



Dear DEEP-2 Investigators, we are glad to inform you that the Last Patient ended Last Visit!

The TMT is very glad to inform all of you that even the last patient has completed the study, thus performing the last visit (V16) on September 21st, 2017 at the Nicosia site (ID:05).

Next Study Activities

At this phase of the study, between the LVLP and the Close Out Visits, the main aim is addressed to complete all the activities that will lead to the High Data Quality of the Data Base in terms of consistency, completeness and timelessness in order to put the experimental centers in complete safety.

Therefore the actions to be taken are:

- » completion of the Data Entry activities;
- » resolution of the all queries arisen;
- » completion of the Source Data Verification (SDV) on site.

Also the activities carried out by the whole study team, such as the verification of the essential documents described in paragraphs 8.2 e 8.3 of the Good Clinical Practice (GCP), have to be up-to-dated in the Centre File (CF) and Investigator File (IF).

If there are missing documents, that have to be retrieved from the site, the CRA in charge will arrange their collection during the next monitoring visit and/or close out visit.

Frequently Asked Questions (FAQs)

What if the PI or his/her delegate wants to fill in the Drug Management section of the e-CRF, but one or more treatment numbers are missing on the dropdown menu?

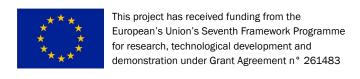
PI has to:

• contact the CRA and explain the issue describing in details the missing treatment number/s and the Visit number of the patient;

CRA has to:

communicate via email to the Data Manager (trial.assistant@cvbf.net) the issue, who will provide
with the required support.





Study Conduct

As the IMP'dispensing procedures are finished, now it's time for the final sprint to continue destroying the IMPs! To this aim, we have updated the table below about the status of the disposal process in each clinical center related to both Deferiprone and Deferasirox.

The legend describes:

ALB/31

- » in green the centers that successfully ended the disposal of all those IMPs available in place,
- » in yellow the centers in which the disposal process is on going, as in case of:
 - 1. partial disposal of the IMPs at the center,
 - 2. IMPs already withdrawn from the center to be disposed by the Sponsor.
- » in **red** the centers that have not performed the disposal yet.

| SITE ID | DEFERIPRONE STATUS | DEFERASIROX STATUS |
|---------|--------------------|--------------------|
| ITA/01 | | |
| EGY/02 | | |
| GRE/03 | | |
| ALB/04 | | |
| CYP/05 | | |
| ITA/06 | | |
| TUN/07 | | |
| ITA/08 | | |
| ITA/09 | | |
| ITA/10 | | N/A |
| ITA/11 | | N/A |
| ITA/12 | | N/A |
| ITA/13 | | N/A |
| ITA/14 | | |
| ITA/15 | | |
| ITA/16 | | |
| ITA/17 | | |
| UK/18 | | |
| UK/19 | | |
| UK/20 | | N/A |
| EGY/23 | | |
| EGY/24 | | |
| ALD /24 | | |

As you can see, in these last two months the percentage of the centers that have not begun the disposal yet, has fallen to the 67% for the DFX and to the 43% for the DFP. Your efforts are always precious to turn all in **green** lights and unburden the center with the IMPs to be disposed.





Data Cleaning

After LVLP, data cleaning activities are starting with the aim to ensure that the data included in the final database are comply with the protocol, Good Clinical Practice and applicable regulatory requirements.

Executive process-General remarks

Data cleaning starts with the identification of not consistent data in the e-CRF. It proceeds with the investigation of the reasons and ends only after the resolution of the queries.

Queries include the outliers, missing values, discrepancies or all data not handled in accordance with the protocol.

Who is involved in the data cleaning process?

The Data Manager (DM), the CRAs, the Investigators.

Data cleaning steps

» Step 1: The DM creates queries and transfers them in a "e-query list" to be sent to the CRA (fig. 1)

| e-Query lis | <u>st</u> | | | | | Coxide Bospec | C V B F |
|------------------------|----------------------|------------------|--------------------|-------------------|---|--------------------------------------|--------------------------|
| Study Title | efficacy and sa | afety of deferip | rone comp | pared to deferasi | ive-controlled trial to evaluate the rox in paediatric patients aged from ependent haemoglobinopathies. | | |
| Study Code | DEEP-2 | | | | | | |
| | | | | | | | |
| EudraCT No. | 2012-000353- | 31 | | | | | |
| EudraCT No. Sponsor | 2012-000353- CVBF | 31 | | | | | |
| | | 31 | | | | | |
| Sponsor | | 31 | | Last update | | | |
| Sponsor PI name | CVBF | | ry genera | 977 34 | | Query | resolution part |
| Sponsor PI name | CVBF XX Query | | ry genera Visit | 977 34 | Query text | Query Query solved (Yes/No) | resolution part Comment |





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In case the queries cannot be solved through the e-CRF, the DM transfers them in a Data Clarification Form (DCF) to be sent (directly or through the CRA) to the site (fig. 2).

The queries are based on Version 4.0 of the DEEP-2 protocol.

- » Step 2: the CRA verifies that the queries are generated in accordance with the version of DEEP-2 protocol in force at the time of data entry in the e-CRF; then transfers the queries of the "e-query list" in the e-CRF, while the DCF must be transmitted directly to the Investigator.
- » Step 3: the Investigator proceeds to answer queries by checking clinical data. The CRA makes sure the Investigator completes all requests of clarification.

Discrepancies not solved

When a discrepancy cannot be solved, justification must be provided by the CRA using a Deviation Form (fig. 3). If a deviation from the protocol occurred several times in the same patient, the CRA can report it in a single deviation form including all visits in which the deviation has occurred.

Tracking process

During the Data Cleaning process the DM maintains tracking of the queries. In case of DFCs, the investigator must complete the DCF, sign and date it and return the DCF back to the Sponsor.

DATA CLARIFICATION FORM

Study Title:

Multicentre, randomised, open label, non-inferiority active-controlled trial to evaluate the efficacy and safety of deferiprone compared to deferasirox in paediatric patients aged from 1 month to less than 18 years affected by transfusion dependent haemoglobinopathies

 Study Code: DEEP-2
 EudraCT No.: 2012-000353-31

 Sponsor: CVBF
 Centre ID: XX

Subject ID: XX01

| 7 | To be completed by the Investigator | | |
|-------|--|---|--|
| Visit | Form | Answer/Comment | |
| 3 | Laboratory | Totally daily dose: is it possible that it has been reported not in mg/die but in mg/kg for mistake? Please confirm or correct the value. The value reported is 20 mg/die but this value is not consistent with a DFX dosage | |

figure 2

| | | | DEFERIPRONE PE G EVALUATION IN PAEDIATRICS |
|-------------------|---------------------------|---|--|
| | SPONSOR: TRIAL CODE: | Consorzio per Valutazioni Biologiche e Farmacologiche (CVBF) | - |
| | SITE NUMBER: REFERRED TO: | General D Patient ID | - |
| Deviation(s) disc | ussed with the Investigat | tor to prevent recurrence: | |
| | Yes No If yes | comment: | |
| Protocol | | | |
| ICH-GCP | | | |
| | | | |



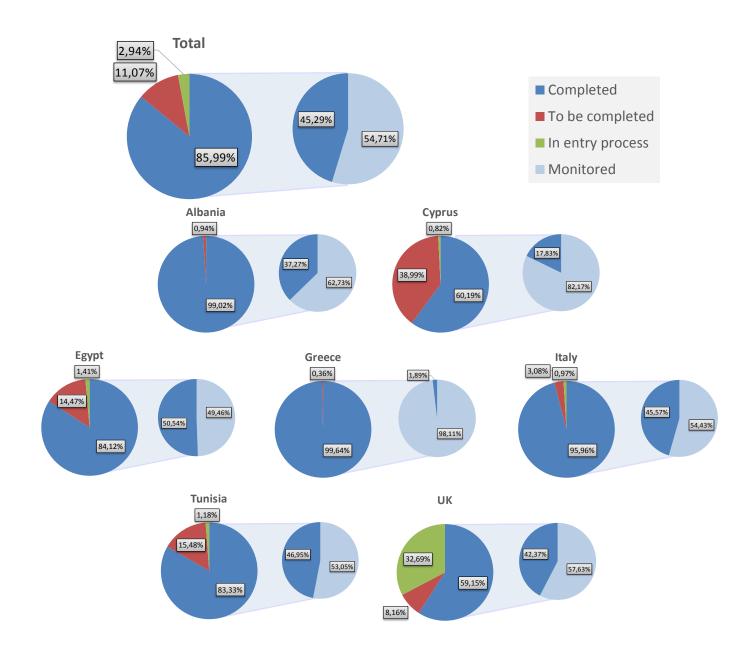


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e-CRF Form Review Status at different centres

The Trial Management Team wishes to remind Investigators to correctly complete and validate all data in the e-CRF sections to allow the CRAs appointed to each study center to perform the check during the monitoring visits.



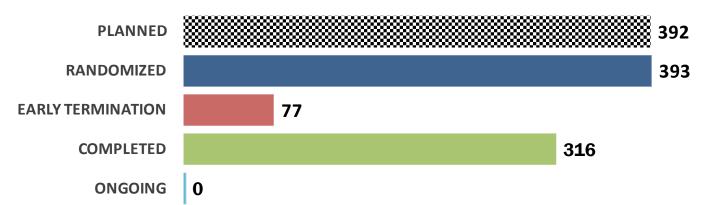




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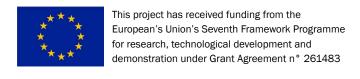
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Patients' Status



| Site ID | PI | Planned | Randomized | Early termination | Completed | Ongoing |
|---------|------------------|---------|------------|----------------------|-----------|---------|
| ITA/01 | Maggio | 10 | 11 | 0 | 11 | 0 |
| EGY/02 | El-Beshlawy | 130 | 133 | 39 | 94 | 0 |
| GRE/03 | Kattamis | 12 | 11 | 3 | 8 | 0 |
| ALB/04 | Kreka | 20 | 27 | 2 | 25 | 0 |
| CYP/05 | Christou | 12 | 8 | 7 | 1 | 0 |
| ITA/06 | Filosa | 14 | 14 | 4 | 10 | 0 |
| TUN/07 | Bejaoui | 30 | 56 | 2 | 54 | 0 |
| ITA/08 | Putti | 9 | 9 | 1 | 8 | 0 |
| ITA/09 | Del Vecchio | 12 | 6 | 0 | 6 | 0 |
| ITA/10 | Cuccia | 4 | 3 | 3 | 0 | 0 |
| ITA/11 | Bisconte | 4 | 1 | 0 | 1 | 0 |
| ITA/12 | Commendatore | 6 | 1 | 0 | 1 | 0 |
| ITA/14 | Cosmi | 5 | 5 | 1 | 4 | 0 |
| ITA/15 | Origa | 7 | 5 | 2 | 3 | 0 |
| ITA/16 | Casini | 4 | 3 | 0 | 3 | 0 |
| ITA/17 | Caruso | 6 | 2 | 0 | 2 | 0 |
| UK/18 | Telfer | 20 | 19 | 1 | 18 | 0 |
| UK/19 | Hemmaway | 5 | 4 | 0 | 4 | 0 |
| UK/20 | Harewood | 5 | 0 | 0 | 0 | 0 |
| EGY/23 | Metwally Sherief | 40 | 40 | 3 | 37 | 0 |
| EGY/24 | Hassab | 25 | 23 | 9 | 14 | 0 |
| ALB/31 | Zaka | 12 | 12 | 0 | 12 | 0 |
| | TOTAL | 392 | 393 | 77 | 316 | 0 |





Study Contacts

Please find below all DEEP-2 contacts that are glad to support you for any information that you may need:

Trial Leader:

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Trial Management Team:

- » Clinical Research Coordinator: Gabriele Morselli gmorselli@cvbf.net
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- » Drug and Technical Operations Manager: Bianca Tempesta btempesta@cvbf.net
- » Administrative Manager: Marina Montanaro mmontanaro@cvbf.net

Regulatory Submission Manager and Clinical Trial Archivist:

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Pharmacovigilance:

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- » Qualified Person for Pharmacovigilance: Mariagrazia Felisi mariagraziafelisi@cvbf.net
- » Medical Monitor: Maria Marsella mariamarsella@deep-project.net

Ferritin Evalutation Centers:

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