

Aspirin Dosing: A Patient-Centric Trial Assessing Benefits and Long-term Effectiveness (ADAPTABLE)

We are asking you to join a research study called ADAPTABLE. The information below explains the study so you can decide if you want to take part or not. Please read it carefully and take all the time you need to decide. Feel free to talk it over with your family, friends, and doctor. If there is anything you do not understand, be sure to ask questions.

WHY IS THIS STUDY BEING DONE?

For more than 40 years, doctors have been telling patients with heart disease to take aspirin. For these patients, taking aspirin every day can lower the risk of heart attacks and strokes.

Millions of Americans who have heart disease already take either regular (325 mg) or low-dose (81 mg) aspirin. Many studies have shown that both doses work and both are generally safe. The most common side effect of aspirin is an upset stomach. Aspirin can also make you bleed more easily. In rare cases (about 5 in 1,000 people), it can cause dangerous bleeding in the stomach, brain, or other places.

Even though both doses of aspirin are widely used, no one knows which is better. Regular aspirin has a higher risk of bleeding than low-dose aspirin. But no one knows if low-dose aspirin is both safer and works just as well as regular aspirin to prevent heart and blood vessel problems.

The goal of ADAPTABLE is to try to find out which dose of aspirin is better for patients like you who have heart disease. Patients who join this study will take either low-dose or regular aspirin every day. That way, we can learn which is better in terms of reducing the risk of heart attacks, strokes, bleeding, and death.

We expect 20,000 patients with heart disease from across the U.S. will take part in ADAPTABLE.

WHO IS DOING THIS STUDY?

The Patient-Centered Outcomes Research Institute (PCORI) is funding this study. The Duke Clinical Research Institute (DCRI) is leading the study, which will be carried out by the Patient-Centered Outcomes Research Network (PCORnet). PCORnet is a unique partnership among patients, clinicians, and health systems. Their goal is to change how research is done so that the focus on research is on the needs of patients like you.

The study directors at Duke are Dr. Adrian Hernandez and Dr. Matthew Roe. The place you get health care is participating in this study.

WHAT WILL YOU ASK ME TO DO?

If you agree to join ADAPTABLE, here is what will happen:

1. We will ask a few questions to make sure you are a good fit for this study. You cannot take part in this study if you have had problems taking aspirin in the past or take certain blood thinner medicines. You also cannot take part if you are pregnant, trying to become pregnant, or nursing. If you are sexually active and could get pregnant, you should use birth-control during the study. If you do get pregnant, let your doctor know right away.
2. We will ask a few things about you and your health. We will ask things like your birth date, sex, and race. We will also ask about other medicines you take, and how your health and well-being affect your daily life.

We will ask for your contact information so we can keep in touch during the study. We will also ask for contact information for a friend or relative. We will call them to see how you are doing if we cannot reach you. In the rare event that we lose contact with you during the study, we may use a patient locator service to help us find you.

3. The computer will assign you to take either regular aspirin or low-dose aspirin. Neither you nor your doctor will choose which dose of aspirin you will take. Rather, the computer will assign one or the other randomly. This means every patient has a fair and equal chance of getting either dose of aspirin.

The reason to use chance, rather than choice, to assign the dose of aspirin you will take is because no one knows which is better for patients like you. Assigning patients randomly helps make sure that the group that takes each dose is about the same. That way, at the end of the study, we can be pretty sure that any differences in health are because of the dose of aspirin—not because the groups were different from the start.

4. You will need to buy the assigned dose of aspirin and take it daily. It is important for the study that you take the dose of aspirin the computer assigns. If you already take aspirin, you may be assigned a dose that is different from what you take now. If so, you will need to stop your current dose and take the one the computer assigns.
5. We will ask you to fill out some short surveys. These will ask about any major things that have happened with your health, how you are getting along in daily life, and what medicines you are taking. You will fill them out on the Web and it should take about 15 minutes. The surveys will take place every 3 to 6 months for as long as you are in the study. If you miss a few surveys, the DCRI Call Center will call to see how you are doing.
6. We will get some information from other places from time to time as long as you are in the study. Taking part in ADAPTABLE does not require any special study visits or trips to your doctor. But to be sure we get a complete picture of your health:
 - We will get certain information from your medical records. Examples include additional information about your health problems, health care visits, hospital stays, medical procedures, and lab results. In some cases, we might need you to sign a form saying it is okay for us to get the information we need for the study.
 - We will ask for the last 4 digits of your Social Security number and health insurance ID numbers. We need these to check other sources (such as health insurance claims) for information about your health.

WHAT WILL YOU DO WITH MY INFORMATION?

We will store all the information collected for ADAPTABLE in a secure database at the DCRI. Your name and other information that directly identifies you will be removed and stored separately from your health information (see “What About My Privacy?”). Researchers will study the information from all the patients who take part to learn more about aspirin, heart disease, and human health. The results of this study will be available to you once the study is completed.

HOW LONG WILL I BE IN THE STUDY?

We will ask you to take your assigned dose of aspirin every day for about 3 years. We will also collect information from you and your records for about 3 years. There is no limit on the length of time we will store your information. We will keep letting researchers use it to learn more about heart disease and human health, unless you ask us to stop.

WHAT ARE THE PHYSICAL RISKS?

Even though doctors do not know which dose of aspirin is better, they agree that between 75-325 mg daily is a good idea for most patients with heart disease. The two doses we will compare—low-dose (81 mg) and regular (325 mg) aspirin—are both widely recommended by doctors today.

There are no extra risks from taking aspirin as part of this study compared to taking aspirin as part of your usual care. The main differences are:

- In this study, the computer will assign which dose of aspirin you will take every day
- If you already take aspirin as part of your usual care, you might be assigned to take a different dose (higher or lower) than the one you take now

There will be no other changes to your medical care based on being in the study. If you have side effects or other concerns during the study, you and your doctor are free to decide that you should take a different dose of aspirin or stop taking it altogether.

If you have any questions or concerns about starting aspirin or changing your dose, be sure to talk to your doctor.

WHAT ABOUT MY PRIVACY?

There is a risk that someone could get access to study information we have stored about you, and maybe misuse it. We think the chance of this is very small, but we cannot make guarantees. Your privacy is very important to us. Here are just a few of the steps we will take to protect it:

- We will have your name so we can reach you in the event you forget to complete a survey. But when we put all the study information into the research database, we will remove your name and other identifiers, such as social security information. We will replace these with a code number. There will be a master list linking the code numbers to names, but we will keep it separate and secure. However, your fully identified personal information will remain in a database maintained by third-party vendors and Duke until the study is completed.

- We will store study information on computers with controls to protect data confidentiality. We will limit and keep track of who sees the information.
- Researchers who study information from the database will not know who you are. The information they get will only have the code number, not your name.

Officials working for and with Duke University, PCORnet, the place you get healthcare, or the federal government may review study records to make sure we are doing things the right way. A reviewer who looks at your study record may also need to look at your medical record. Once your information is shared outside the ADAPTABLE team, it may no longer be protected by patient privacy rules (called 'HIPAA'). However, it will still be protected by other privacy rules and agreements.

ARE THERE ANY BENEFITS?

You will not get direct benefit from taking part in this study. The main reason you may want to join is to help researchers learn about which dose of aspirin is better for people with heart disease. The results might benefit patients like you in the future.

We will provide general news and updates about ADAPTABLE from time to time. You can also get information about this study at www.clinicaltrials.gov.

ARE THERE ANY COSTS OR PAYMENTS?

If you decide to take part, we will give you \$25 as a thank you for your time. The study will not provide or pay for the aspirin you will take. However, aspirin is low cost and you can get it at any drugstore or grocery store. You do not need a prescription.

WHAT IF I CHANGE MY MIND?

Taking part in ADAPTABLE is your choice. You can choose to join or not. No matter what you decide, now or in the future, it will not affect your usual medical care.

If you decide to join ADAPTABLE, you can change your mind at any time. We will tell you if we learn anything new that might change your mind about being in the study. If you change your mind, you must let us know in writing. Our contact information is at the end of this form.

Unless you let us know you want to stop taking part, you will still be in this study even if:

- You and your doctor decide that you should take a different dose of aspirin or stop taking it. We will still ask you to fill out the surveys and collect information about you.
- We lose contact with you. We will keep using your medical record and other information sources to see how you are doing.