

[View this email in your browser](#)

REPRIEVE

Randomized Trial to Prevent Vascular Events in HIV



Use the REPRIEVE Key Messages & Talking Points

While re-consenting participants for REPRIEVE, it is important to remind them of the big picture and the part that each participant plays in it. To help make the case for why REPRIEVE matters, we have compiled key messages into one document – *"REPRIEVE Talking Points to Address Additional Follow Up"* – you may find these talking points helpful when re-consenting participants to explain the latest changes to the informed consent. [Click here](#) or visit the PSWP to access this helpful resource!

This document has been approved by the IRB for the REPRIEVE CCC, please submit according to your local requirements.

Update from June DSMB Meeting!

REPRIEVE Leadership is excited to share the great news that the DSMB recommended continuation of the main study and substudies, and there were no safety concerns. We will distribute the formal DSMB memo once we receive it.

Thank you for all your hard work to help us prepare for the meeting!



Thank you to all who were able to join us at the REPRIEVE Session at this year's annual ACTG Meeting! This hour-long session highlighted the achievements of REPRIEVE to date, updates on REPRIEVE substudies, PREPARE and Kidney, and a keynote presentation by Dr. Felipe Sierra, Director of the Division of Aging and Biology, National Institute on Aging, NIH.

For site teams outside of the ACTG, [click here](#) to view the complete slide deck. We will also be reviewing some of the important information shared at the meeting on the next monthly site call!

Helpful Tips to Ensure Forms are Complete in OpenClinica

If you are unable to obtain all required data for a visit due to remote or other contact (i.e. phone conversation), you still need to key the forms in OpenClinica in order for a visit to be complete. This will ensure that all visits for which you have collected data are complete. See guidance below (purple font) provided by the REPRIEVE Data Management team for completing forms.

SSW0037 - Myalgia Symptom Assessment 1.01

SECTION...(0/4) SECTION...(0/2) -- Select to Jump --

Title: SECTION A

Instructions:

- This questionnaire should be completed by study staff based on an interview with the subject

1. Date of visit: **Enter the visit date**

2. Was this questionnaire completed? (select one) * **Select NO →**

If Yes, continue to Section B
If No, complete Question 2a and STOP - Form Complete

a. If No, indicate the reason not completed: (select one) **Select "Subject missed visit"**

If Other, Specify: *

If forms are keyed in this way, the form can be completed and the visit will not be

marked as incomplete in OpenClinica.

Introducing Kris Zhai, new Project Manager for the DCC!



Kris just joined the Data Coordinating Center (DCC), replacing Devvora Olalere. She manages and oversees trial operations, imaging, and non-imaging data management, QA/QC, clinical trials documentation, as well as clinical trial regulatory components, including IRB continuing reviews and protocol amendments. Kris assists in managing all aspects of the REPRIEVE DCC and serves as primary liaison for the principal investigators, biostatisticians, clinical research sites, and Clinical Events Committee (CEC). Outside of work, Kris enjoys hiking and skiing.

For any questions regarding data transfer and coordination, please don't hesitate to contact Kris at: bkzhai@mgh.harvard.edu or MGHReprive@partners.org.

Announcement Regarding A5333s Protocol Version 5.0

DAIDS does not require a Protocol Signature Page (PSP) for A5333s Version 5. However per the DAIDS Protocol Registration Manual, submission of the Amendment for substudies (A5333s) is required and is independent from the submission for the main study (A5332). See Section VI Protocol Registration Submissions, Subsection C Substudy Registration. [Click here](#) to see manual.



We need your REPRIEVE Team Photo!

We are in the process of updating the REPRIEVE website and would like REPRIEVE team photos for eventual placement on the website. Please email a photo of your team to reprive.news@fstrf.org. And thank you to sites that have already submitted a photo!



Chronic Viral Illness Service
(CRS 31885), Hospital Royal
Victoria, Montreal, Canada



FAMCRU CRS (CRS 8950),
Tygerberg Hospital, Tygerberg,
Western Cape Province, South
Africa

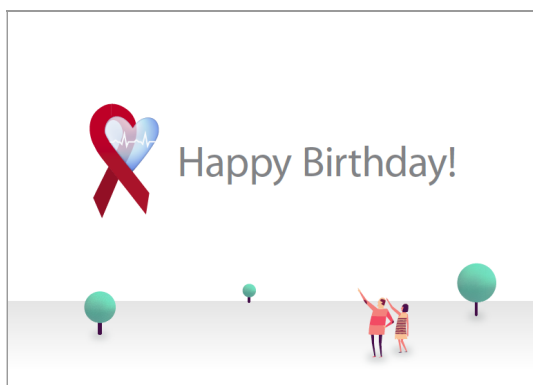


DAIDS Delegation of Duties Log FAQs and Implementation Update!

The Division of AIDS (DAIDS) Delegation of Duties Log (DOD) Frequently Asked Questions (FAQs) is finalized and are now available online, [click here](#) to access!

Also, please note the implementation timeline for the DOD Log has been extended to **14 August 2019**.

Retention Tools are Available!



REPRIEVE Retention Champions shared with us that *pens, participant newsletters, thank you cards, and birthday cards (above)* are helpful tools to promote retention. The REPRIEVE CCC has developed these REPRIEVE-branded tools which are *available to all sites (for free!)*. Some sites have begun handing these out to participants and they have been very well received!

If you would like to request some tokens of appreciation for your participants, please email Emma Kileel at ekileel@mgh.harvard.edu.



Save the Date!

Tuesday, July, 16th 2019

1:00 – 2:00 PM ET

For the next Monthly Site Call!

If you missed the May monthly site call, click
here to download slides.

REPRIEVE (A5332): Are you up to date?

For A5332 please use:

Protocol Version 5.0 dated 04/01/2019

MOPS Version 5.0 dated 04/15/2019

A5332 LPC for ACTG Sites Version 5.0 dated 04/11/2019

A5332 LPC for Non-ACTG Sites Version 5.0 dated 04/11/2019

These documents are on the [A5332 PSWP](#)

Mechanistic Substudy of REPRIEVE (A5333s): Are you up to date?

For A5333s please use

Protocol Version 5.0 dated 04/01/2019

MOPS Version 4.0 dated 04/10/2018

A5333s LPC Version 4.0 dated 03/23/2018

These documents are on the [A5333s PSWP](#)

For future reference, all newsletters are available on the [REPRIEVE Website](#).

We welcome ideas and suggestions for future newsletters. Please submit any comments or suggestions to the REPRIEVE News team at reprieve.news@fstrf.org



REPRIEVE Trial Clinical Coordinating Center

Massachusetts General Hospital
55 Fruit Street, 5LON 207
Boston, MA USA 02144

Our mailing address is:

reprieve.news@fstrf.org

Want to change how you receive these emails?

You can [update your preferences](#) or [unsubscribe from this list](#).

This email was sent to ekileel@mgh.harvard.edu
[why did I get this?](#) [unsubscribe from this list](#) [update subscription preferences](#)
Massachusetts General Hospital · 5 Longfellow Place · Boston, MA 02214 · USA

