

Prof Adrian Hill
Chief Investigator
The Jenner Institute
University of Oxford



Centre for Clinical Vaccinology &
Tropical Medicine (CCVTM)
Churchill Hospital
Oxford OX3 7LE

National Research Ethics Service
Committee: Oxford A
Number: 19/SC/0074

Recruitment Co-ordinator
Tel: 01865 611424
Fax: 01865 289694
Email: vaccinetrials@ndm.ox.ac.uk

PARTICIPANT INFORMATION SHEET: ZIKA001

A study to assess the new candidate Zika vaccine in healthy adults

“A phase I study to determine the safety and immunogenicity of the candidate Zika Virus (ZIKV) vaccine ChAdOx1 Zika in healthy adult volunteers given as a standalone vaccine or co-administered with the Chikungunya Virus (CHIKV) candidate vaccine ChAdOx1 Chik”

We would like to invite you to take part in a research study. Before you make a decision, it is important you take the time to understand why the research is being done and what it would involve. Please read the following information carefully and discuss it with friends, relatives and your General Practitioner (GP) if you wish.

- Part 1 tells you the purpose of the study and what will happen to you if you take part.
- Part 2 tells you more information about the conduct of the study.

Please ask us if there is anything that is not clear, or if you would like more information. Take time to decide whether or not to take part.

PART 1

What is the purpose of this trial?

The purpose of this study is to test a new vaccine against the Zika Virus (ZIKV) in healthy volunteers given on its own and at the same time as another new vaccine against Chikungunya Virus (CHIKV).

Zika is a disease caused by ZIKV and can be transmitted to humans through a mosquito bite, from a pregnant woman to their unborn child and it can also be sexually transmitted. Symptoms of Zika infection include fever, headache, joint & muscle pains, tiredness and skin rashes, but most people won't have any symptoms at all. The disease is now known to be associated with major neurological complications, especially in new-borns, with lifelong consequences. It became well-known after the World Health Organization (WHO) declared the Zika epidemic a Public Health Emergency of International Concern, following the rapid spread of the disease from Latin America in 2016 where several birth defects were associated with Zika infection. More than 85 countries have now reported Zika cases and the disease continues to spread globally. Zika is now part of the WHO list of priority diseases lists for accelerated vaccine research.

Chikungunya fever is a disease caused by CHIKV and it is transmitted to humans through a mosquito bite. It has been identified in over 100 countries in Asia, Africa, Europe, Oceania and the Americas. The disease typically consists of an acute illness characterised by fever, skin rash, muscle aches and severe joint pains (which are often incapacitating), lasting weeks to months or in rare cases, years. CHIKV is listed as priority virus by the UK Vaccine Network and the US National Institute of Allergy and Infectious Diseases. It has also been designated as a serious condition requiring action by the WHO to promote Research and Development to control future outbreaks.

There are currently no available specific treatments or licensed vaccines for any of these 2 diseases. The same type of mosquito is involved in the transmission of ZIKV and CHIKV and strategies tackling the control of the mosquito are extremely difficult to implement. The development of new vaccines is the most cost-effective way to fight Zika and Chikungunya.

The study will enable us to assess the safety of new vaccines called ChAdOx1 Zika and ChAdOx1 Chik and the extent of their immune responses in healthy volunteers. We will do this by giving participants a single dose of either one (Zika) or both vaccines (Zika and Chikungunya), in addition to doing blood tests and collecting information about any symptoms that occur after vaccination. This is the first trial to use this Zika vaccine and the second study to use the Chikungunya vaccine in humans. We plan to recruit a maximum of 48 participants to be vaccinated, where half of them will receive the Zika vaccine only and the other half will receive both vaccines.

What are the vaccines being tested?

The vaccines being tested in this trial are called ChAdOx1 Zika and ChAdOx1 Chik.

Both vaccines consist of a virus (ChAdOx1), which is a weakened version of a chimpanzee adenovirus that has been genetically altered so that it is impossible for it to grow in humans. To this virus we have added genes that make proteins from the either ZIKV or CHIKV, which are essential to the structure of both viruses. By vaccinating with ChAdOx1 Zika and ChAdOx1 Chik, we are hoping to make the body recognise and develop an immune response to these proteins that will neutralise the effects of the CHIKV and ZIKV in human cells and therefore prevent the infection responsible for the disease.

Adenovirus vaccines have previously been trialled in human volunteers, protecting against different diseases. These were not associated with serious side effects. Vaccines made from the ChAdOx1 virus have been given to millions of people to date following government roll-outs of COVID-19 vaccinations, and have been shown to be safe and well tolerated, although they can cause side effects. In very rare cases a serious blood clotting disorder have been seen after the Oxford/AstraZeneca COVID-19 vaccine which is based on the same ChAdOx1 “viral vector” technology (see section *Are there any risks from taking part in the trial?*).

The vaccines will be injected into the muscle around the shoulder region; this is the most commonly used route for vaccination.

Until now, the Zika vaccine has only been tested on laboratory mice and this is the first time that the vaccine will be given to humans. The Chikungunya vaccine has been tested in humans before, but this will be the first time it will be given together with the Zika vaccine. Therefore, the main focus of this study is to determine a safe dose that won't cause unacceptable side effects. For this reason, the doses given to participants will initially be very low. The first person in the study will only have one tenth of the dose that we expect to be tolerated. The dose will then be increased in a step-wise fashion. There might be side effects that we don't yet know about. If any new side effects are identified, from this trial or from animal studies, we will tell you.

Do I have to take part?

No. It is up to you to decide whether or not to take part. Your decision will not result in any penalty, or changes to your standard medical care. If you do decide to take part, you will be given this information sheet to keep (or be sent it electronically) and will be asked to sign a consent form. You are free to withdraw at any time and without giving a reason, but you may be asked to return to the clinic for a safety follow up.

Can I take part?

In order to be involved in the study you must:

- Be a healthy adult aged between 18 and 50 years.

- Be able and willing (in the Investigator's opinion) to comply with all study requirements.
- Allow the Investigators to discuss your medical history with your GP.
- Practice continuous effective contraception for the duration of the study (women only).
- Refrain from blood donation during the course of the study.
- Tell us about any vaccinations you may have received recently or are expected to receive in the near future.

You cannot participate in this study if:

- You have participated in another research study in the last 30 days.
- You are planning to participate in another study at the same time as this study.
- You have previously received an adenoviral vectored or licensed vaccine likely to impact on interpretation of the trial data (e.g. Oxford/AstraZeneca or Janssen COVID-19 vaccines, Zika vaccine or a licensed Dengue vaccine).
- You are due to receive an adenoviral vectored vaccine (e.g. Oxford/AstraZeneca or Janssen COVID-19 vaccines) in the three months *after* the first study vaccination.
- You have received any vaccines ≤ 30 days before involvement in this trial and/or you are planning to receive a vaccine ≤ 30 days after participating in this trial EXCEPT for protein, RNA (or other non-adenovirus based) COVID-19 vaccinations.
- You have had immunoglobulins and/or any blood products (such as a blood transfusion) in the 3 months preceding your involvement in this trial.
- You have any bleeding disorders
- You have problems with your immune system or auto-immune conditions.
- You are pregnant, breast feeding or intend to become pregnant during the study.
- You have a history of a severe allergic reaction to a vaccination.
- You have a history of cancer.
- You have a history of significant neurological disorders
- You have a history of a serious psychiatric condition that may affect participation in the study.
- You have any other serious long-term illnesses requiring hospital follow-up.
- You drink on average more than 42 units of alcohol a week (a pint of beer is 2-3 units, a small glass of wine (125mL) one unit and a shot of spirits (25mL) one unit).
- You have injected drugs at any time in the last 5 years
- You have hepatitis B, hepatitis C or HIV infection.
- You have had prior exposure to Dengue or Zika (and Chikungunya for the co-administration group) or we find that you have antibodies that may impact on interpretation of the trial data
- You have travelled to an area where Zika and/or Dengue viruses (and Chikungunya virus for the co-administration group) infections are known in the past 30 days or if you plan to travel to such areas during the first 6-months of your participation in this study.
- You have ever had a major blood clot (e.g. deep vein thrombosis (DVT), pulmonary embolism (PE), or cerebral venous sinus thrombosis), have ever been diagnosed as having antiphospholipid antibodies, or have ever received unfractionated heparin.

Mild conditions which are well-controlled, would not automatically exclude you from participating. If you are unclear whether you are eligible to be involved in the study you can contact the study team who will be able to advise you.

You must be able to comply with all of the trial requirements and be able to attend all of the follow up visits.

What will happen if I decide to take part?

If you decide you would like to take part in this trial, you will need to attend a screening visit up to 3 months before the vaccination day and it should last for about two hours. The screening visit, the vaccination and all of the post-vaccination follow-up visits will take place at the Centre for Clinical Vaccinology and Tropical Medicine (CCVTM).

At the screening visit you will be met by one of the Investigators who will go through this information sheet with you to ensure you understand what to expect by taking part, the risks involved and what side-effects you might expect to experience. You can of course expect to receive full and comprehensive answers to any questions you may have.

Once you are happy that you understand what the trial involves, and the Investigator is happy that you have understood everything, you will be asked to sign one consent form from which copies are made; one for you to take away and keep, and one for the Investigator which will be kept at the trial site. You will be asked to agree to allow the Investigators to contact your own Doctor (GP) to make sure there are no medical reasons why you should not participate. You will also be asked to agree to being registered on the confidential TOPS (The Over-Volunteering Prevention System) database which is set up to prevent people entering into multiple studies or trials at the same time.

Once you have signed the appropriate forms, the Investigator will go through a few questions for administrative purposes and detailed questions related to your health. This will be followed by a brief medical examination. Your blood pressure, pulse and temperature will also be recorded.

A number of blood tests will also be carried out which include tests for anaemia, tests to see how your liver and kidneys are functioning and tests to see if you have been exposed to HIV (the virus that leads to AIDS), Hepatitis B or Hepatitis C (viruses which affect the liver). In the event of you testing positive to any of these infections, we would inform you of the result and, with your permission, offer referral for medical review, confirmation of the result, and treatment if necessary. We may have to do an additional test at this stage to see if you have also been exposed to Dengue, Zika (Chikungunya if you are receiving both vaccines) or any related viruses in the past, based on your medical and/or travel history. You will also be asked to provide a urine sample to check for glucose (to exclude diabetes), protein and blood (which can indicate kidney disease). Women will also have a urine pregnancy test performed.

Sometimes minor abnormalities can be found with the blood tests. In this situation you may be asked to return for a repeat blood test so that it can be checked again. If the test results are still abnormal you may not be able to participate and we will ask your permission to contact your GP or a specialist doctor, whichever is the most appropriate, to ensure the abnormality will be followed up.

Once all your test results have been checked and there are no problems, you will be contacted to arrange a date to start the trial.

Length of research

If you decide to take part in this study, you will be involved in the trial for a minimum of 6 months, with the option to continue for up to 1 year.

Considerations before taking part in this study

Blood Donation: Under current UK regulations, participants will not be able to donate blood during the course of the study.

Private Insurance: If you have private medical or travel insurance you are advised to contact your insurance company before participating in this trial, as involvement may affect the cover provided.

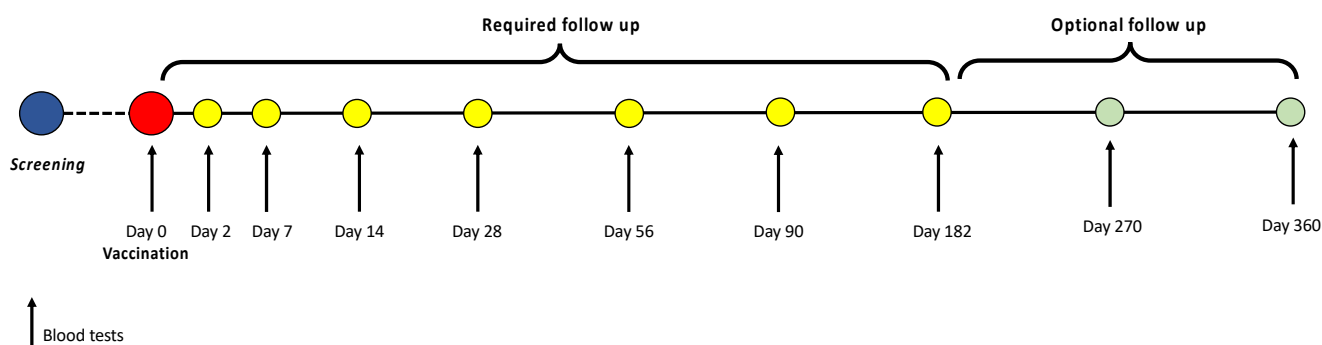
Contraception: It is currently unknown whether the vaccine being tested is safe during pregnancy. For this reason, it is important that all women use adequate contraception throughout the trial period, i.e. approximately 6 months (or 12 months if taking part in the optional follow up). This will be discussed with you at the screening visit. If you were to become pregnant during the trial you must tell us immediately and you will be withdrawn from the study, although we will ask to follow you up for safety reasons. Male participants with female partners are not required to use barrier methods for the purposes of contraception, as the risks of vaccine excretion are negligible.

How is the trial going to work?

For this trial we plan to recruit a maximum of 48 people. Volunteers will be allocated into 6 different groups of 6-9 participants each. Each volunteer will receive only a single dose of the Zika vaccine alone (groups 1-3) or in combination with the Chikungunya vaccine (groups 4-6). We will start with a small group of people who will receive a very low dose of the Zika vaccine alone. Provided the very low dose is well tolerated, we will repeat this procedure at increasingly higher doses until 3 different doses of the Zika vaccine are tested. We will not “re-use” volunteers – i.e. when you’ve had your prescribed dose of the vaccine then you won’t get a second higher dose. We will use a similar procedure for the participants receiving both the Zika and Chikungunya vaccines, but we will only start doing this after we have given the Zika vaccine alone to the first few participants. The Chikungunya vaccine has been tested before and we will use the data obtained from a previous study to inform the doses of the Chikungunya vaccine we are giving in this trial together with the Zika vaccine.

If you qualify to be in the trial, you will be asked to attend in the morning on the vaccination day (Day 0). You will be asked a few questions to check there have been no new problems since screening. Your blood pressure, pulse and temperature (observations) will be checked and blood samples taken. All women will have a urinary pregnancy test before vaccination.

The vaccine will then be given by injection into your arm (or both arms if you are receiving 2 vaccines) and the vaccine site will be covered with a dressing. We will need to keep an eye on you in the waiting room of the department for 1 hour after the vaccine. After this period, observations will be checked again and the injection site inspected. You will then be given a thermometer, tape measure and an E-diary account (or paper diaries to be used as a back-up) to record all your symptoms and your temperature every day for 7 days after vaccination. After these 7 days we will ask you to record if you feel unwell or take any medications over the next 3 weeks. Overall the vaccination visit will take about two and a half hours.



You will be asked to attend for a series of follow-up visits (lasting 15-30 minutes) as detailed in the diagram above.

The volunteers will come for a short visit two days after vaccination to ensure everything is fine, to check their symptoms, the injection site and to have blood tests done. A similar format will be followed for the visit taking place one week after vaccination.

There will be further follow-up visits as in the diagram above. At 14 days and 4, 8, 12 and 26 weeks after vaccination we will check your observations, take a blood sample, and review your completed E-diary. If you agree, there will be two additional follow-up visits at 9 and 12 months after vaccination. These last two visits are optional and will only take place if the investigators consider they are required and possible.

During the course of the trial you may be asked to attend for an extra visit, for example, if a blood test needs to be repeated. You will be compensated for the time and inconvenience of any extra visits. After the last visit, trial participation is complete.

We may ask to photograph your vaccination site(s) and you can choose whether or not to agree to this when you sign the consent form. You will not be identifiable in these photographs, as only the vaccination site and your unique trial number will be visible. These photographs may be shown to other professional staff, used for educational purposes, or included in a scientific publication.

What should I avoid during the trial?

You should not donate blood during the trial or take part in other studies that involve blood sampling or the administration of drugs or vaccines. If during the trial you require any vaccinations for health, travel, or occupational reasons, you should inform the Investigators beforehand. We will discuss with you the most appropriate time to receive them. However, certain specific vaccines would potentially interfere with the results of the study and will not be able to receive them whilst taking part in this trial (e.g. Yellow Fever, Japanese Encephalitis, Tick Borne Encephalitis and Dengue vaccines).

You will not be able to take part in the study if you have any travel plans (in the first 6 months) to an area where known Dengue and Zika infections have been recorded (and Chikungunya if you are allocated to groups 4-6). We would like to ask you to let the trial team know if there are any changes to your travel plans whilst you are taking part in the study, as this could impact the trial results. We will discuss your travel plan in detail at your screening visit.

Are there any risks from taking part in the trial?

The risks and side effects of the proposed vaccinations and trial procedures are detailed here:

1. Blood samples

Drawing blood may cause slight pain and occasionally bruising at the site where the needle enters. Rarely, people feel light-headed or even faint. During the course of the trial we will need to take up to 90mL of blood (approximately 6 tablespoons) at a single visit. The total amount we will take over the period of the trial is approximately 400mL which is less than the amount taken if you donate blood, or 540mL if you are in groups 4-6. If you decide to attend the 2 additional visits, we will take an additional 100mL if you are in groups 1-3 or an additional 140 mL if you are in groups 4-6.

The following blood tests will be performed;

- Tests for Hepatitis B, Hepatitis C and HIV are done at the screening visit.
- Tests for antibodies against Dengue, Chikungunya and Zika or related viruses
- HLA typing, a test of a component of the body's immune system may be done at the first vaccination visit.
- Tests of red and white blood cells, liver and kidney function are done at the screening visit and most of the other visits (including the vaccination day), in order to check the vaccines are safe.
- Tests of the immune responses to vaccines are done at most of the visits.
- The volume of blood taken at each visit ranges from 5 to approximately 90mL.

The blood samples we collect will be stored after testing, and may be used in future research. Samples will be de-identified and you can request that your samples are destroyed at any time. You will be asked to consent specifically for blood to be stored.

If abnormal results or undiagnosed conditions are found in the course of the study these will be discussed with you and, if you agree, your GP (or a hospital specialist, if more appropriate) will be informed. Any newly diagnosed conditions will be looked after within the NHS.

2. Vaccination Side Effects

It is likely that you will experience some symptoms at the vaccination site as well as general symptoms due to vaccination. It is important to remember these are vaccines in the early stage of development and the amount of safety data available is limited. For this reason, there is a chance you could experience a side effect that is more severe than what is described below, or that has not been seen before.

Although the vaccines are being tested for either the first or second time, other ChAdOx1 viral vector vaccines have previously been administered in many other clinical trials. We can predict from past experience what the symptoms should be like with this new vaccine. We expect that symptoms will be mild in strength most of the time, although symptoms may also be moderate or severe. All symptoms should resolve completely within a few days. The chimpanzee adenovirus has been weakened so that it cannot grow in human cells. The ZIKV or CHIKV proteins it carries cannot cause Zika or Chikungunya disease.

a) Local Reactions

You may experience some discomfort at the injection site as the vaccination is given. This usually gets better in 5 minutes. Later, you might experience pain resulting in some difficulty moving your arm, but this should resolve within a few days. In addition to pain, you may experience redness, swelling, itchiness or warmth at the injection site.

b) General reactions

During the first 24-48 hours after vaccination you may experience flu-like symptoms such as muscle aches, joint aches, feverishness, chills, headache, nausea, tiredness and/or feeling generally unwell. These symptoms should usually resolve within a few days.

c) Serious Reactions

With any vaccination there is a risk of rare serious adverse events, such as an allergic reaction. These may be related to the immune system or to the nervous system. Severe allergic reactions to vaccines (anaphylaxis) are rare, but can be fatal. In case of this unlikely event, medication for treating allergic reactions is kept in the clinic room and the investigators are appropriately trained in the management of anaphylaxis. Reactions in the nervous system are also extremely rare, but can cause an illness called Guillain-Barré syndrome (GBS). This is a condition in which people can develop severe weakness and can be fatal. These adverse events have not previously been seen following administration of similar vaccines using ChAdOx1 as a viral vector.

We know that Zika infection is associated with an increased risk of GBS but it is currently unknown if vaccines based on some of Zika virus components would lead to a greater risk than that expected for any given vaccine (1 in 100,000 to 1 in 1,000,000 vaccine doses).

Zika antibodies induced by vaccination or natural infection can potentially cross-react with other virus from the same family and there is a theoretical risk this cross-reactivity could lead to worsening of certain diseases, most importantly Dengue.

With any new medicine or vaccine there is always a possibility of an unexpected side effect. You will be provided with a 24h study mobile number. If you experience unexpected events or become in any way concerned you can use this to contact one of the study doctors at any time. We will ask you to record these symptoms too.

d) Other potential very rare severe reactions

The ChAdOx1 part of the vaccine (the “viral vector” or “backbone”) is the same as has been used in a recently developed COVID-19 vaccine (ChAdOx1 nCoV-19 - commonly known as the Oxford/AstraZeneca vaccine or Vaxzevria). In the Spring of 2021, some countries that were using this vaccine for their national COVID-19 immunisation programmes temporarily paused the use of the vaccine due to concerns that rare blood clotting conditions could be associated with the vaccine. Following these reports, a review has been undertaken by the

MHRA (Medicines and Healthcare products Regulatory Agency) and the EMA (European Medicines Agency). The reports were of a very rare type of blood clot in the brain, known as cerebral venous sinus thrombosis (CVST), and also of clots in some other organs together with low levels of platelets (thrombocytopenia). Platelets are blood cells that (alongside clotting factors) stop bleeding when needed by making the blood cells clot. Low level of platelets can increase the risk of bleeding and bruising.

Up to 14th April 2021 there have been 168 UK reports of these blood clots and unfortunately 32 people have died. By 31 March 2021 21.2 million first doses of the ChAdOx1 nCoV-19 vaccine had been given in the UK. This means the overall risk of these blood clots is extremely rare, occurring following less than 1 in 100,000 vaccinations.

After investigation, the UK Medicines Healthcare Regulatory Agency concluded there was evidence of a link between these cases and the Oxford/AstraZeneca COVID-19 vaccine although more work was needed to establish this. The MHRA statement on this can be found here: <https://www.gov.uk/government/news/mhra-issues-new-advice-concluding-a-possible-link-between-covid-19-vaccine-astrazeneca-and-extremely-rare-unlikely-to-occur-blood-clots>.

The European Medicines Agency concluded that unusual blood clots with low blood platelets should be listed as very rare side effects of this vaccine. The same rare blood clotting problems have also been reported after the Janssen COVID-19 vaccine, which is another adenovirus based vaccine, and the European Medicines Agency have concluded that a link with the vaccination is likely.

Both agencies concluded that there wasn't enough evidence at present to say what the risk factors (e.g. age, gender, or other medical conditions) might be for having one of these rare clotting problems.

We don't yet know whether these rare clotting problems might be related to the vaccine vector virus (ChAdOx1), or to the SARS-CoV-2 part of the vaccine (the spike protein). The ChAdOx1 vector has been used in other clinical trials since 2012 (influenza, tuberculosis, prostate cancer, malaria, meningitis B, chikungunya and HIV vaccine trials). These rare blood clotting problems have not been seen in participants in these trial, however the number of people in these trials has been relatively small. Additionally, two adenovirus vaccines are approved in the USA for use in US military personnel and have been administered to at least 1.3 million individuals over the last 10 years, with no similar blood clotting problems reported to regulators with those vaccines.

These events remain extremely rare, and all medical regulators are collecting and analysing further data on them.

We would advise you to be particularly alert to the following symptoms in the first 28 days after you have a trial vaccine:

- Sudden severe headache that does not improve with usual pain killers or is getting worse
- An unusual headache which seems worse when lying down or bending over, or may be accompanied by blurred vision, nausea and vomiting, difficulty with speech, weakness, drowsiness or seizures
- New and unexplained pinprick bruising or bleeding
- Shortness of breath, chest pain, leg swelling or persistent abdominal pain

You will be provided with a 24h study mobile number. If you experience any of the above events or become in any way concerned you can use this to contact one of the study doctors at any time. We will ask you to record these symptoms in the e-Diary too.

If any new information, or any other new safety concern, arises during the trial in relation to ChAdOx1, this would be reviewed, and you would be kept fully updated.

Potential interaction with other adenoviral vectored vaccines

The 'vector' (ChAdOx1), the backbone of the vaccine, used in the ChAdOx1 Zika and ChAdOx1 Chik experimental vaccines is the same as the one used in the Oxford/AstraZeneca and similar to the one used in the Janssen (Johnson and Johnson) COVID-19 vaccines. There is a theoretical risk that receiving the experimental ChAdOx1 Zika and ChAdOx1 Chik vaccines may reduce the benefit of subsequent administrations of certain vaccines such as the Janssen (Johnson & Johnson) or the AstraZeneca COVID-19 vaccines. This may be more likely to happen if the vaccines are given at short intervals. The immune response to the AstraZeneca COVID-19 vaccine was not affected in those who received another experimental ChAdOx1 vectored vaccine (similar to the one used in this study) one year earlier. Other studies suggest that an interval of three months between administrations of two adenoviral vectored vaccines reduces the risk of this interference. For this reason, we advise participants to wait at least three months after receiving the ChAdOx1 Zika and ChAdOx1 Chik vaccines before receiving the AstraZeneca or Janssen COVID-19 vaccines. We are not suggesting participants should delay their NHS COVID-19 vaccination offer, but we will plan enrolment according to when the deployed vaccine is due. No such interference will be expected with mRNA or protein vaccines (such as Moderna, Pfizer, Novavax) and these can be given at least 2 weeks before or after each study vaccine. You should tell your study doctor about any vaccines that you received in the last 3 months, and if you plan to receive a vaccine during the study.

What are the advantages of taking part?

You will not necessarily gain any direct benefit from the trial, but the information gained from the study might help to develop an effective vaccine against ZIKV and CHIKV. If in the future you become exposed to Zika or Chikungunya, you should not assume that the experimental vaccines you received in this study will give you any protection against ZIKV or CHIKV.

Will I be paid for taking part in this trial?

You will be compensated for your time, the inconvenience of having blood tests and procedures, and your travel expenses. The total amount compensated will be approximately **£415** depending on the exact number of visits and whether any repeat or additional visits are necessary. If you choose to opt in to the two additional visits you will be compensated a further **£90**.

Trial reimbursement will be made by bank transfer within six weeks of your completion of the trial, so please bring your bank details with you to your screening visit (no cash payments can be made). Should you decide to withdraw from the trial before it is completed, payment will be *pro rata* (you will receive a proportion of the total amount).

PART 2

What if new information becomes available?

Sometimes during the course of a trial, new information relevant to the trial becomes available. If this happens, we will tell you about it and discuss whether you want to, or should, continue in the study. If you decide to continue to take part, you will be asked to sign an updated consent form. On receiving new information, we may consider it to be in your best interests to withdraw you from the study. Your participation in this study may also be stopped at any time by the study doctor or the Sponsor for other reasons.

What will happen if I don't want to carry on with the trial?

If, at any time after agreeing to participate, you change your mind about being involved with this study you are free to withdraw without giving a reason. If you withdraw we would not usually perform any more research procedures, although occasionally we might need to offer you a follow up visit for safety purposes, for example to check the injection site or a blood result. Your decision will not result in any penalty. Unless you state otherwise, any blood taken whilst you have been in the study will continue to be stored and used for research as detailed above. You are free to request that your blood samples are destroyed at any time during or after the study. If you choose to withdraw from the trial, your standard medical care will not be affected.

What if something goes wrong?

The investigators recognise the important contribution that volunteers make to medical research, and make every effort to ensure your safety and well-being. The University of Oxford, as the research Sponsor, has arrangements in place in the unlikely event that you suffer any harm as a direct consequence of your participation in this trial.

In the event of harm being suffered, while the Sponsor will cooperate with any claim, you may wish to seek independent legal advice to ensure that you are properly represented in pursuing any complaint. The study doctor can advise you of further action and refer you to a doctor within the NHS for treatment, if necessary. NHS indemnity operates in respect of the clinical treatment which may be provided if you needed to be admitted to hospital.

Complaints statement

If you wish to complain about any aspect of the way in which you have been approached or treated during the course of this study, you should contact the research investigators who will do their best to address your concerns by sending us an email to vaccinetrials@ndm.ox.ac.uk. Alternatively, you may contact the University of Oxford Clinical Trials and Research Governance (CTRG) office on 01865 616480 or the head of CTRG, email ctrng@admin.ox.ac.uk

Would my taking part in this trial be kept confidential?

All information that is collected about you during the course of the research will be coded with a study number and kept confidential. The information is available to the trial team, authorised collaborators, ethical review committees, Oxford University Hospitals NHS Trust, government regulatory agencies and the Sponsor (University of Oxford), who can ask to assess the trial data. Responsible independent monitors may be given access to data for monitoring and/or audit of the trial to ensure we are complying with regulations. They are bound by the same confidentiality rules. Any information about you that leaves the hospital/clinic will have your name and address removed so that you cannot be recognised from it.

Every effort will be taken to maintain confidentiality. Information about you may be stored electronically on a secure server, and paper notes will be kept in a key-locked filing cabinet at the CCVTM – Churchill Hospital, University of Oxford. Trial results will be published in a scientific journal but nothing that could identify you will be included in any report or publication.

What will happen to my data?

We will be using information from you and your medical records in order to undertake this study. Research is a task that we perform in the public interest. The University of Oxford, as sponsor, is the data controller. This means that we, as University of Oxford researchers, are responsible for looking after your information and using it properly. We will use the minimum personally-identifiable information possible. We will keep identifiable information about you such as contact details for a minimum of 5 years after the study has finished. The need to store this information for longer in relation to licensing of the vaccine will be subject to ongoing review. For effective vaccines that may be licensed, we may store research data securely at the University of Oxford for at least 15 years after the end of the study, subject to adjustments in clinical trials regulations. In addition to the de-identified scientific data, we will also store documents containing personal information that you provide when registering for the trial (including contact details), medical information and signed consent forms during this archiving period.

The study team will use your name and contact details, to contact you about the research study, and make sure that relevant information about the study is recorded for your care, in relation to your health during the study and to oversee the quality of the study. At the completion of the study, unless you consent otherwise (e.g. if you request to be informed of other trials), your personal details will not be used to contact you other than exceptional circumstances concerning your safety. If you consent to take part in another study carried out by the Jenner Institute, personal information and medical information including blood test results may be accessed to avoid unnecessary repetition.

Your bank details will be stored for 7 years in line with university financial policy.

Your rights to access, change, or move your personal information may be limited, as we need to manage your information in specific ways in order for the research to be reliable and accurate. Further information about your rights with respect to your personal data is available at:

<http://www.admin.ox.ac.uk/councilsec/compliance/gdpr/individualrights/>

Taking part in future vaccine related research

With your consent, we would like to keep your contact details after your participation in this study is complete, so we may inform you of opportunities to participate in future vaccine related research. This is entirely optional and your participation in this study will not be affected by your decision to allow or not allow storage of your contact details beyond your participation in this trial.

Your details will be stored electronically on a secure server and only authorised individuals at the CCVTM will have access to it. We will not, under any circumstances, share your contact details with any third party institutions without your permission. Being contacted does not oblige you to agree to take part in future research and you can ask us to have your contact details removed from our database at any time.

Involvement of the General Practitioner/Family doctor (GP)

In order to enrol into this study, you will be required to sign a form documenting that you consent for us to contact your GP. This is to inform them that you are interested in being involved in the study, and to check there are no medical reasons that they are aware of that would make your participation inadvisable. Your GP may be asked to share information about your medical history and give access to any other medical records as required. The researchers will not enrol you in the trial if your GP has relevant concerns about your eligibility or

safety. We will write to your GP to let them about your enrolment and study completion status, so they can update your medical records accordingly.

Prevention of 'Over Volunteering'

Volunteers participating in this study must not be concurrently receiving investigational medications or vaccines in another study at the same time. In order to check this, you will be asked to provide your National Insurance or Passport number. This will be entered on to a national database which helps prevent volunteers from taking part in too many clinical trials. More information can be found at www.tops.org.uk. Your national insurance or passport number is also required to allow processing of compensation payments.

What will happen to any samples I give?

If you consent, some of your leftover blood samples will be stored indefinitely at the Oxford Vaccine Centre Biobank and may be used for further studies of the human body's immune response and/or the vaccines used in this study, and/or your safety. Any such tests will have an appropriate ethical review. Upon your request at any time, your remaining blood samples will be destroyed. Your participation in this study will not be affected by your decision whether to allow storage and future use of your leftover samples. More information around the procedures for long term storage of your samples is available in the Oxford Vaccine Centre Biobank information booklet and you will be asked to sign a separate consent form if you agree to have your samples stored for future use in ethically approved research.

To avoid repeat testing, if you are not enrolled into this study and you apply to enter another study conducted by the Jenner Clinical Vaccine Trials Group based at the CCVTM, the results from your screening visit blood tests may be used to determine whether you are eligible for the trial you applied for.

Your study visit blood tests will be analysed in the hospital laboratories and Oxford University research laboratories. Other blood tests to look at the response of your body to the vaccine may be done with collaborating laboratories in the UK and in other countries. You can choose whether or not to allow the transfer of your samples to collaborating institutions and any samples or data sent to them would be anonymous.

Will any genetic tests be done?

We may do genetic tests on your blood samples to look at the patterns of genes that regulate your own individual immune response (these are called Human Leukocyte Antigen genes). Doing this helps us to work out which aspects of the immune response to vaccines are due to genetic differences between individuals. We may also look at the expression of certain genes which relate specifically to the immune response to CHIKV, ZIKV and related viruses, but no genetic tests concerning diseases or conditions other than CHIKV, ZIKV and other related viruses. You can opt out of 'genetic tests' if you wish, without any effect on your participation in the trial.

What will happen to the results of the research study?

The results of this research study may be presented at scientific meetings or conferences and published in a scientific medical journal. This may not happen until 1 or 2 years after the study is completed. If you contact the researchers in the future, you can obtain a copy of the results. You will not be identified in any report or publication.

The de-identified data from this study will be shared with the collaborating partners who are organising and funding this research work. Data from this study may be used to file patents, licence vaccines in the future or make profits in other ways. You will not be paid for any part of this. Data from this study may be used as part of a student post-graduate degree, for example a MD or PhD.

Who is sponsoring, organising and funding the research?

The study is organised and sponsored by the University of Oxford. The study is funded through financial support to Oxford University from Innovate UK and the UK Department of Health & Social Care. Neither your GP nor the researchers are paid for recruiting you into this study.

Who has reviewed the study?

This research has been looked at by an independent group of people, called a Research Ethics Committee, to protect participants' interests. This study has been reviewed and given favourable opinion by Oxford A Research Ethics Committee.

The Medicines and Healthcare products Regulatory Agency (MHRA), which regulates the use of all medicines in the UK, has reviewed the study design and has granted permission to use this unlicensed vaccine in this clinical study.

Further information and contact details

We hope this information sheet has answered all of your questions. If you would like further information about participating in research please visit the following website: <http://www.nhs.uk/conditions/Clinical-trials/Pages/Introduction.aspx>. For independent advice about participating in this trial you may wish to contact your GP. If you would like to speak to one of our team members to discuss any aspect of this trial or **if you are interested in taking part in the study, please contact us:**

Recruitment Coordinator
Centre for Clinical Vaccinology & Tropical Medicine
Churchill Hospital, Old Road, Headington, Oxford, OX3 7LE
Telephone: **01865 611424**
Email: vaccinetrials@ndm.ox.ac.uk