

# Guidance on the BPaL OR Data Collection

Pilot study to estimate the effectiveness and safety  
of the BPaL treatment regimen in The Philippines

Veriko Mirskhulava, KNCV

21 May 2021

# General Principles BPAL OR data collection

---

- BPAL OR data will be collected using the specially designed standardized data collection forms
- Still, BPAL OR patient data will be part of routine surveillance system and recorded on NTP forms
- BPAL OR Data collection will occur at BPAL OR sites from multiple sources: patient interview, data abstraction from patient medical cards, NTP registers and forms, laboratory and aDSM data system
- Data from the paper forms will be entered in the specially designed standardized electronic data collection system - REDCap, with core set of variables for BPAL OR

# Data collection process

---

- Paper-based & digital
- BPaL OR site staff is responsible for screening the patient and completing the BPaL OR forms
- BPaL OR site staff will be responsible for the data entry from the paper data collection forms in the REDCap database at the facility level within 48 hours
- TB doctors must verify the record in the REDCap.

# Data Collection Tools: Paper Forms

---

- The core set of variables agreed, and 6 standardized data collection forms developed
  - The forms can be
    - printed and then filled in by hand
    - filled in by typing in MS Word or pdf and then printed

# Data Collection Tools: Electronic Database

---

- Electronic data collection platform – REDCap
  - Online use
  - Desktop version

BPAL Project | REDCap x Launch Meeting - Zoom x +

redcap.ucad.sn/redcap\_v8.7.2/ProjectSetup/index.php?pid=101

Home - Home Start - InSite KNCV Google Translate Google Maps HINARI Cochrane NCBI AF AF Gmail timeanddate.com Other bookmarks

# REDCap™

Logged in as **mveriko** | Log out

- My Projects
- Project Home or Project Setup
- REDCap Messenger
- Project status: **Development**

**Data Collection** [Edit instruments](#)

- Scheduling - Generate schedules for the calendar using your defined events
- Record Status Dashboard - View data collection status of all records
- Add / Edit Records - Create new records or edit/view existing ones

**Applications**

- Calendar
- Data Exports, Reports, and Stats
- Data Import Tool
- Data Comparison Tool
- Logging
- File Repository
- Record Locking Customization
- Data Quality and Resolve Issues
- REDCap Mobile App
- External Modules

## BPAL Project

Project Home Project Setup Other Functionality Project Revision History

Project status: **Development** Completed steps **0** of **8**

### Main project settings

**Not started**

Enable  Use surveys in this project? [VIDEO: How to create and manage a survey](#)

Disable  Use longitudinal data collection with defined events? [?](#)

[I'm done!](#)

### Design your data collection instruments

**Not started**

Add or edit fields on your data collection instruments. This may be done by either using the Online Designer (online method) or by uploading a Data Dictionary (offline method). Quick links: [Download PDF of all instruments](#) OR [Download the current Data Dictionary](#)

Go to  or  Explore the

Have you checked the [Check For Identifiers](#) page to ensure all identifier fields have been tagged?

Learn how to use

### Define your events and designate instruments for them

**In progress**

Create events for re-using data collection instruments and/or set up scheduling.

Go to  or

Type here to search

1:04 PM 11/30/2020

**REDCap**  
 Logged in as **mveriko** | Log out

My Projects  
 Project Home or Project Setup  
 REDCap Messenger  
 Project status: **Development**

**Data Collection** | Edit instruments

Scheduling  
 - Generate schedules for the calendar using your defined events

Record Status Dashboard  
 - View data collection status of all records

Add / Edit Records  
 - Create new records or edit/view existing ones

**Applications**

- Calendar
- Data Exports, Reports, and Stats
- Data Import Tool
- Data Comparison Tool
- Logging
- File Repository
- Record Locking Customization
- Data Quality and Resolve Issues
- REDCap Mobile App
- External Modules

**BPAL Project**

**Record Status Dashboard (all records)**

Displayed below is a table listing all existing records/responses and their status for every data collection instrument (and if longitudinal, for every event). You may click any of the colored buttons in the table to open a new tab/window in your browser to view that record on that particular data collection instrument. Please note that if your form-level user privileges are restricted for certain data collection instruments, you will only be able to view those instruments, and if you belong to a Data Access Group, you will only be able to view records that belong to your group.

**Legend for status icons:**

- Incomplete
- Incomplete (no data saved) ?
- Unverified
- Many statuses (all same)
- Complete
- Many statuses (mixed)

Dashboard displayed: [Default dashboard] Create custom dashboard

Displaying record Page 1 of 1: "1" through "9" of 9 records ALL (9) records per page

Displaying: Instrument status only | Lock status only | All status types

Table not displaying properly ?

Record ID	Screening			Enrollment						SECTION REAS FO EVALU	
	PATIENT INFORMATION	SCREENING	FORM COMPLETION	PATIENT'S SOCIOECONOMIC STATUS	TB TREATMENT HISTROY	CURRENT EPISODE OF TB DISEASE	HIV HEPATITIS STATUS	BMI	FORM COMPLETION		
1 (PATIENT'S ID: 2020-03-026)	●	●	●	○	○	○	○	○	○	○	●
2 (PATIENT'S ID: 2020-01-122)	●	●	●	○	○	○	○	○	○	○	○
3 (PATIENT'S ID: 2020-01-402)	●	●	●	○	○	○	○	○	○	○	○

Google Translate | Grammarly | BPAL OR The Philippines | REDCap

redcap.kncvtbc.org/redcap/redcap\_v10.9.1/DataEntry/index.php?pid=39&page=patient\_information&id=3&event\_id=91

Home - Home | Google Translate | Google Maps | HINARI | Cochrane | NCBI | verikomir@yahoo.c... | Gmail | timeanddate.com | Other bookmarks | Reading list

Project status: **Development**

**Data Collection**

- Record Status Dashboard - View data collection status of all records
- Add / Edit Records - Create new records or edit/view existing ones

[Patient Study ID: [site\_code]/[pat\_study\_screen\_no]/[pid]], Record ID: 3

Event: **Screening**

Data Collection Instruments:

- Patient Information**
- Inclusion Criteria
- Exclusion Criteria
- Relative Contraindications
- Written Informed Consent
- Enrollment Status
- Reasons for Non-enrollment

**Applications**

- Alerts & Notifications
- Calendar
- Data Exports, Reports, and Stats
- Data Import Tool
- Data Comparison Tool
- Logging
- Field Comment Log
- File Repository

Editing existing [Patient Study ID: 6/001/006-21-0001], Record ID: 3

Event Name: **Screening**

[Patient Study ID: [site\_code]/[pat\_study\_screen\_no]/[pid]], Record ID: 3

**Screening Date** \* must provide value  Today D-M-Y  
Date patient is screened

**Patient Information**

**COUNTRY** \* must provide value  Country

**Study Site Name** \* must provide value  Name of DR-TB treatment center

**Study Site Code** \* must provide value  View equation

**Patient Study Screening Number** \* must provide value

**Patient number in DR-TB Treatment Register** \* must provide value

**Patient Study ID: 6/001/006-21-0001**

**Gender** \* must provide value  Male  Female reset  
Gender

**Date of birth** \* must provide value  Today D-M-Y

**Age:** \* must provide value  View equation

Save & Exit Form  
Save & Stay  
-- Cancel --

Windows taskbar: Search, Office, File Explorer, Chrome, PowerPoint, Word, Edge, ENG, 03:29, 21/05/2021, 19



## DATA COLLECTION FORMS AT A GLANCE

Form number	Form name	Screening	Enrolment	Baseline	Treatment												End of treatment <sup>1</sup>	Follow-up after treatment		
					End of wk. 2	End of mo. 1	End of mo. 2	End of mo. 3	End of mo. 4	End of mo. 5	End of mo. 6	End of mo. 7	End of mo. 8	Ad hoc visit 1	Ad hoc visit 2	Ad hoc visit 3		Ad hoc visit 4	6 mos. after the end of treatment	12 mos. after the end of treatment
Form 1	Screening	X																		
Form 2	Enrolment		X																	
Form 3	Evaluation			X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Form 4	Treatment Completion																	X		
Form 5	After treatment Follow-up																		X	X
Form 6	Adverse Event			X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X

<sup>1</sup>If 6 months treatment, then week 26  
If 9 months treatment, then week 39

## BPaL OR Data Collection Form Completion: General Principles

---

- Each page of the form must have PATIENT STUDY ID on top of the page
- Pages in each paper form must be stapled together
- Keep completed forms in a specially created patient study folder with the OR name and the PATIENT STUDY ID on the cover

## Checking the Boxes

---

When filling in a printed form manually use a black pen to check the box, as in the example below

Example:

Gender:  Male  Female

## Answer “Unknown”

---

“Unknown” means any of the following:

- Patient refused to answer question
- Patient cannot remember information requested in question
- Information requested in question cannot be found from medical records

## **SPECIAL CONSIDERATIONS WHEN FILLING IN BPAL OR DATA COLLECTION FORMS**

# Form 1. Screening: Patient Information

PATIENT STUDY ID: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

STUDY SITE - STUDY SCREENING NUMBER - DR-TB REGISTRATION NUMBER

- **STUDY SITE CODE:**
- **PATIENT STUDY SCREENING NUMBER:**

Consecutive number given to a patient at the study site during the BPaL screening event despite the patient's enrollment status in the BPaL operational research.

- **PATIENT DR-TB REGISTRATION NUMBER:**

Unique identifier of the patient on DR-TB treatment in the country. For the data validation purposes, BPaL OR patient can be traced in the national surveillance system and using Patient Study ID

- Patient Study ID is assigned when screening the patient for enrollment on the BPaL regimen irrespective of the enrollment status.

## Form 1. Screening: Patient Information

---

- Screening data is entered in the REDCap irrespective whether the patient is eligible for BPAL treatment or not
- If date of birth is unknown report year of birth and the 1<sup>st</sup> of January
- If less <15 years of age patient does not meet the eligibility criteria;
- if >15 and <18 years old, patient should be evaluated by the Expert Committee

## Form 1. Screening: Inclusion Criteria

---

- Patient must have laboratory-confirmed (rapid and/or conventional DST) resistant TB to at least rifampicin and fluoroquinolones within **the last three months** of the screening date. Otherwise, Xpert testing, and 2<sup>nd</sup> line LPA must be done for the patient before enrollment in the study
- **Note: among patients with documented MDR/RR-TB treatment non-response or intolerance, only line LPA must be done for the patient before enrollment in the study**
- Patient with documented MDR/RR-TB treatment non-response or intolerance and bacteriologically confirmed active TB within the last three months of the screening date can be enrolled on the BPaL regimen **irrespective of resistance to fluoroquinolones**



## Form 1. Screening: Relative Contraindications

---

- Patient must be evaluated for the Relative contraindications **within the last 14 days** of the patient screening date for enrollment on the BPaL regimen
- If patient has any of the relative contra-indications, then the patient must be discussed at the Expert committee meeting. The expert committee must make decision about the patient enrollment on the BPaL regimen
- If the decision is “Yes”, then report the status of the relative contraindication(s) at the time of the patient enrollment in **Form 1. Screening, Section 3. Relative contra-indications, Questions 7.**

## Form 2. Enrollment

---

- Enrollment date:
  - Date when patient signs informed consent form.
  - Enrollment date can be different from the BPaL treatment initiation date
- Patient's Socioeconomic Status
  - Employed includes self employed and business owners

# Form 3. Evaluation

SCHEDULE OF BASELINE, TREATMENT AND AFTER TREATMENT EVALUATION					
	Baseline	2 weeks	Monthly	End of treatment	6- and 12-months after treatment completion
<b>Clinical evaluation</b>					
Clinical assessment* <sup>1</sup>	X	X	X	X	X
Psychosocial assessment** <sup>2</sup>	X	X	X	X	X
Performance status <sup>3</sup>	X				
Weight / BMI	X	X	X	X	X
Peripheral neuropathy screen <sup>4</sup>	X	X	X	X	X
Chest X-Ray	X		X-If no response to treatment	X	X
ECG	X	X	X	X	X-If indicated
Visual acuity and colour discrimination screen	X	X	X	X	X
Assessment and follow-up of AEs	X(X)	X(X)	X(X)	X(X)	X(X)
Treatment outcome assessment				X	X
<b>Bacteriological evaluation</b>					
Gene Xpert	X				
Sputum smear	X		X	X	X
Sputum culture <sup>5</sup>	X(X)		X (X)	X(X)	X(X)
Sputum drug susceptibility testing <sup>6</sup>	X (X)		X-If culture positive <sup>7</sup>		
Other sample smear	X		X-If no response to treatment		
Other sample culture	X(X)		X-If no response to treatment		
Other sample drug susceptibility testing	X		X-If culture positive <sup>7</sup>		
<b>Laboratory evaluation</b>					
Full blood count	X	X	X	X	X-if indicated
Liver function tests (AST, ALT, bilirubin)	X	X	X	X	X-if indicated
Thyroid stimulating hormone (TSH)	X		X - if indicated		
Serum electrolytes (Na, K, Ca, Mg)	X		X	X	X-if indicated
Serum amylase			X - if indicated		
Kidney function tests (Urea, Creatinine)	X		X - if indicated		
BSL (fasting or random) <sup>8</sup>	X				
HIV / HBV / HCV tests	X				
Pregnancy test <sup>9</sup>	X		X - if indicated		

## Form 4. Treatment Completion

---

### SECTION 2. REASON FOR NOT COMPLETING THE STUDY TREATMENT AS PER PROTOCOL

- The BPaL regimen not started
- Participant was withdrawn after enrollment due to protocol violation(s),
- Physician judged it no longer advisable for patient to continue the BPaL regimen,
- Participant refused further treatment and withdrew consent,
- Participant became pregnant during the study treatment
  - *Complete Form 6. Adverse Event*
- Other

## Protocol deviation / Violation

---

- A protocol deviation is any change, divergence, or departure from the study design or procedures defined in the protocol whether by the subject or investigator.
- A protocol violation is any change, divergence, or departure from the study design or procedures defined in the protocol, whether by the subject or investigator, that may significantly impact the completeness, accuracy, and reliability of the study data or affect a subject's rights, safety, or well-being substantially.

## Protocol Deviations

---

Examples of the protocol deviations:

- Patient missed 14 days on treatment with good clinical progress
- Patient enrolled on treatment without baseline Hep C testing
- Patient missed 14 days of treatment in every month of the first 3 months
- The patient fails to complete a maximum of 14 doses out of all required BPaL treatment doses within 60 days after the intended end of the BPaL treatment

## Form 4. Treatment Completion

---

Examples of the protocol violation:

- Patient started on treatment without baseline ECG and following ECG monitoring not conducted
- Patient misses > total of 14 doses within the first four weeks of the BPaL treatment
- Patient misses >35 consecutive doses of the BPaL treatment
- Patient fails to complete required number of the BPaL treatment doses within maximum period 60 days after intended end of the treatment

## Form 4. Treatment Completion

---

### SECTION 3. INTERIM TREATMENT OUTCOME (SPUTUM CULTURE CONVERSION)

- Date of initial sputum culture conversion: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
*MM-DD-YYYY*
- Two consecutive cultures taken at least 30 days apart are found to be negative.
- Record the specimen collection date of the first negative culture.



# Form 4. Treatment Completion

---

## SECTION 4. END OF TREATMENT OUTCOME

- **Cured:** BPaL treatment completed **without evidence of failure AND two or more consecutive cultures taken at least 30 days apart** within the last three months of treatment, are negative.
- **Treatment completed:** BPaL treatment completed **without evidence of failure BUT no record** that two or more consecutive cultures taken at least 30 days within the last three months of treatment , are negative.
- **Treatment success:** The sum of cured and treatment completed.

# Form 4. Treatment Completion

---

## SECTION 4. END OF TREATMENT OUTCOME

- **Treatment failed:**
- Lack of **culture conversion at the 6th** month of treatment, or
- **Culture reversion at 5th month** or later in a patient with previous culture conversion to negative
- Decision to terminate treatment early because of:
  - **poor clinical or radiological response as decided by the expert committee; or**
  - **permanent discontinuation of either Bdq or Pa, or both at any time due to Adverse Event; or**
  - **Permanent discontinuation of Lzd if having less than four weeks of full dosage due to Adverse Event.**

## Form 4. Treatment Completion

---

### SECTION 4. END OF TREATMENT OUTCOME

- **Died:** A patient who dies for any reason during the course of treatment.
  - *Complete Form 6. Adverse Event*
- **Lost to follow-up:** A patient whose treatment was interrupted for 2 consecutive months or more.
- **Not evaluated:** A patient for whom no treatment outcome is assigned, including but not limited to **participant was withdrawn after enrollment due to protocol violation(s)**

## Form 4. Treatment Completion

---

### SECTION 4. END OF TREATMENT OUTCOME

- **Treatment termination due to baseline resistance to any of the BPaL component drugs (Bedaquiline, Pretomanid, Linezolid):** Patients who receive **culture-based DST results** several months after starting the BPaL regimen are to be switched to an individualized regimen if **resistance to BPaL component drugs** is discovered. For such patients, this outcome should be reported.

## Form 5. After treatment Follow-up

---

- Complete the form **even if** patient
  1. Dies **during the after-treatment follow-up period**
  2. Withdraws consent **during the after-treatment follow-up period**
  3. Lost-to-follow-up **during the after-treatment follow-up period**

## Form 6. Adverse Event

---

- Complete the form if patient becomes pregnant **during the treatment**
  - Report Pregnancy in **SECTION 7. INFORMATION CONCERNING PREGNANCY**
  - Follow-up pregnant patient and report information concerning infant(s) in **SECTION 8. INFORMATION CONCERNING INFANT(S)**
- Complete the form if patient dies **during the treatment**

## Form 6. Adverse Event

---

- If Form 6. Adverse Event is completed, then Form 3. Evaluation must be completed as well (only relevant sections) even at the ad hoc visit
- Even if ad hoc visit, check one of the following options:
  - Treatment, Week \_\_\_\_\_
  - End of treatment, Week \_\_\_\_\_
  - Follow-up after treatment completion, Month \_\_\_\_\_

**Questions?**