Clarification Memo #1 to:

HPTN 084: A Phase 3 Double Blind Safety and Efficacy Study of Long-Acting Injectable Cabotegravir Compared to Daily Oral TDF/FTC for Pre-Exposure Prophylaxis in HIV-Uninfected Women
Protocol Version 2.0, dated 6 November 2019

FINAL Clarification Memo (CM) Version: Version 1.0, dated 22Jan2020

Summary of Revisions and Rationale

1. A row in Appendix Ib: Schedule of Evaluations - Step 2, Injection Phase with erroneous instruction has been removed. The row includes time points for blood collection needed for the Contraceptive Substudy. The Version 2.0 protocol includes a stand-alone Schedule of Evaluations, Appendix 1e, specific to the Contraceptive Substudy.

   The row being removed from Appendix 1b contains time points for blood collection that are inconsistent with protocol text and with Appendix 1e. By removing the row from Appendix 1b, the inconsistency is corrected.

2. Corrected a type error

Implementation

The procedures clarified in this memorandum have been approved by the Division of AIDS (DAIDS) Medical Officer and are to be implemented immediately upon issuance. IRB approval of HPTN 084 Protocol Clarification Memo (CM) #1 to HPTN 084, Version 2.0 is not required by the sponsor; however, sites may submit the CM to the responsible IRBs for their information.

No change in the informed consent forms is necessitated by or included in this CM.

The modifications included in this CM will be incorporated into the next full protocol amendment. Text noted below by strikethrough will be deleted.

Revision 1-Related Changes

Revision 1, Change 1) Removed the last row from “Appendix Ib: Schedule of Evaluations - Step 2, Injection Phase”
**Revision 2-Related Changes**

**Revision 2, Change 1** In Section 5.15, deleted the word “**may**” in the sentence below, which was already struck through in the protocol but erroneously left in the final version.

“Participants who continue to desire children and complete 48 weeks of TDF/FTC (initiated no later than eight weeks after her last injection) while study follow-up is ongoing will **may** be required to be followed up at least annually for HIV testing.”