Clarification Memo #1 to:

HPTN 083: A Phase 2b/3 Double Blind Safety and Efficacy Study of Injectable Cabotegravir Compared to Daily Oral Tenofovir Disoproxil Fumarate/Emtricitabine (TDF/FTC), For Pre-Exposure Prophylaxis in HIV-Uninfected Cisgender Men and Transgender Women who have Sex with Men
Protocol Version 6.0, May 24, 2023
DAIDS Document ID: 20725
IND # 122, 744
,
Date of Final CM #1: July 13, 2023

Summary of Clarifications

This Clarification Memo # 1 (CM) pertains to items contained in Appendix V of the protocol, which outlines procedures for the open label extension of the study. It clarifies an item for collection into the study database and corrects a minor error as follows:

1. Clarifies that all STIs regardless of grade are to be collected on eCRFs in Steps 4 – 7.

2. Corrects language in footnote # 9 in Table 14.

The study Sponsor, the Division of AIDS (DAIDS), has determined that this CM should be implemented immediately upon issuance. IRB/EC/other regulatory body review and approval of this CM is not required by the Division of AIDS prior to implementation. However, sites should follow the requirements of their IRB/EC and other regulatory bodies in this regard.

Sites should file this CM and any applicable IRB/EC correspondence in regulatory files for HPTN 083.

Implementation

1. Appendix V, "C. Information in the Main Protocol that is Included Or Modified in Appendix V", number 14.

14. **Adverse Event Reporting (from Section 6.0 of the main protocol, with modifications):**

> **For participants in Step 4a-c, and Step 5:** Study site staff will document in source documents all AEs. Grade 2 and higher clinical and laboratory AEs (including SAEs), and any AE (clinical or laboratory) that leads to a study product hold (temporary or permanent) will be captured on AE e-CRFs) reported by or observed in enrolled (defined as after randomization has occurred) study participants regardless of severity and presumed relationship to study product. AE severity will be graded per the DAIDS Table for Grading Adult and Pediatric Adverse Events, Version 2.1 corrected, July 2017. ~~Using these reporting guidelines, STIs will be dually reported on the AE e-CRF as well as the STI e-CRF~~. **It should be noted that these guidelines will not be followed for STIs. All**

STIs regardless of grade will be captured and dually reported on the AE e-CRF as well as the STI e-CRF.

For participants in Step 6 and Step 7: Study site staff will document in source documents all AEs. Grade 3 and higher study drug related clinical and laboratory AEs, any AE related to study drug discontinuation (temporary or permanent), and any SAE will be captured on AE e-CRFs. These include AEs reported by or observed in enrolled (defined as after randomization has occurred) study participants. AE severity will be graded per the DAIDS Table for Grading Adult and Pediatric Adverse Events, Version 2.1 corrected, July 2017. ~~Using these reporting guidelines, STIs will be dually reported on the AE e-CRF as well as the STI e-CRF~~. **It should be noted that these guidelines will not be followed for STIs. All STIs regardless of grade will be captured and dually reported on the AE e-CRF as well as the STI e-CRF.**

2. Appendix V, Table 14 – STEP 7 Schedule of Procedures and Evaluations - Cabotegravir Injections – Week 104 +, Footnote 9

[9] Perform testing at Week ~~108~~ **104** if not done within the last 6 months; perform testing at all other visits as noted.