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LETTER OF INFORMATION AND CONSENT TO PARTICIPATE IN A RESEARCH STUDY

Study Title	A randomized, placebo-controlled trial of oral doxycycline for the prevention of syphilis in HIV-positive men who have sex with men (MSM)
Protocol Number	CTN 313
Site Investigator	Dr. Darrell Tan St. Michael's Hospital, Division of Infectious Diseases Positive Care Clinic 30 Bond Street, 4-179 Cardinal Carter North Wing Toronto, Ontario, Canada M5B 1W8 (416) 864-5568 Monday-Friday: 8:30-4:30
Principal Investigators	Dr. Troy Grennan, BC Centre for Disease Control 1-(604)-707-5606, Monday-Friday- 8:30-4:30 Dr. Darrell Tan, St. Michael's Hospital (416) 864-5568, Monday-Friday- 8:30-4:30 Dr. Mark Hull, St. Paul's Hospital 1-(604)-806-8640, Monday-Friday- 8:30-4:30
Study Coordinator:	Name: Attia Qamar (416) 864-6060 ext 77325 Monday-Friday 9:00-4:30pm
Sponsor	BC Centre for Disease Control
Funding and Support	British Columbia Centre for Disease Control (BCCDC) Canadian Institutes of Health Research (CIHR) Canadian HIV Trials Network (CTN

INTRODUCTION

You have been invited to take part in a clinical trial by researchers from St. Michael's Hospital (a part of Unity Health Toronto). A clinical trial is a type of research study. Please read the information about the study presented in this form. The form includes details on the purpose of the study, what is required of you, and any potential risks and benefits of taking part. Only you can decide if you want to take part in this study. Participation in this study is voluntary. Your decision will not affect your medical care now or in the future. It will not affect other benefits you receive outside of the study. Before agreeing to take part in this research study, it is important that you read the information in this research consent form. You should only make your decision after reading all the questions and answers in this form.

You may talk about this study with anyone you wish including your friends, family, and your family doctor to help make your decision. You should take as much time as you need to decide.

After you have read the entire form, you will be given the chance to ask any questions that you may have. When you have had the chance to ask any questions and they have been answered to your satisfaction, and you decide to take part, you will sign the pages at the end of this form to show that you agree to be part of the study. This is called "giving your consent". Even after you have signed this study consent form you can change your mind and decide not to participate in the study. You do not have to give a reason.

BACKGROUND/ PURPOSE:

This study is investigating Pre-exposure prophylaxis (PrEP) for syphilis in the human immunodeficiency virus (HIV) positive population of gay, bisexual and other men who have sex with men (gbMSM). PrEP is the use of medication to prevent infection and is taken before the exposure to the infectious agent. Depending on the exposure, it may be taken periodically or on an on-going basis. Syphilis is a type of sexually transmitted infection. The rate of syphilis infection, including reinfection, is much higher in the gbMSM population. In fact, two thirds of all syphilis cases in Canada's major cities are in the HIV-positive gbMSM population. HIV co-infection with syphilis has important implications for HIV management. In individuals living with HIV who develop syphilis, they sometimes develop serious syphilis complications earlier and more frequently than those not living with HIV.

Doxycycline is an antibiotic that is commonly used to treat various conditions and infections, including acne and sexually transmitted infections (STIs) such as syphilis and chlamydia. Doxycycline has been used in medicine since the 1960s both short term (days to months) and long term (one year or more) for treatment. For example, it is often used for long periods of time in the treatment of acne. Doxycycline is also used regularly for the prevention of some infections like malaria in travelers.

A recent small pilot study looked at the performance of the antibiotic doxycycline used daily to prevent syphilis and other STIs. After 48 weeks, those receiving doxycycline were significantly less likely to be

diagnosed with any STI. The current study aims to replicate this study in a larger number of individuals, in order to better understand whether doxycycline can prevent syphilis when used daily. Health Canada has not approved the use of doxycycline, to treat syphilis and has allowed its use in this clinical study.

You are being invited to participate in this study because you are HIV-positive and have had syphilis in the past. The gbMSM population is considered high risk because the burden of syphilis is disproportionately high in this population and the resulting complications and long term negative health effects of co-infection of HIV and syphilis require new prevention solutions.

STUDY OBJECTIVES:

The purpose of this research study is to determine whether the daily use of doxycycline is an efficacious and acceptable intervention for syphilis prevention in high-risk, HIV-positive gbMSM. Data collected from the study will help determine how people feel about taking doxycycline daily both with respect to ease and tolerability of any side effects. Through questionnaires and STI monitoring we will also determine if syphilis PrEP changes attitudes and behaviours with respect to sexual activity. We will also monitor for antibiotic resistance. The results of this study will help determine the design for a larger similar study.

STUDY DESIGN

This study compares the study drug doxycycline with a placebo. Doxycycline will be used at a dose of 100mg (one capsule) by mouth once daily, for first 48 weeks of this 60 weeks long study. A placebo is a pill that looks just like the study drug, but contains no active ingredient. The placebo will also be taken as one pill by mouth once daily. Whether you get the study drug (doxycycline group) or the placebo (placebo group) will be decided randomly (by chance), like flipping a coin. You will have an equal chance (50/50) of being in one group or the other. This study will be double-blinded. This means that neither you nor the study team will know whether you are on doxycycline or on the placebo until the study is finished. However, this information can be found out at any time in case of an emergency.

A total of 52 participants across Vancouver and Toronto will be recruited for this study, with 26 participants receiving doxycycline and 26 receiving placebo. Among the 52 participants in the entire study, 18 will be recruited from St. Michael's Hospital.

DESCRIPTION OF THE RESEARCH/ STUDY VISITS AND PROCEDURES

In order to participate in this study, you must:

- Be an adult male (18 years of age and older)
- Have had self-reported condomless anal sex with a man within the last 6 months
- Are HIV-1 positive and have been on a stable anti-retroviral (ARV) treatment regimen for at least the past 3 months
- Have been diagnosed with and treated for syphilis within the past 3 years

- Are able to provide informed consent.

You are not eligible to participate in this study if:

- You have an allergy or intolerance to doxycycline or tetracyclines
- You have been diagnosed with myasthenia gravis
- You are currently taking or need to take medications that (a) lower doxycycline levels or (b) are contraindicated
- You are able to become pregnant

Study Procedures

As part of your standard clinical care you have already provided a medical history and continuously provide updates on your health and medications during routine visits (every 3-6 months). Also, as part of your routine clinical bloodwork and testing you are assessed for general health, kidney and liver function, STIs and blood borne infections such as Hepatitis B and Hepatitis C. This standard testing and visit schedule will continue uninterrupted. To minimize inconvenience to you, we will make every effort to coincide the study visits with your regularly scheduled clinic visits for your HIV care.

Please note that this study lasts for just over a year and will involve 8 visits including: screening to assess for study eligibility, baseline at which point you will initiate study drug, one 4 week post stud-drug initiation visit and quarterly visits (every 12 weeks/ 3 months) thereafter (post baseline week 12, week 24, week 36, and week 48 at which point you will cease study drug), a follow-up visit at 60 weeks post baseline. Screening and baseline may be conducted 14 days apart or combined depending on the time of your last routine blood work-up and results availability. If you do not meet the eligibility criteria, you will not be asked to provide the remaining information for the baseline visit.
In addition to your standard assessments, the study will require:

- A nasal swab at baseline/Day 1 and weeks 24 and 48 to test for resistance development to doxycycline. This test requires sampling from the throat and nose. However, we will use the same throat swab as will be utilized for gonorrhea (an STI) testing at these visits. These swabs will be collected to look for common bacteria that cause strep and staph infections and pneumonia (specifically: *Staph aureus*, *Strep pyogenes* and *Strep pneumonia*).
- A rectal swab at Day 1 and weeks 24 and 48 to look for common bacteria living in the rectum.
- Blood to be drawn at weeks 4, 12, 24, 36 and 48 for doxycycline levels. This sample of 5mL (1 teaspoon) will be collected during your routine clinical blood work. This blood sample will only be analyzed in those receiving doxycycline. Being that we will not know who is receiving doxycycline or placebo until the end of the study, these samples will be frozen until the end of the study. Those in the doxycycline group will have their samples processed for doxycycline levels; those in the placebo group will have their samples destroyed.
- Collection and reporting of adverse events and concomitant medications. The study staff will ask you about any side effects or changes in your health, including hospitalizations, and changes in your medications, since your last study visit. Of note, all side effects will be reported to the principal investigator. Although this is done for your HIV medications, this will now be done specifically in the context of the study drug as well.

- Completion of questionnaires at the beginning of the visits at Day 1 and weeks 4, 12, 24, 36 and 48. These will include questions about your sexual health, use of alcohol and other drugs, one asks about your level of satisfaction with your study drug treatment, and asks about how well you are able to take your medications as instructed and whether you have missed any doses. You are free not answer any questions that make you uncomfortable. These questionnaires will take a total of about 20 to 30 minutes to complete each time.
- At each visit except weeks 48 and 60, you will be provided with a supply of study drug to last until your next visit, and instructed how to take them. You will be asked to return your study drug bottles, whether full or empty, at the next visit.
- **Study procedures during COVID-19:** Upon your agreement and in compliance of the COVID-19 physical distancing measures and institutional guidance notes being followed to perform research activities, study visit procedures will be arranged either remotely (by a phone call or videoconferencing using ZOOM for Healthcare) or in-person. Whenever possible, certain study visit procedures will be conducted remotely to minimize the risk and exposure of COVID-19 infection. Procedures involving a physical exam, lab testing, blood sample collection, nasal, throat and rectal swab collection, and the delivery of the study drug supply will involve an on-site visit and thus cannot be performed remotely. In order to schedule a virtual study visit via Zoom for Healthcare and send you study documents (e.g. consent form, link for completion of questionnaires) prior to the virtual study visit for your review, we will ask for your personal email address.

Table 1 provides the details of what the study involves. Participants in both groups (doxycycline group and placebo group) will have the same study visit schedule.

Table 1. *Schedule of Study Visits and Assessments*

Study Assessments	**Screening Visit**	**Baseline Visit**	**Week 4 Visit**	**Week 12 Visit**	**Week 24 Visit**	**Week 36 Visit**	**Week 48 Visit**	**Week 60 Visit**
Visit duration	**1.5 hrs**	**1 hour**	**1 hour**	**1 hour**	**1 hour**	**1 hour**	**1 hour**	**1 hour**
Standard of Care/ Routine Clinical Procedures								
Medical History	X							X
Side Effects Review		X	X	X	X	X	X	X
Physical Exam		X	X	X	X	X	X	X
Hepatitis B testing	X							
Hepatitis C testing	X				X		X	
Routine bloodwork	X	X	X	X	X	X	X	X
STI screening	X	X	X	X	X	X	X	X
Research Specific Procedures								
Determine eligibility	X							

Randomization		X						
Study Drug dispensing		X	X	X	X	X	X	
Blood for doxycycline levels			X	X	X	X	X	
Questionnaires		X	X	X	X	X	X	X
Swabs: nasal and rectal		X			X		X	

POTENTIAL RISKS:

Risks of doxycycline:

Almost all drugs can cause side effects. Many are mild, but some can sometimes be more serious if they are not treated. **It is important for you to know that there is limited information on effects of long term use of doxycycline**. You will be monitored for possible side effects during the study. Please call the study doctor or your health care provider as soon as possible, if you think you are having a medical problem, have any side effects, or change in your medical condition or health.

Like many antibiotics, doxycycline has the potential for gastrointestinal (GI) side effects that include: nausea, vomiting, and diarrhea. In most cases, these side effects are mild if they occur, and will often go away after a short period of use. There is also a risk of allergy and allergic reaction. The risk of gastrointestinal side effects occurs in 5-10% of individuals taking the drug; allergy occurs in less than one percent.

Stomach-related side effects include stomach pain, heart burn, and irritation or ulcers of the esophagus. To prevent this, take the medication with food or a glass of water, and do not lie down for 1-2 hours after taking the medication.

Doxycycline may cause a rare but possibly serious side effects including:

- Changes in liver function (signs can include yellowing of the skin and/or eyes, dark urine, pale stools, pain in the right side below the ribs);
- Other rare but possibly serious side effects include an autoimmune drug reaction (signs can include swelling of hands and feet, muscle or joint pains);
- Benign intracranial hypertension (pressure around the brain) with symptoms such as headache, nausea, vomiting, and vision loss. If this occurs, seek medical attention immediately, and contact the study doctor or research staff as soon as possible. Do not use doxycycline and isotretinoin (acne medication) together as they can cause this effect.

If you experience symptoms such as severe diarrhea (bloody or watery) having more than 3 loose bowel movements in a day, with or without fever as well as abdominal pain, or tenderness, you may have *Clostridium difficile* colitis (bowel inflammation). If this occurs, stop taking doxycycline immediately and seek medical attention immediately, then contact research staff as soon as possible.

You may be sensitive to the sun when taking doxycycline and you could get a sunburn. Keep in mind that some over the counter products such as corticosteroid or retinol based topical creams, as well as, common medications, such as some acne, heart and diabetes medications and older antihistamines, can also make your skin more sensitive to the sun. Review all your medications with study staff in order to discuss proper precautions to minimize your sun exposure. If you will be in direct sunlight protect your skin by using sunscreen. Avoid excess sunlight and tanning beds. Stop using doxycycline if you become sensitive to the sun. Symptoms of sun sensitivity include: rash, blisters, or skin break outs.

Some drugs make doxycycline less effective by limiting the amount of drug absorbed into your body. It is important that you inform study staff of all medication and over the counter products that you are taking or planning to take during the study. This includes supplements and topical products. Do not take any other antibiotics (e.g. penicillin) or medication(s) to thin your blood (e.g. warfarin) unless your has doctor has specifically prescribed the use of these medications together with doxycycline. Ensure you take doxycycline either 2 hours before or 6 hours after taking any of the following (prescription or over the counter):

- iron supplements
- multivitamins
- calcium supplements
- antacids
- laxatives

To minimize stomach upset, take doxycycline with or after a meal and separate doxycycline and ingestion of dairy products (e.g. milk, yogurt, cheese) by at least 2 hours.

The effects of antibiotics on your other common bacteria is uncertain. There may be potential for the development of resistance to doxycycline in other common bacteria, although this has not been clearly documented in people who have taken this antibiotic for long periods of time for acne treatment. To study this possibility, swabs will be collected from your nose, throat and rectum at the beginning, midway and end of the study period to look for changes in the types of bacteria, or changing resistance patterns in some of the common bacteria that can be found there.

If you experience any side effects and are worried or have questions, call the study doctor or go to the emergency department.

Negative Effects in Growing Fetuses, Children, Breastmilk:

This medication can have serious harmful effects on growing bones and teeth. It is also excreted in the breast milk of lactating individuals. This medication MUST NOT be given to, shared with, or made accessible to individuals who can become pregnant, pregnant people, people who are breastfeeding, or children for these reasons.

Risk of Questionnaires:
Sensitivity to questions from the questionnaires may cause some emotional distress. If you feel that you need further support for any psychological distress, we will arrange for you to see a member of our psychosocial team in the clinic. Some of the topics you may be asked about include drugs of use/abuse, depression, self-harm. You do not have to answer any questions that you do not wish to answer.

Risks of Blood Draws:
In addition to risks associated with the study drug, drawing blood from a vein may cause local pain, bruising, lightheadedness, fainting, and very rarely, nerve damage and infection at the site of the blood drawn. However, these risks are no different from the risks associated with routine bloodwork, which you would need to undergo as part of your HIV and regular health care if you were not a part of this study.

Risks of Electronic Communication: E-mail, Text Messaging and Video-link

There are significant risks associated with electronic based communications, including:

- Your privacy cannot be completely guaranteed during a video-link based communication. Study staff will use Zoom for Healthcare, an encrypted platform for video conferencing but security measures on your end cannot be guaranteed.
- Videos can be recorded by a third part or by malware installed on devices
- The privacy and security of your text and email communications cannot be guaranteed. If someone sees the texts you send and receive, they may be able to tell that you may have or are at high-risk of having COVID-19
- Phone providers may have a legal right to inspect and keep texts passing through their systems
- Email may carry computer viruses that may damage computer data or software or disclose my information against my wishes.
- Electronic communications can be intercepted, forwarded, circulated, stored or even changed without the knowledge or permission of either the sender or recipient.
- Copies of electronic communications may continue to exist, even after reasonable efforts to delete them
- Electronic communications may be accidentally sent to an unintended recipient, or to many such recipients.
- Electronic communications may be disclosed to third parties or to the public, regardless of the intentions of the receiver or sender.

POTENTIAL BENEFITS

There are no guaranteed benefits from your participation in this study. A potential benefit to you is that you may experience prevention of syphilis and other STIs if you are in the doxycycline group. However, this prevention is not certain; that is what this study aims to determine. Those in the placebo group will not have any direct benefits. However, information learned from this study may help assist researchers to better understand whether doxycycline is effective in preventing syphilis and other STIs.

ALTERNATIVES TO PARTICIPATION

You do not have to join this study to receive services related to your HIV and STI care. PrEP for syphilis is not part of standard of care.

PROTECTING YOUR HEALTH INFORMATION: PRIVACY AND CONFIDENTIALITY

Medical Records:

Your participation in this study will be recorded in your St. Michael's Hospital medical record. If you participate in this study, the following study related information will be added to your hospital file and stored in the hospital's electronic medical record system: study drug dosing, additional medications and/or supplements and adverse events. St. Michael's Hospital shares the patient information stored on its electronic medical records system with other hospitals and health care providers in Ontario so they can access the information if it is needed for your clinical care. Any of these people may see that you were in this study and the study data listed above when they access your medical record for clinical purposes.

Protecting your privacy:

If you agree to join this study, the study doctor and his/her study team will look at your personal health information and collect only the information they need for the study. All persons involved in the study, including the study investigators, coordinators, nurses, monitors and delegates (hereby referred to as "study personnel"), are committed to respecting your privacy. Your confidentiality will be respected. Aside from the study personnel, the following people may come to the hospital to look at the study records and your personal health information to check that the information collected for the study is correct and to make sure the study is following proper laws and guidelines: representatives of St. Michael's Hospital including the Unity Health Toronto Research Ethics Board, representatives of the Sponsor (the BC Centre for Disease Control (BCCDC)) and representatives of Health Canada.

It is important to note that positive results for blood borne infections (such as Hepatitis B, Hepatitis C) and some sexually transmitted infections (such Syphilis, Gonorrhea and Chlamydia)

is required by law to be reported to Public Health, as per the Health Protection and Promotion Act. Please also be advised that if there is evidence of clear and imminent danger or harm to yourself and/or others, the study personnel are required to dissolve your confidentiality and report to relevant authorities. Study personnel will also enlist appropriate medical assistance, where you will be asked to seek or be referred for medical care. The study personnel and the study sponsor will make every effort to keep your personal health information private and confidential in accordance with all applicable privacy legislations, including the Personal Health Information Protection Act (PHIPA) of Ontario. The study personnel will access and look at your medical records (including but not limited to HIV results, medications, side effects and laboratory tests including HIV, Hepatitis B and C, sexually transmitted infections, liver and kidney function) and other personal health information and collect only the information they need for the study. Personal health information is any information that could be used to identify you and includes your name, address, date of birth, and new or existing medical records, that includes types, dates and results of medical tests or procedures.

Your information that is collected under the study will be sent to and housed at the Research Office in the Division of Infectious Diseases at St. Michaels Hospital and will be identified only by a code number. This code number is a unique study number that will be assigned to you as a participant in this study. This number will not include any personal information that could identify you (e.g., it will not include your Personal Health Number, SIN, or your initials, etc.). Only this number will be used on any research-related information collected about you during the course of this study, so that your identity will be kept confidential. Information that contains your identity will remain only with the Principal Investigator and/or designate. A separate log linking your code number to your hospital identification number will be kept in a secure location. All data collected for this study must be retained for 25 years (under Health Canada regulation), and will be securely destroyed at that time. All samples will be immediately destroyed upon analysis. At the conclusion of your participation in the study, the information about you that was collected before you left the study will still be used. No new information will be collected without your permission.

De-identified study data (does not include information that would directly identify you) will also be securely transferred to the study sponsor, BC Centre for Disease Control in British Columbia. Following the end of the study, data will be retained by the sponsor for at least 25 years in compliance with Health Canada regulation.

Your Samples:

Biospecimens (tissue samples) and study information will not be shared outside of the study. Nose and throat swab biospecimens will be collected and shipped to the laboratory of St. Paul's Hospital (in Vancuover, BC) for analysis. Biospecimens will only be used for research associated with this study and not for unspecified future use. After the samples have been analyzed, they will be destroyed as per the local laboratory protocols. There will be no personal and identifying information linked to the samples.

Blood samples collected, from doxycycline dosing arm participants only, processed and stored at -80^{o}C or lower within 2 hours after collection in a secure research lab located at St. Michael's hospital. The samples will be shipped to the Clinical Investigation Unit in Ottawa at the Ottawa Hospital for testing at the end of the study. Any unused or leftover sample will be destroyed once analysis is performed. Lab results will be sent directly to the study sponsor, BC Centre for Disease Control by the Ottawa Hospital.

Rectal swab biospecimens will be collected and stored at -80°C or lower in a secure research lab located at St. Michael's Hospital. The samples will be shipped to the Public Health Agency of Canada, National Microbiology Lab in Winnipeg for assessment upon request of the sponsor. Any unused or leftover sample will be destroyed once analysis has been performed. Specifically, these specimens will be stored at JC Wilt Infectious Disease Research Centre. Lab results will be sent directly to the study sponsor, BC Centre for Disease Control by the National Microbiology Lab.

Publication:

All information collected during this study, including your personal health information, will be kept confidential and will not be shared with anyone outside the study unless required by law. You will not be named in any reports, publications, or presentations that may come from this study. The researchers may use the information gathered in this study to prepare and publish manuscripts and public presentations. All data presented will be aggregate and de-identified in order to protect your identity and confidentiality.

Right to Information:

At the conclusion of your participation in the study, the information about you that was collected before you left the study will still be used. No new information will be collected without your permission. You also have the right to explicitly request that information about you is not to be used.

STUDY RESULTS

The study team plans to present and publish the final results of this study. Any results from this study will be published in a confidential manner. Your name or any other identifying information will not be used in any summary or publication. If you are interested in obtaining the results/publication of this study, you should contact the study team.

COSTS TO PARTICIPATION AND COMPENSATION

The study drug or placebo will be supplied to you at no charge while you take part in this study.. Participation in this study will not involve any additional costs to you or your private health care insurance.

You will receive a $20 honorarium at each study visit. Please note the honorarium may be given to you in the form of cash or via electronic gift card(s). Unless otherwise specified, the same email address you provide for completion of study surveys will be used to send you the electronic gift card(s).

COMPENSATION FOR INJURY

If you suffer an injury from the study procedure(s), from taking the study drugs or from participating in this study, medical care will be provided to you in the same manner as you would ordinarily obtain any other medical care. In no way does signing this consent form waive your legal rights nor does it relieve the investigators, sponsors or involved institutions from their legal and professional responsibilities.

PARTICIPATION AND WITHDRAWAL

Participation in any research study is voluntary. If you choose not to participate, you and your family will continue to have access to customary care at St. Michael's Hospital. If you decide to participate in this study you can change your mind without giving a reason, and you may withdraw from the study at any time without any effect on the care you and your family will receive at St. Michael's Hospital.

The study investigators may also stop your participation in the study without your consent if it is in your best interest, if you do not follow the study plan/procedures, or if you have a serious side effect to the study drug.

You can stop participating at any time, regardless of the reason; the study investigator will make every effort to ensure your participation in the study ends safely. This may require additional visits to conduct end of study assessments.

If you choose to enter the study and then decide to withdraw at a later time, all information about you collected up to the point of your withdrawal [including, where applicable, information obtained from your biological samples] will be retained for analysis in order to protect the integrity of the research, which may benefit future research participants and patients. However, no further information will be collected.

If samples have been collected before you withdraw, they will be destroyed or returned to the facility from which they were obtained. There may be exceptions where the samples will not be able to be withdrawn, for example, where the sample is no longer identifiable (meaning it

cannot be linked in any way back to your identity) or where the data has been merged with other data.

When you have completed the study, or if you withdraw early from the study, or if it is not it is not in your best interest to continue participating, you will be required to return all the study drugs you have.

DATA SAFETY MONITORING BOARD

A Data Safety Monitoring Board is a group of experts who will be reviewing the data throughout this research study to see if there are unexpected or more serious side effects than described in this form.

Electronic data will be password protected and stored on UBC'S encrypted and secure internal servers. Access to records and data will be limited to authorized persons and transmission of the data will be secure. All coded study data is entered into a secure electronic web-based database managed by UBC, BC, CA.

A description of this clinical trial will be available on http://www.ClinicalTrials.gov under the study identifier of NCT02864550. This website will not include information that can identify you. At most, the website will include a summary of the results.

STUDY CONTACT

If you have any questions about this study, or if you believe that you are developing side effects or have experienced an injury as a result of study treatment, please refer to the first/ title page of the consent and call the study site investigator or the study research coordinator.

In case of emergency after office hours, please proceed to the nearest emergency hospital.

RESEARCH ETHICS BOARD CONTACT

If you have any questions regarding your rights as a research participant, you may contact the Chair of the Unity Health Toronto Research Ethics Board at (416) 864-6060 x2557 during regular business hours between 8:30 am to 4:30 pm.

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A randomized, placebo-controlled trial of oral doxycycline for the prevention of syphilis in HIV-positive men who have sex with men (MSM)

Declaration of Participant Consent

This research study has been explained to me, and my questions have been answered to my satisfaction. I have been informed of the alternatives to participation in this study. I have the right not to participate and the right to withdraw without affecting the quality of medical care at St. Michael's Hospital for me and for other members of my family. As well, the potential harms and benefits (if any) of participating in this research study have been explained to me.

I have been told that I have not waived my legal rights nor released the investigators, sponsors, or involved institutions from their legal and professional responsibilities. I know that I may ask now, or in the future, any questions I have about the study. I have been told that records relating to me and my care will be kept confidential and that no information will be disclosed without my permission unless required by law, except if I test positive for reportable STIs (Chlamydia, Gonorrhea and Infectious Syphilis) and/or infectious conditions. The results will be reported to the local public health unit in the jurisdiction in which I live, because these are reportable infections under the law.

I have been given sufficient time to read and understand all pages of this document.

Consent to participate in the study

I consent to participate. I have been told I will be given a signed copy of this consent form.

Name of Participant	Signature of Participant	Date

The person signing below acted as a witness, during the consent process under certain situations such as consenting over the phone or videoconference call. (Please complete if a witness was present during the consent process)

Name of Witness	Signature of Witness	Date

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I have explained to the above participant the nature and purpose, potential benefits, and possible risks associated with participation in this research study. I have answered all questions.

Name of Person Obtaining Consent	Signature of Person Obtaining Consent	Date

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Consent to be Contacted for Research in the Future

We would also like to ask that you consider providing consent to be contacted about future research studies. The information that you should consider before agreeing to this is outlined below.

You may be contacted by a member of the Principal Investigator's research team or research staff at the site where you are participating in this study for follow-up studies or future studies on PEP and STI/HIV prevention and/or treatment done in the next 5 years. You will be contacted by phone or email based on your preference indicated below.

Your contact information will be stored in locked storage facilities at St. Michael's Hospital or the study site where they are collected and only the investigators will have access to them.

You are not obligated to participate in any research studies that you are contacted about.

If you no longer want to be contacted about future research studies, please contact Attia Qamar, 416-864-6060 x77325 or QamarA@smh.ca.

Acceptable Method of Communication

Please indicate which of the following methods of communication we can use to contact you about future studies:

□ Email
□ Phone

Statement of Consent – Future Contact for Research Purposes

I have read the above information, and I agree to be contacted for future research as described above.

_____	_____	_____
Participant Name (print)	Participant Signature	Date