modifications.

- 1) The protocol is being updated to allow the study team to enroll additional participants into the Population Cohort (PC) at the time of the 24-month survey, if necessary. The prior version of the protocol had already allowed this at the 12-month survey.
- 2) The protocol is being updated to remove the third case-control study.

3) The title of a sub-section in Section 7 of the protocol is corrected to indicate that a proposed Population Cross-Sectional Survey would take place at the 36-month visit.

The rationale for the first revision is to allow the study team to increase years on study, if needed, to ensure adequate study power at the trial's end. This had previously been approved for the PC12 visit but the current revision would allow enrollment of additional participants at the PC24 visit as well, if necessary. The rationale for the second revision (elimination of the third case-control study) is that this case study is now believed to be unlikely to provide new insights into reasons community members test or do not test for HIV, beyond what is already being gleaned through the first two case control studies and other social science research. The third revision corrects a previously-unidentified error that had mistakenly indicated that a proposed Population Cross-Sectional Survey would take place at the 24-month visit instead of the 36-month visit.

Revision 1- To Allow Additional Participants to be Enrolled into the Population Cohort if Needed

Section 5.1.4, Protocol Cohort Procedures and Activities

• Language was changed to allow the study team to enroll additional participants into the Protocol Cohort (PC) at the 12 and 24-month surveys.

Revision 2- To Remove Case Control Study 3 from the Protocol

TABLE OF CONTENTS

- The table of contents was updated to remove reference to Section 5.3.3, which is being removed with this letter of amendment.
- The tile of Table 8 in the list of tables and figures was revised to reflect the removal of case-control study 3.

SCHEMA

- The study size estimate for all case control studies was reduced.
- The objective of the third case-control study was removed.

SECTION 2.2 Study Objectives and Design- Secondary Objectives

• The objective of the third case-control study was removed.

FIGURE 2 Timing and Deployment of Intervention and Research Components

• Case-control study 3 was removed from the figure.

SECTION 5.3 Case-Control Studies

• Language was changed to describe only the first two case-control studies.

SECTION 5.3.3 Case-Control Study 3 Uptake of Testing in the Second Round of Home Based Testing Provided by CHiP Teams in Arms A & B

• The entire section was removed.

SECTION 7.1.3 (5) Secondary Endpoints, Case-Control Studies

• Language throughout the section was revised to reflect two case-control studies rather than three.

APPENDIX 1B- CASE-CONTROL STUDIES 1& 2- ARMS A & B

• The title of this appendix was revised to reflect two case-control studies rather than three.

SECTION 7.7 Secondary Objectives for Case-Control Studies

• The objective of the third case-control study was removed.

Revision 3- To Correct an Error in the Protocol Regarding Timing of the Proposed Population Cross-Sectional Survey

SECTION 7.1.3 (6)(b) Arms A, B, and C – Population Cross-Sectional Survey at 36 Months

• The title of this section was corrected to '36 months'. Previously it had erroneously indicated that the cross-sectional survey would occur at the 24-month visit.