Participant Information Sheet/Consent Form

Interventional Study - *Adult providing own consent*

USC Clinical Trials

Title	A Multicenter, Vehicle-controlled, Randomized Study to Evaluate the Safety, Tolerability, Systemic Pharmacokinetics, and Pharmacodynamics of AZR-MD-001 in Patients with Meibomian Gland Dysfunction (MGD) and Evaporative Dry Eye Disease (DED)
Short Title	Study Evaluating AZR-MD-001 in Patients with Meibomian Gland Dysfunction (MGD) and Evaporative Dry Eye Disease (DED)
Protocol Number	AZ201801
Study Sponsor	Azura Ophthalmics Level 9, 31 Queen Street, Melbourne, VIC 3000 Australia
Coordinating Principal Investigator/ Principal Investigator	Dr Susan Thackwray
Location	USC Clinical Trials, Level 1, 9 Ochre Way Sippy Downs QLD 4556

Part 1 What does my participation involve?

1 Introduction

You are invited to take part in this research study. This is because you have Meibomian gland dysfunction (MGD) with additional signs and symptoms of Dry Eye Disease (DED). The research study is testing a new drug for the treatment of MGD and the signs and symptoms of DED. The new investigational study drug is called AZR-MD-001, hereafter referred to as the “study drug”.

This Participant Information Sheet/Consent Form tells you about the research study. It explains the tests and treatments involved. Knowing what is involved will help you decide if you want to take part in the research.

Please read this information carefully. Ask questions about anything that you don’t understand or want to know more about. Before deciding whether or not to take part, you might want to talk about it with a relative, friend or your local doctor.

Participation in this research is voluntary. If you don’t wish to take part, you don’t have to. You will receive the best possible care whether or not you take part.

If you decide you want to take part in the research study, you will be asked to sign the consent section. By signing it you are telling us that you:

- Understand what you have read

- Consent to take part in the research study
- Consent to have the tests and treatments that are described
- Consent to the use of your personal and health information as described.

You will be given a copy of this Participant Information and Consent form to keep.

2 What is the purpose of this research?

The study drug (ointment/semi-solid drug) is considered an investigational drug to treat MGD and the signs and symptoms of DED. “Investigational” means the study drug being tested is not approved by the Therapeutic Goods Administration (TGA) in Australia to treat these conditions.

The active ingredient in the study drug is the same active ingredient in commercially available marketed anti-dandruff shampoos (i.e., Selsun Blue, Exsel, Selsum, and Seleen). In these shampoos the active ingredient is used as an anti-fungal and anti-dandruff agent. It is marketed up to a 2.5% concentration in non-prescription products.

In order to compare the safety and effectiveness of the treatment, each participant will be assigned to a study group. You will either receive the study drug or a vehicle ointment depending on the group you have been assigned to. “Vehicle ointment” refers to the ointment with no active substance that matches both the study drug’s texture and colour. “Placebo” refers to the ointment with no active substance that matches only the study drug’s texture.

The purpose of this study is to evaluate the safety, the comfort of the study drug in your eye, and to test if the drug helps treat your MGD and signs and symptoms of DED. This study will be conducted in two stages. Stage 1 is split into 4 groups; stage 2 is a single group. The stage you are enrolled in will depend when you start the study. The study doctor will inform you which group you are in. The study can only recruit participants into the next group once the safety has been assessed by a dedicated review panel.

If you participate in the first stage, group 1, group 2, group 3 or group 4:

- In the first part of the first stage (group 1), you will be given study drug at a concentration of 0.1% or vehicle ointment to use twice weekly at bed time for one month.

  In the second part of the first stage (group 2), you will be given the study drug at a concentration of 0.5% or vehicle ointment to use twice weekly at bed time for one month.

  In the third part of the first stage (group 3), you will be given the study drug at a concentration of 1.0% or vehicle ointment to use twice weekly at bed time for one month.

  In the fourth part of the first stage (group 4), you will be given the study drug at a concentration of 0.1%, 0.5%, 1.0% or 2.5% or vehicle ointment to use twice weekly at bed time for one month.

  During the first stage for all groups, when you reach your one month visit, you may be asked to continue using the same concentration of the study drug (0.1%, 0.5%, 1.0% or 2.5%) or the vehicle ointment, but you may be asked to increase your dosing frequency from twice weekly at bed time to once daily at bed time, for up to 2 more months. If you are not asked to increase the frequency, you will continue to use the study drug or the vehicle ointment twice weekly at bedtime as you were previously.

  You will be using the study drug or the vehicle ointment for up to a total of 12 weeks.

If you participate in the second stage of the study:

- One of up to three different concentrations of the study drug 0.1%, 0.5%, 1.0% or 2.5% or the drug's vehicle ointment will be given to you to use either twice weekly or daily at bed time for up to 12 weeks.

3 What does participation in this research involve?

The study will last approximately for 15 weeks (3 and a half months) and involve up to 6 clinic visits.

Before the study starts, you will be asked to review and sign this consent form. You will be asked questions about your medical history and any current medications you are taking. This is to ensure that you meet all of the necessary requirements for the study and do not have any conditions that would make participating unsafe for you. Questions asked during a medical history review typically cover current and past medications or therapies, illnesses, conditions or symptoms, and allergies. You will be asked about any new medical events and/or medications at each visit and you will be given several tests to see if you are able to continue participation in this study. Below is the list of tests performed over the period of the study. These will happen at most of the visits, a concise breakdown is provided in the table below.

- **Pregnancy Test**: Women who are able to have children will be asked to provide a urine sample for a pregnancy test at their first visit. To take part in this study, women who are able to have children and who are sexually active must use effective methods of avoiding pregnancy throughout the study. The study staff will discuss with you effective methods that can be used to prevent pregnancy while participating in this trial. If you are pregnant or planning to have a baby in the next year, you should not participate in this study. However, if you do become pregnant during the trial, notify your study eye care provider immediately.
- **Vital signs (pulse rate, blood pressure)**: You will be asked to rest, seated for at least 5 minutes. The study eye care provider will then count your pulse for 30 seconds. The study eye care provider will also measure your blood pressure: Blood pressure will be measured in the same arm using a pressure cuff on the arm. You will be asked to remain seated for at least 5 minutes before the measurements can be obtained. Your weight and height will also be measured.
- **Standard Patient Evaluation of Eye Dryness (SPEED), Ocular Surface Disease Index (OSDI) and Visual Analogue Scale (VAS):** You will be asked to fill out three questionnaires that will take about 15 minutes to complete. Each one will ask questions about how your eye disease affects your daily life and your symptoms. For the VAS, you will be asked questions regarding your ocular discomfort for each eye separately by placing a vertical mark on a horizontal line to indicate your level of discomfort for Burning and Stinging, Itching, Foreign Body Sensation (feeling as if something is in your eye), Eye Discomfort, Eye Dryness, Photophobia (sensitivity to light), and Pain.
- **Vision Exam:** Your vision will be tested and you will be asked to read eye charts. We will try to improve your vision by adjusting the prescription in your eyeglasses by placing different lenses in front of your eyes.
- **Slit-lamp biomicroscopy:** The study eye care provider will look closely at your eyes and eyelids through a microscope (magnifying lens) to assess the health of the surface of your eyes, eye lashes, lids, and lens. The study eye care provider will then apply a small drop of dye (2 types) on the surface of your eye to evaluate effects of MGD and DED on the ocular surface.
- **Keratograph** (selected sites)**:** Pictures of your eyes and eyelids may be taken to evaluate the tear film and the eye redness. Your identity will not be revealed in the pictures because these are close up photographs of the eye only.

- **Sodium fluorescein corneal staining, Oxford scale:** The study eye care provider will look closely at your eyes through a microscope (magnifying lens) after applying a small drop of yellow dye on the surface of your eye to evaluate effects of dry eye on the ocular surface.
- **Lissamine green conjunctival staining, Oxford scale:** The study eye care provider will look closely at your eyes through a microscope (magnifying lens) after applying a small drop of green dye on the surface of your eye to evaluate effects of dry eye on the ocular surface.
- **Meibomian gland evaluation:** The study eye care provider will look closely at your eyelids through a microscope (magnifying lens) after applying a small amount of pressure to the outside surface of the lid. This will determine if the glands in your eyelids are working properly to help produce oil that protects the front of your eye.
- **Schirmer's test:** To measure the amount of tears your eyes make, the study eye care provider will place a small piece of sterile filter paper on your lower eyelid and leave it in place for 5 minutes while your eyes are closed. Then the strip of filter paper will be removed.
- **Tear break-up time (TBUT):** The study eye care provider will look closely at the very front of your eyes through a microscope (magnifying lens) after applying a small drop of yellow dye on the surface of your eye. The study eye care provider will then shine a blue light on each eye to make it easier to see when your tear film breaks down after blinking.
- **Intraocular Pressure:** Your eye pressure will be measured after placing a numbing drop on the eye so you feel no pain, as is done in most standard eye examinations.
- **Ophthalmoscopy exam:** The study eye care provider will look closely at the back of your eyes through a microscope (magnifying lens) after applying a small drop of a dilating drop on the surface of your eye. This will cause the central black part of your eye to enlarge.
- **Meibography:** The study eye care provider will look closely at your eyelids by flipping them inside out and shining a light through them. This will determine if the oil producing glands in your eyelids are present.
- **Laboratory Samples:** You will be asked to give blood and urine samples to make sure you have no underlying systemic conditions which could make your participation in the study unsafe. About 2 tablespoons of blood will be taken for laboratory testing. This procedure will be performed at QML, Buderim. The urine samples will be collected at the study site for testing.

Screening Visit

Before you can start the study you will be asked to sign this consent form. You will be instructed to maintain a stable dose of any regular medication that you need to take, or any new medication initiated during the study if possible. You should communicate any changes to your medication at your next study visit. You will be reminded to contact the study site if you experience difficulties during your study participation.

You should refrain from using any ophthalmic preparations other than study treatment in order to obtain an accurate assessment of your disease.

Finally, you should strictly follow the visit schedule and report any changes in condition to the investigative site personnel. If you still qualify for the study and want to continue your participation in the study at the end of the Screening Visit, you will be asked to return in approximately 2 weeks for the Baseline Visit.

During the screening period, you will also be asked to apply a small amount of placebo ointment to your eye for two weeks. This will involve using your washed index finger or an applicator to apply the placebo ointment to the lower lid of both eyes in the evening just before bedtime and to blink several times to transfer a portion of the placebo ointment from the lower eyelid to the upper eyelid.

Baseline Visit:

You will be asked about any new medical events and/or medications and you will be given several tests to see if you are able to be in this study.
If you still qualify for the study and want to continue your participation in the study at the end of the Baseline Visit, you will administer your first dose of study medication in the clinic and will be asked about the comfort of the eye drops and if you have experienced any new medical conditions.

If you still qualify for the study after the 2 week run-in and you decide to continue, you will be asked to apply a small amount of medication (approximately 5 mg) using a dosing aid. You will receive one of the following possible treatments:

- Study drug ointment/semi-solid drug (0.1%)
- Study drug ointment/semi-solid drug (0.5%)
- Study drug ointment/semi-solid drug (1.0%)
- Study drug ointment/semi-solid drug (2.5%)
- Vehicle ointment

This is a double-masked study, which means that neither you nor the study doctor will know which drug you are taking. The study doctor can get this information quickly if he/she decides it is needed for your safety.

The drug you receive will be assigned by chance, like the flip of a coin.

If you are in Stage one of the study, there will be a four in five chance that you receive the study drug (e.g., 0.1%) over the vehicle ointment.

If you are in Stage two of the study, you will have an equal chance of receiving one of four concentrations of the study drug (0.1%, 0.5%, 1.0% or 2.5%) or vehicle ointment at matching concentration.

Finally, the study doctor will observe you applying the study medication, and will instruct you on the proper application technique, and verify that you are able to properly apply the study medication.

You will be asked to return in approximately 2 weeks for the Day 14 Visit. You will be asked to administer study medication in both eyes up to the night before your next visit.

Day 14 Visit:

You will be asked about any new medical events and/or medications, you should not have instilled any medication on the day of your visit (if you have, the visit will be rescheduled) and you will be given several tests to see if you are able to be in this study.

If you still qualify for the study and want to continue your participation in the study at the end of the Day 14 Visit, you will be asked to return in approximately 2 weeks for the Month 1 Visit. You will be asked to administer study medication in both eyes up to the night before your next visit.

Month 1 Visit:

You will be asked about any new medical events and/or medications, you should not have instilled medication on the day of your visit (if you have, the visit will be rescheduled) and you will be given several tests to see if you are able to be in this study.

After using the drug for one month and if you are in the first stage, the study doctor will determine if the treatment was well tolerated. If the treatment was well tolerated, the study doctor will determine if you can continue your current dosing regimen or escalate the dosing regimen to once every evening. If the study doctor does not feel it is safe to escalate dosing and it is safe for you to continue dosing with the current regimen you will be instructed to continue on your current, twice weekly regimen.

For the second stage, you will be instructed to continue on your current treatment regimen. If you still qualify for the study and want to continue your participation in the study at the end of the Month 1 Visit, you will be asked to return in approximately 2 weeks for the Month 1 and a half visit. You will be asked to administer study medication in both eyes up to the night before your next visit.

Month 1 and a half Visit:

You will be asked about any new medical events and/or medications, you should not have instilled medication on the day of the visit (if you have, the visit will be rescheduled) and you will be given several tests to see if you are able to be in this study.

If you still qualify for the study and want to continue your participation in the study at the end of the Month 1 and a half Visit, you will be asked to return in approximately 1 and a half months for the Month 3 (Exit) Visit. You will be asked to administer study medication in both eyes up to the night before your next visit.

Month 3 Visit:

You will be asked about any new medical events and/or medications, you should not have instilled your medication on the day of your visit (if you have, the visit will be rescheduled) and you will be given several tests before exiting this study.

You will then be exited from the study.

The decision for when you can participate in another study is determined by the drug safety information gathered from the study. Typically, you can participate in another study as soon as 30 days after the last dose of drug received in the study you are enrolled in. This information is true for most drugs; however, some drugs may be present in your body longer and that may mean you may have to wait longer before entering into another study. We will always make this information available.

Costs and Reimbursements:
There will be no cost to you for taking part in this study, nor will you be paid. All study drug, tests, procedures, and visits that are part of this study are being paid for by the Sponsor and will be provided to you at no cost. The costs of standard medical care that are not part of this study will be billed to you and/or your insurance company in the usual way.

Travel costs for site visits will be reimbursed at a flat rate of $100 AUD per visit.

You cannot be in this study if you:

- Are participating in another research study currently.
- Have been in any other research study in the last 30 days.
- Have punctal plugs (small device inserted into the tear duct of the eye) or plan to have punctal plugs inserted during the study.
- Have had lid-heating therapy, meibomian gland probing, or therapeutic gland expression in either eye within 6 months prior to the screening visit.
- Have not discontinued or are not willing to remain off topical cyclosporine or integrins during the study starting 3 months before screening.
- Have not discontinued and are not willing to remain off corticosteroids or mast cell stabilisers during the study starting 2 weeks before screening.
- Have not discontinued and are not willing to remain off antihistamines (administered by any route) during the study starting 1 month before screening.
- Have not discontinued or are not willing to remain off all MGD treatments (e.g., at-home warm compress therapy, eyelid hygiene, eyelid massage, and manual lid expression) starting at least 2 weeks before screening.
- Have not discontinued and are not willing to remain off all other ophthalmic preparations including artificial tears during the study starting 72 hours before screening.
- Have not discontinued and are not willing to remain off anti-dandruff shampoos.
- Have not discontinued and are not willing to stop the use of contact lens during the study.
- Have not discontinued and are not willing to stop the application of makeup around the eye or tattooing of the lids during the study.

Table 1 below is a schedule of all the assessment and tests required for participating in this study.

Table 1. **Schedule of Assessments**

	Qualification Period		Double Masked Period			
Test Performed	**Screening (Day -14)**	**Baseline (Day 0)**	**Day 14**	**Month 1**	**Month 1 and a half**	**Month 3 (Exit)**
Demographics, Height & Weight, Medication History & Washout; Review of Concomitant Medication	✓					
Medical & Ophthalmic History	✓	✓				
Pregnancy Test (for female participants)	✓					✓
Vital signs (pulse rate, blood pressure)	✓	✓				✓
Standard Patient Evaluation of Eye Dryness (SPEED)	✓	✓	✓	✓	✓	✓
Ocular Surface Disease Index (OSDI)	✓	✓	✓	✓	✓	✓
Visual Analog Scale (VAS)	✓	✓	✓	✓	✓	✓
Vision Exam	✓	✓	✓	✓	✓	✓
Slit-lamp biomicroscopy	✓	✓	✓	✓	✓	✓
Keratograph (selected sites)	✓	✓	✓	✓	✓	✓
Sodium fluorescein corneal staining, Oxford scale	✓	✓	✓	✓	✓	✓
Lissamine green conjunctival staining, Oxford scale	✓	✓	✓	✓	✓	✓
Meibomian Gland Evaluation	✓	✓	✓	✓	✓	✓
Schirmer's test	✓	✓		✓		✓
Tear break-up time (TBUT)	✓	✓	✓	✓	✓	✓
Intraocular Pressure	✓					✓
Ophthalmoscopy exam	✓					✓
Meibography	✓					✓
Blood and urine Sample Collection	✓					✓
Study Medication Dispensing and Returning	✓	✓	✓	✓	✓	✓

4 What do I have to do?

If you choose to participate in this study, you are responsible for the following:

- Be willing and able to follow the study directions and procedures given by the study eye care provider or study staff.
- Tell the truth about your medical history and medications you might be taking.
- Tell the study eye care provider or study staff about any side effects or problems you have during the study.
- Ask questions when you think of them.
- Discontinue all treatments for MGD, DED and anti-dandruff shampoos.
- Tell the study eye care provider or the study staff if you change your mind about staying in the study
    - If you decide to leave the study, you must contact the study eye care provider.
    - You will be asked to return for a final Month 3 (Exit) Visit for your safety and to make sure that you are in in your usual state of health.

It is important that you are honest with the study eye care provider about your health history in order to protect your safety while participating in this study.

5 Other relevant information about the research project

156 patients are expected to be in this study across 3 to 5 sites in Australia and New Zealand.

6 Do I have to take part in this research project?

Participation in any research project is voluntary. If you do not wish to take part, you do not have to. If you decide to take part and later change your mind, you are free to withdraw from the project at any stage.

If you do decide to take part, you will be given this Participant Information and Consent Form to sign and you will be given a copy to keep.

If you leave the study before completing all study visits, no more information about you will be collected. However, all the information collected before you left the study will still be used and will be stored in the study database and cannot be removed.

Your decision whether to take part or not to take part, or to take part and then withdraw, will not affect your routine treatment, your relationship with those treating you or your relationship with USC Clinical Trials Centre.

7 What are the alternatives to participation?

You do not have to take part in this research project to receive treatment for your condition. Other options are available; which include:

- Treatment options for MGD include eyelid hygiene (e.g., lid washing and use of preservative-free artificial tears), omega-3 dietary supplementation (e.g., eicosapentaenoic acid and docosahexaenoic acid), topical antibiotics (e.g., bacitracin and erythromycin), topical corticosteroids, topical cyclosporine, oral antibiotics (e.g., doxycycline, minocycline, and tetracycline), oral omega-6 fatty acids (e.g., linoleic acid and gamma-linolenic acid), as well as unclogging of glands that are blocked, which can be achieved by applying warm compresses to the eyelid or gentle lid massaging. You do not need to take part in this research study to have MGD treated.
- Treatment options for DED include artificial tears, anti-inflammatories/ immunomodulatory agents such as steroids and modifications to your eye environment such as wearing goggles. An eye drop called Restasis is available in Australia, however only through special access and is not subsidised on the PBS. You do not need to take part in this research study to have DED treated.

8 What are the possible benefits of taking part?

You may or may not directly benefit medically from taking part in this study. You may gain information about your health from the different tests (e.g. laboratory tests, eye exams, etc.) that are performed during the study. It is possible that if you have MGD and/or DED it may get better, stay the same, or get worse. Information from this study may help the Sponsor and doctors learn about the study drug that could help others with MGD and/or DED.

9 What are the possible risks and disadvantages of taking part?

Possible Risks and Side Effects of AZR-MD-001

Medical treatments often cause side effects. You may have none, some or all of the effects mentioned below, and they may be mild, moderate or severe.

If you do not understand what any of these side effects mean, please ask the study doctor or study staff to explain these terms to you.

As the study drug is investigational, all of its side effects may not be known.

You must tell the study doctor or study staff about all side effects that you have. If you are not honest about your side effects, you may harm yourself by staying in the study.

Over 300 patients have been dosed with the active ingredient in the study drug as a treatment for the same or related ocular conditions.

Adverse events reported following topical ocular use of products containing the active ingredient include: superficial punctate keratitis (cell death on the surface of the cornea causing eye discomfort and slight vision impairment) and conjunctivitis (damage to the cells that cover the front of the eye), eye pain, lid swelling, and eye redness which resolved upon stopping the treatment.

Risks from Study Procedures:

Fluorescein and lissamine dye eye drops are safe, but rarely cause an allergic reaction. Side effects from their use on the eye include redness, watering, itchiness, eye discoloration, irritation of the eye and swelling of the eyelids. These side effects usually go away in about an hour after the drops are put on the eye. These side effects are rare.

The intraocular pressure exam may cause irritation to the surface of the eye or blurred vision. Some people report experiencing blurred vision and eye discomfort for up to 24 hours after this exam has been performed. Also, there is a risk of allergic reaction (itching, redness, burning, or mucous discharge) to the ingredients of the anaesthetic drop used in this evaluation. If experienced, this could last up to 12 hours. In rare cases, this exam may cause corneal scratches.

The gland expression exam may cause eye discomfort. Some people report experiencing eyelid pain and eye discomfort after this exam has been performed.

The study coordinator will take your blood by sticking a small needle through your skin, as is done in routine blood sampling for a blood test. The risks of blood drawing include bleeding, pain, bruising, and the slight possibility of infection at the place where the needle goes in. Some people feel dizzy or may faint during or after a blood drawing, so we will ask you to sit for a few minutes after taking the blood sample.

If you become injured during the study, you should inform the treating doctor or nurse that you are participating in a research study.

Risks of Pregnancy and Breast Feeding:

You cannot be in this study if you are pregnant or breastfeeding. If you are pregnant, become pregnant, or are breastfeeding there may be risks to you and/or your child/unborn child that are not known at this time. Women who can become pregnant will be asked to take a pregnancy test(s) before, during, or at the end of study unless you cannot have children because of surgery (hysterectomy, removed uterus), bilateral tubal ligation (both tubes tied), bilateral oophorectomy (both ovaries removed), or post-menopausal.

You must agree to use an effective form of birth control while you are in the study. Acceptable methods of birth control include oral contraceptives, patch contraceptives, injection contraceptives, male condoms, diaphragm, vaginal contraceptive ring, intrauterine device, surgical sterilization (bilateral tubal ligation), or vasectomized partner. For non-sexually active females, abstinence may be regarded as an adequate method of birth control; however, if the participant becomes sexually active during the study, she must agree to use adequate birth control as defined above for the remainder of the study.

It is important for you to tell the study eye care provider and study doctor immediately if you get pregnant or think that you might be pregnant during the study. If this happens, the study doctor will discuss your options with you. If you get pregnant during the study, your participation in the study will be stopped immediately. Your study eye care provider and study doctor may ask you questions about your pregnancy and your baby, and you will be contacted for information about your pregnancy periodically.

Unforeseen Risks:

There may be additional risks to you while being in this study that are not known at this time. If you experience any unusual side effects, please contact your study doctor immediately.

Please ask your study doctor any questions you may have about the study risks.

Possible risks and side effects to stopping existing medication:

It is possible that you may experience side effects if you stop taking existing medication. We recommend that you consult with your primary care physician to learn about these potential side effects. Please ask the study doctor or study staff to explain these terms to you if you do not understand what any of these side effects mean.

10 What will happen to my test samples?

Samples of your blood obtained for the purpose of this research study will be collected at QML, Buderim laboratory. Samples of your urine will be collected at the study site.

Your sample will not be sold by Azura Ophthalmics. Samples will only be used for the purposes described in this Participant Information Sheet and no other analyses will be performed without your and the ethics committee's approval and further consent obtained. If any additional analyses are requested, you will have the right to refuse to these additional tests being carried out. You can also at any time request for your samples to be destroyed, however any information already gathered from the samples will be retained for the integrity of the study. Once all analyses are complete, samples will be destroyed according to standard operating procedures and local regulation of the laboratory.

As part of this study, pictures of your eyes and eyelids will be taken. If you and your study site are selected to provide the photographs taken of your eyes and eyelids, you will be asked to decide whether you provide the sponsor the right to use, copy and give out the pictures for research, advertising or in scientific journals or magazines. Your pictures may be used as part of a larger presentation. Your pictures may also be edited.

Azura Ophthalmics may give other people or companies permission to use your pictures.
The sponsor will hide your identity. Your name or any other information that can identify you will not be on the pictures and you have the right to review your pictures and cancel their release at any time. A tick box on the consent page will require completion if you and your site are selected to participate. If you choose or choose not to provide your pictures, your decision will not affect your study participation in any way.

11 What if new information arises during this research project?

Sometimes during the course of a research study, new information becomes available about the treatment that is being studied. If this happens, your study eye care provider will tell you about it and discuss with you whether you want to continue in the research study. If you decide to withdraw, your study eye care provider will make arrangements for your regular health care to continue. If you decide to continue in the research study you will be asked to sign an updated consent form.

Also, on receiving new information, your study eye care provider or study doctor might consider it to be in your best interest to withdraw you from the research study. If this happens, he/ she will explain the reasons and arrange for your regular health care to continue.

12 Can I have other treatments during this research project?

Whilst you are participating in this research study, you may not be able to take some or all of the medications or treatments you have been taking for your condition or for other reasons. It is important to tell your study doctor and the study staff about any treatments or medications you may be taking, including over-the-counter medications, vitamins or herbal remedies, acupuncture or other alternative treatments. You should also tell your study eye care provider and study doctor about any changes to these during your participation in the research study. Your study doctor should also explain to you which treatments or medications need to be stopped for the time you are involved in the research study.

13 What if I withdraw from this research project?

If you decide to withdraw your consent during the research study, the study eye care provider, study doctor and relevant study staff will not collect additional personal information from you, although personal information already collected will be retained to ensure that the results of the research study can be measured properly and to comply with law. You should be aware that data collected by the sponsor up to the time you withdraw will form part of the research study results. If you do not want them to do this, you must tell them before you join the research study.

If you leave the study or if you are taken out of the study, you will be asked to return for a final visit to have some end of study evaluations or tests.

14 Could this research project be stopped unexpectedly?

The Sponsor, study eye care provider or study doctor can decide to stop the study at any time. The study eye care provider, study doctor, the Sponsor or its representatives, Ethics Committees, or

regulatory agencies may take you out of the study without your permission, at any time, for the following reasons:

- If you do not follow the study eye care provider or study doctor's instructions.
- If we find out you should not be in the study.
- If the study is stopped.
- If it becomes harmful to your health.
- If you become pregnant (Females).
- If the drug is shown not to be effective.
- The drug is shown to work and not need further testing.

15 What happens when the research project ends?

The study drug will not be available for use outside of the study or when the study ends.

Information obtained from this study may be presented at meetings or published in medical journals. The information included at meetings or in journals will not include your name or information that can easily be traced back to you. After you exit the study your study doctor will discuss treatment options available to you and their important potential benefits and risks.

Part 2 How is the research project being conducted?

16 What will happen to information about me?

By signing the consent form you consent to the study eye care provider and relevant research staff collecting and using personal information about you for the research study. Any information obtained in connection with this research study that can identify you will remain confidential.

All information collected during the study will be coded with the unique study identification number assigned to you when you are enrolled. The study eye care provider is responsible for keeping the code list that makes it possible to link your code to your name. This will be kept in a safe place to ensure that if needed you can be identified and contacted.

Your information will only be used for the purpose of this research study and it will only be disclosed with your permission, except as required by law.

Your personal health information obtained during this research study are subject to inspection (for the purpose of verifying the procedures and the data) by the relevant authorities and authorised representatives of the sponsor, the institution relevant to this Participant Information Sheet, USC Clinical Trials or as required by law. These authorised users will receive full access to your original personal health information, which may or may not include your name. It is possible that your personal health information can be traced back to you even if it does not include your name. Therefore, complete privacy of your health information may not be possible. By signing this consent form, you are giving your study eye care provider permission to share your personal health information with all authorised users.

The following people will have access to your study records:

- The study eye care provider and study doctor
- Sponsor company or research institution

- Monitor(s) and other auditors(s) who assure the study is conducted properly
- The TGA
- Other country, state or federal regulatory agencies
- St Vincent's Hospital Melbourne Ethics Committee

Some of the organisations that will have your data will be located outside of Australia, including in countries where data protection requirements may be different or less restrictive than in Australia. However, Azura Ophthalmics will take reasonable measures to keep your personal health information confidential. Absolute confidentiality cannot be guaranteed. By signing this document, you agree to the transfer of your personal health information.

Information obtained from this study may be presented at meetings or published in medical journals. The information included at meetings or in journals will not include your name or information that can easily be traced back to you.

A description of this clinical study may be available on www.ClinicalTrials.gov as required by Law. This website will not include information that can identify you. At most, the website will include a summary of the results. You can search this website at any time.

In accordance with relevant Australian and/or Queensland privacy and other relevant laws, you have the right to request access to your information collected and stored by the research team. You also have the right to request that any information with which you disagree be corrected. Please contact the study team member named at the end of this document if you would like to access your information.

Your GP and/or relevant specialist may be informed of your participation in this study and by signing and dating the Participant Consent Form, you will also be giving permission for information regarding your medical history or your ongoing medical condition to be obtained from your GP and/or relevant specialist.

If you are admitted to another hospital during the course of; or arising out of, your participation in the study, you give permission for the release of any relevant records from that hospital. This would include records relating to a stay in the hospital and may include such information as test results, medications you were given during your stay and the reason why you were hospitalised.

17 Complaints and compensation

If you suffer any injuries or complications as a result of this research study, you should contact the study team as soon as possible and you will be assisted with arranging appropriate medical treatment. If you are eligible for Medicare, you can receive any medical treatment required to treat the injury or complication, free of charge, as a public patient in any Australian public hospital.

However, financial compensation is not routinely available from the study site or the Sponsor for things such as lost wages, disability, or discomfort. If your illness or injury is not a direct result of your study participation, you and/or your insurance will be billed for the cost of the medical care of that illness or injury. If you have any questions about getting medical care and/or compensation, please ask your study doctor.

There are two avenues that may be available to you for seeking compensation if you suffer an injury as a result of your participation in this research study:

The pharmaceutical industry has set up a compensation process, with which the Sponsor Azura Ophthalmics of this research study has agreed to comply. Details of the process and conditions are set out in the Medicines Australia Guidelines for Compensation for Injury Resulting from Participation in a Company-Sponsored Clinical Trial. In accordance with these Guidelines, the sponsor will determine whether to pay compensation to you, and, if so, how much. The research staff will give you a copy of the Guidelines together with this Participant Information and Consent Form. If you have any questions about the Guidelines, please ask to speak to Lucas Litewka, Director USC Clinical Trials.

- You may also be able to seek compensation through the courts.

18 Who is organising and funding the research?

This research study is being conducted by Azura Ophthalmics.

Azura Ophthalmics may benefit financially from this research study if, for example, the study assists Azura Ophthalmics to obtain approval for a new drug.

By taking part in this research study you agree that samples of your blood and urine (or data generated from analysis of these materials) may be provided to Azura Ophthalmics.

Azura Ophthalmics may directly or indirectly benefit financially from your samples or from knowledge acquired through analysis of your samples.

You will not benefit financially from your involvement in this research study even if, for example, your samples (or knowledge acquired from analysis of your samples) prove to be of commercial value to Azura Ophthalmics.

In addition, if knowledge acquired through this research leads to discoveries that are of commercial value to Azura Ophthalmics, the study doctors or their institutions, there will be no financial benefit to you or your family from these discoveries.

Your study doctor will receive a payment from Azura Ophthalmics for undertaking this research study.
No member of the research team will receive a personal financial benefit from your involvement in this research study (other than their ordinary wages).

19 Who has reviewed the research project?

All research in Australia involving humans is reviewed by an independent group of people called a Human Research Ethics Committee (HREC). The ethical aspects of this research study have been approved by the HREC of St Vincent's Hospital Melbourne.

This study will be carried out according to the National Statement on Ethical Conduct in Human Research (2007). This statement has been developed to protect the interests of people who agree to participate in human research studies.

20 Further information and who to contact

The person you may need to contact will depend on the nature of your query.

If you want any further information concerning this study or if you have any medical problems which may be related to your involvement in the study (for example, any side effects), you can contact the principal study doctor on 07 5456 3797 or any of the following people:

Clinical contact person

Name	Georgina Street
Position	Clinical Operations Manager
Telephone	07 5456 3797
Email	CTC@usc.edu.au

For matters relating to research at the site at which you are participating, the details of the local site complaints person are:

Complaints contact person

Name	Office of the Chief Operating Officer
Address	University of the Sunshine Coast, Sippy Downs QLD 4556
Telephone	07 5459 4789

If you have any complaints about any aspect of the study, the way it is being conducted or any questions about being a research participant in general, then you may contact:

Reviewing HREC approving this research and HREC Executive Officer details

Reviewing HREC name	St Vincent's Hospital Melbourne HREC
HREC Executive Officer	Executive Officer of Research
Telephone	039231 2394
Email	research.ethics@svha.org.au

Consent Form - *Adult providing own consent*

Title	A Multicenter, Vehicle-controlled, Randomized Study to Evaluate the Safety, Tolerability, Systemic Pharmacokinetics, and Pharmacodynamics of AZR-MD-001 in Patients with Meibomian Gland Dysfunction (MGD) and Evaporative Dry Eye Disease (DED)
Short Title	Study Evaluating AZR-MD-001 in Patients with Meibomian Gland Dysfunction (MGD) and Evaporative Dry Eye Disease (DED)
Protocol Number	AZ201801
Study Sponsor	Azura Ophthalmics Level 9, 31 Queen Street, Melbourne, VIC 3000 Australia
Coordinating Principal Investigator/ Principal Investigator	Dr Susan Thackwray
Location	USC Clinical Trials, Level 1, 9 Ochre Way Sippy Downs QLD 4556

Consent Agreement

I have read the Participant Information Sheet or someone has read it to me in a language that I understand.

I understand the purposes, procedures and risks of the research described in the project.

I give permission for my doctors, other health professionals, hospitals or laboratories outside this hospital to release information to USC Clinical Trials concerning my disease and treatment for the purposes of this project. I understand that such information will remain confidential.

I have had an opportunity to ask questions and I am satisfied with the answers I have received.

I freely agree to participate in this research project as described and understand that I am free to withdraw at any time during the study without affecting my future health care.

I understand that I will be given a signed copy of this document to keep.

I consent to the storage and use of blood samples taken from me for use, as described in the relevant section of the Participant Information Sheet, for:

- This specific research project

Declaration by Participant – for participants who have read the information

Name of Participant (please print) _____

Signature _____ Date _____

Declaration by Study Doctor/Senior Researcher†

I have given a verbal explanation of the research project, its procedures and risks and I believe that the participant has understood that explanation.

Name of Study Doctor/
Senior Researcher† (please print) _____

Signature _____ Date _____

† A senior member of the research team must provide the explanation of, and information concerning, the research project.

Note: All parties signing the consent section must date their own signature.

Form for Withdrawal of Participation - *Adult providing own consent*

Title	A Multicenter, Vehicle-controlled, Randomized Study to Evaluate the Safety, Tolerability, Systemic Pharmacokinetics, and Pharmacodynamics of AZR-MD-001 in Patients with Meibomian Gland Dysfunction (MGD) and Evaporative Dry Eye Disease (DED)
Short Title	Study Evaluating AZR-MD-001 in Patients with Meibomian Gland Dysfunction (MGD) and Evaporative Dry Eye Disease (DED)
Protocol Number	AZ201801
Study Sponsor	Azura Ophthalmics Level 9, 31 Queen Street, Melbourne, VIC 3000 Australia
Coordinating Principal Investigator/ Principal Investigator	Dr Susan Thackwray
Location	USC Clinical Trials, Level 1, 9 Ochre Way Sippy Downs QLD 4556

Declaration by Participant

I wish to withdraw from participation in the above research study and understand that such withdrawal will not affect my routine treatment, my relationship with those treating me or my relationship with USC Clinical Trials Centre.

Name of Participant (please print) _____

Signature _____ Date _____

In the event that the participant's decision to withdraw is communicated verbally, the Study Doctor/Senior Researcher will need to provide a description of the circumstances below.

Declaration by Study Doctor/Senior Researcher†

I have given a verbal explanation of the implications of withdrawal from the research study and I believe that the participant has understood that explanation.

Name of Study Doctor/
Senior Researcher† (please print) _____

Signature _____ Date _____

† A senior member of the research team must provide the explanation of and information concerning withdrawal from the research study.

Note: All parties signing the consent section must date their own signature.

This page is the manifestation of an electronic signature certifying that I have reviewed the electronic copy of this document and certify that it is an exact copy having all of the same attributes and information as the original document.

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Electronic Signature for: Fiona Groom
Electronically Signed by: fgroom
Date & Time: 31/JUL/2020 1:46 PM AEST
IP Address: 203.29.104.10