MTN-017 Study Specific Training

Counseling Considerations

Overview

- Collection of Rectal Biopsies
- HIV Pre- and Post-Test
- STI/HIV Risk Reduction
- Product Use Instructions
- Product Use Adherence*
- Protocol Adherence

*Note: Product Use Adherence Counseling will be covered in separate training

Counseling on Collection of Rectal Biopsies

- When required?
 - Screening
 - Enrollment
 - Period End Visits

HIV Pre- and Post-Test Counseling

- When is HIV testing required?
 - Screening
 - Enrollment
 - Every visit except Initiate Periods 2 & 3
 - As clinically indicated
- HIV pre-test and post-test is provided in conjunction with a participant's HIV test; therefore, counseling is required at these visits as well

HIV Pre- and Post-Test Counseling Guidelines

- HIV Testing Algorithm in protocol Appendix II
- Participant-centered approaches:
 - assess participant knowledge of relevant information
 - dispel any misconceptions
 - ensure participant readiness for HIV testing
 - ensure participant understanding of test results
 - re-emphasize confidentiality

MTN 017

	+		HIV and Risk Reduction Counseling Worksheet		
		PTID:	Visit Code:		
		General Greet client and establish rapport Review purpose and nature of today's session Discuss counseling objectives for the day as it Emphasize confidentiality Address any immediate issues or concerns wit	pertains to the participant		Introduce the participant to the session
Assess participant knowledge		HIV Education and Pre-Test Counseling Review difference between HIV and AIDS Review modes of HIV transmission and metho Review HIV tests to be done today and tests to Review window period and how it may affect to Correct any misconceptions or myths Verify readiness for testing	be done if today's tests indicate possible infection		
		Risk Reduction Counseling Use open-ended questions to assess client's H Discuss whether risk factors have changed sin Probe on factors associated with higher versus when you were able to use a condom compare Discuss previous month's risk reduction plan a participant moving forward	ce the last visit lower risk (e.g., what was different about the times ed to times when you were not?)		Assess risk behaviors
Provide ommunication about		HIV Post-Test Counseling Provide and explain test results, per protocol a Explain additional testing that may be required Assess client understanding of results and nex Provide further information and counseling rele	per protocol t steps		
what the test results mean		Documentation Instructions: Notes documenting (continuing on the opposite side if needed). Include discussed with the participant. Document the partiexperiences with the risk reduction strategies emploreduction, and a risk reduction plan for the coming understanding of HIV test results and next steps. In Counseling Notes:	cipant's personal risk factors for HIV exposure, oyed since the last visit, any barriers to risk month. Include documentation of participant		

STI/HIV Risk Reduction Counseling

 At which visit is STI/HIV risk reduction counseling required?

 Please describe how risk reduction counseling will be done.

Provision of Product Use Instructions

Provision of Product Use and Adherence Counseling*

Product Use Counseling

- Required at Enrollment/Initiate and Mid Period visits.
- Regimen specific
- Key messages are outlined in SSP Section 6.3 and Product Use Instructions

PRODUCT USE INSTRUCTIONS COUNSELING WORKSHEET

Provided at Initiate and Mid-Period Visits

Accompanies the provision and verbal overview of the product use instructions

General overview of key important messages

Documentation of debrief regarding his/her first dose/insertion or simulation of first insertion of product

PTID:	Visit Date:						
Visit Code:	Staff Initials:						
Product Regimen (please check appropriate box):							
□ Daily Tablet □ Daily Rectal Gel □ RAI Rectal Gel							
Visit Type (please check appropriate box):							
☐ Initiate Period 1 ☐ Mid Period 1 ☐ In	nitiate Period 2						
☐ Initiate Period 3 ☐ Mid Period 3							
Provide Product Use Instructions handout to the participant. Verbally review in detail the applicable product use instructions.							
(Note: use of visual aids to ensure participant understanding of proper product use is encouraged e.g. sample tablet bottles, sample applicators)							
□ Discuss key important information messages (located on the back of the applicable product use instructions). The following key messages were reviewed with the participant (check all that apply):							
☐ Use the study product as instructed by study staff☐ Missed dose instructions☐ Keep study product in your possession	□ Report issues/problems taking the tablets/inserting the gel □ Bring all remaining unused product/empty bottles to visits □ Contact clinic with any problems						
☐ Product storage instructions☐ Clinic contact information☐ Do not share study product	between visits Use only the study product assigned to you Other (describe in comments below)						
	erns about adherence to product use. Debrief ertion or simulation of first insertion of product						
(Probes: was he/she able to swallow the pill/in difficulties? Does he/she have any questions? swallowing or inserting product at home? Wou instructions?)	Does he/she have any concerns about						
Comments:							

PRODUCT USE INSTRUCTIONS: GEL

MTN-017 Before and After Sex Gel Use Instructions



 Wash your hands with soap and water.



- Tear open the wrapper.
- Remove the applicator and plunger.
 The applicator is prefilled with gel.



- Place the small end of the plunger in the hole at the back end of the applicator barrel (opposite the blue cap).
- Remove the blue cap from the end of the barrel.



 Tear open the lubricant packet provided by the study staff and insert the applicator so the outside is covered with lubricant.



 Hold the applicator with your thumb and middle finger on the applicator about half-way along the applicator barrel.



Chaose a comfortable position for inserting the applicator (e.g. standing, lying on your side, or on your back)

If you are standing: Separate your legs while kneeling or squatting to allow good access to your anus. Use one hand to guide in the applicator tip by reaching around/ behind you.

If you are lying on your back: Lie on your back with one knee bent. This should allow good access to your anus from below. If you are lying on your side: One leg should be bent up toward the chest. Use one hand to guide in the applicator tip by reaching around behind you.



Insert the lubricated applicator barrel tip into the anus, slowly and gently.

 Once the tip is inserted into anus, gently slide the applicator further into the rectum until your thumb and middle finger touch your body (about halfway along the applicator or 2–3 inches).



While holding the applicator in place with your middle finger and thumb, use your index finger to push the pluger all the way into the applicator barrel. Push the plunger until it stops.

 After the plunger has been pushed all the way into the applicator barrel, gently slide the applicator out of the anus.



 Dispose of the wrapper, applicator and blue cap.

PRODUCT USE INSTRUCTIONS: BEFORE AND AFTER SEX

- Insert two separate doses of gel into the rectum when you anticipate having anal sex as per the instructions below
 - Insert first dose (one applicator) into the rectum within 12 hours before you anticipate having anal sex
 - Insert second dose (one applicator) into the rectum as soon as possible within 12 hours after you have anal sex
 - If you insert one dose (one applicator) before you anticipate having anal sex, and sex does not happen, insert a second dose (one applicator) at any time up to 24 hours after you inserted the first dose
 - If you did not or will not have sex during the entire week (7-days):

- 2. Avoid practices that could cause discomfort
 - Do not insert the applicator without lubricant.
 Inserting a dry applicator may cause discomfort
 - Do not force the applicator into the rectum
 - Always practice safe sex. Use a condom when having any type of sex
 - Rectal Biopsy/Fluid Subset Only: Do not insert anything in your rectum including gel for 72 hours after biopsies are taken.
- 3. Keep all gel applicators in your possession
 - Do not remove labels from your cartons
 - Keep the gel in a safe place
 - Keep the gel out of reach of children
 - Store at room temperature

- Do not share your gel applicators with other people
 - Use only the gel assigned to you
- Return all remaining unused applicators to the study staff at your next vist
- 6. The study staff is here to help and support you. Please contact study staff if you have:
 - Any question or concerns
 - If your supply starts to run low
 - Problems using the gel. Do not change how much you are taking or stop using the gel without first talking with study staff
 - New symptoms or worsening of any continuing medical symptoms

No RAI in the preceding 6 days, participants should receive instructions to apply gel using the BAT 24 regimen on the 6-7th day or use 2 doses of product at least once per week on a day that is convenient for them (Per CM #02)

 Do not take more than 2 doses in a day (24-hour period) even if you have anal sex more than once

PRODUCT USE INSTRUCTIONS: DAILY USE

Insert one dose of gel (one applicator) into the rectum

- Insert one dose around the same time each day
- It is important that you don't miss any doses
- If you forget a dose, insert the gel as soon as you remember
- If you forget a dose, and your next dose is due within 6 hours, skip the missed dose
- Do not take more than 1 dose in a day

2. Avoid practices that could cause discomfort

- Do not insert the applicator without lubricant.
 Inserting a dry applicator may cause discomfort
- Do not force the applicator into the rectum
- Do wash or wipe off the applicator
- Always practice safe sex. Use a condom when having any type of sex
- Rectal Biopsy/Fluid Subset Only: Do not insert anything in your rectum including gel for 72 hours after biopsies are taken

3. Keep all gel applicators in your possession

- Do not remove labels from your cartons
- Keep the gel in a safe place
- Keep the gel out of reach of children
- Store at room temperature
- Keep the gel in its original wrapper until it is time to use
- Do not use the gel if the wrapper is open or seems broken or any part of the applicator is missing
- Used OR dirty gel applicators should be properly disposed of in the trash can or brought back to the clinic to be disposed of
- Do not share your gel applicators with other people
 - Use only the gel assigned to you
 - Return all remaining unused applicators to the study staff at your next visit

The study staff is here to help and support you. Please contact study staff if you have

- Any question or concerns
- If your supply starts to run low
- Problems using the gel. Do not change how much you are taking or stop using the gel without first talking with study staff
- New symptoms or worsening of any continuing medical symptoms

PRODUCT USE INSTRUCTIONS: TABLET

1



 Wash your hands with soap and water.



 Open the bottle by pushing the cap down while turning to the left.



- The first time the bottle is opened, there will be a seal covering the bottle.
- Remove and discard this seal.



• Inside the bottle, mere will be

See 21^{co}November 2013
• Remove and discard this

Official Memo





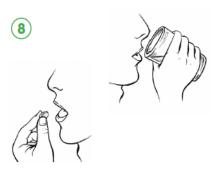
- There is a sealed container inside the bottle that helps keep the tablets dry.
- Do not open this container, swallow it, or remove it from the bottle.



 Remove one tablet from the bottle when taking one tablet each day.



 After removing the tablet, close the bottle tightly by replacing the cap and turning it to the right.



 Put one tablet in your mouth and swallow it with water or other non-alcholic beverage.

PRODUCT USE INSTRUCTIONS: TABLET

- Take one dose (one tablet) by mouth every day
 - Take one dose at the same time each day
 - It may be taken with or without a meal
- It is important that you do not miss any doses
 - If you forget to take a dose, take one tablet as soon as you remember
 - If you forget to take a dose, and your next dose is due within 6 hours, skip the missed dose
 - Do not take more than 1 dose in a day
- Keep all tablets in your possession
 - Do not remove labels from the bottle
 - Keep the tablets in a safe place and out of the reach of children
 - Store at room temperature
 - Keep the tablets in its original container and keep the container tightly closed

- Do not share your tablets with other people
 - Use only the tablets assigned to you
 - Do not use the tablets if the seal of the bottle opening is broken or missing when taking the first dose.
- Return remaining unused tablets to the study staff at your next visit
- The study staff is here to help and support you.
 Please contact study staff if you have:
 - Any questions or concerns
 - If your supply starts to run low
 - Problems taking the tablets. Do not change how much you are taking or stop taking your pills without first talking with study staff
 - New symptoms or worsening of any continuing medical symptoms

FIRST DOSE

VS.

SIMULATION OF FIRST DOSE

- All study participants will complete their <u>first</u>
 use or <u>simulation of their first use</u> at the study
 clinic during their <u>Initiate Period Visits</u>.
- Simulation of product use refers to inserting an empty applicator (an applicator without any gel) to allow participant to practice applicator insertion prior to leaving the clinic.

- For participants initiating the <u>daily rectal gel</u> <u>regimen</u>:
 - First insertion could be insertion of first dose <u>or</u> simulated insertion, depending on participant's preference and level of comfort.
 - Participants can chose to do the first insertion either:
 - in a private space, with study staff standing by in case the participant requests guidance or technical assistance.
 - in a private space with direct staff observation of the gel insertion.

- For participants initiating the <u>RAI-associated rectal gel regimen</u>:
 - First insertion should be simulated only.
 - Participant should be provided clear instructions that first use should occur around the time of sex.

- For participants initiating the <u>daily oral</u> regimen:
 - First dose should be directly observed by study staff.
 - A private space is not required.
 - Study staff should remind the participant to leave the desiccant inside the bottles but discard the bottle seals.

Product Use Adherence Counseling

- Based on participant-centered strategies
- Aim: Reinforce the value of accurate reporting of adherence to study product use
- Purpose:
 - Gauge the participant's understanding of product use instructions
 - Assess the participant's confidence with using the study product
 - Identify potential obstacles to using the product and how they might overcome such challenges
 - Converge three adherence measures (product count, SMS, and PK result)
 - What, if anything, helped the participant to adhere to product use and whether these approaches might be helpful to the participant in the next period of the study

Refer to the Participant Centered Product Adherence Counseling Manual available on the MTN-017 Study Implementation Materials webpage under Counseling Tools/Worksheets.

Provision of Protocol Adherence Counseling

PROTOCOL ADHERENCE

COUNSELING WORKSHEET

Required at Initiate and Mid Period visits

Counsel the participant to refrain from using prohibited medications and/or engaging in certain practices during study participation

Documentation of debrief regarding practices or medications participants are asked to refrain from using or engaging in

PTID:	Visit Date:						
Visit Code:	Staff Initials:						
Visit Type (please check appropriate box):							
☐ Initiate Period 1 ☐ Mid Period 1 ☐ Ini	itiate Period 2						
☐ Initiate Period 3 ☐ Mid Period 3							
☐ Provide guidance on prohibited practice	s, products or medications						
 Refrain engaging in receptive or insertive participant for the duration of the study 	ve sexual activity with another MTN-017 study						
 Use study-provided male condoms for the duration of the study for penetrative intercourse 							
 Do not take part in other research studie or genital products for the duration of st 	es involving drugs, medical devices, vaccines, udy participation						
(clopidogrel bisulfate), rectally-administ or corticosteroids, or any investigational Note: Use of lubricants, dou or corticosteroids are permit	in, including Lovenox®, Warfarin, Plavix® ered medications or products, containing N-9						
 Refrain from using NSAIDs, aspirin and increased likelihood of bleeding for 72 h 	or other drugs that are associated with nours prior to and following mucosal biopsies						
Discuss and assess expectations or con	ocerns about protocol adherence						
Comments:							

Protocol Adherence Counseling

- Protocol adherence counseling should also include:
 - Review of the participants' visit schedule
 - How to contact the clinic staff
 - How to use product
 - SMS (how to and when)
 - Adhere to protocol requirements (e.g. willing to use condoms, not to participate in other research study)

Documentation

 All <u>counseling</u> activities should be documented in chart notes and/or on counseling worksheets to allow for appropriate follow up at the next visit.

What are your questions?

At the Enrollment visit, a participant was assigned the daily tablet regimen and demonstrated taking the daily tablet without issue. However, while at home, the participant reports having some difficulty swallowing the tablet. When he is finally able to swallow the tablet, he vomits.

How would you counsel this participant?

A participant reports to the study nurse that one dose (one applicator) was inserted during the RAI associated rectal gel use regimen as s/he planned to have sex later that day. However, sex did not occur as planned.

How would you instruct this participant to use his/her next dose of gel?

A participant, currently in the daily rectal gel regimen, mentions he forget to use one dose as he left the applicators at home while he traveled out of the city.

How should this participant be counseled?

A participant, in the RAI associated rectal gel use regimen, reports he intends to have sex multiple times over the weekend. He asks if he should insert his required doses before and after each time he has sex?

How would you instruct him to use the gel?

A participant reports having difficulty inserting the rectal gel applicator on his own. He asks if his partner can insert the study gel for him?

How would you counsel this participant?

A participant, in the RAI associated rectal gel use regimen, tells the study nurse that he did not have sex in the week prior to his visit. As instructed, he inserted one dose in the evening of the 6th day. He then had sex within the I2 hours of inserting the first dose.

When should he be instructed to insert his next dose?

A participant is assigned to the RAI associated rectal gel use regimen. Two weeks after the start of the period, he contacts the study nurse and reports that he stopped using the gel as instructed because it was too hard to remember using it when he wanted to have sex.

How would you counsel this participant?

A participant, in the RAI-associated rectal gel use regimen, inserts one dose when he plans to have sex. However, sex dose not occur and a second dose of gel is not inserted. The next day, the participant has sex, without inserting a dose of gel prior to having sex.

When should the participant be instructed to insert his dose?