# NeuroNEXT Clinical Study Concept Synopsis

# Submission Date:

# 1- Applicant Information

Principal Investigator:				
Title: Email: Organization Country:	First Name: on:	MI: Phone 1	Last Name: number:	
Principal Investigator (optional):				
Title: Email: Organization Country:	First Name: on:	MI: Phone 1	Last Name: number:	
Other Key Research Personnel (optional):				
Title: Email: Organizatio Country:	First Name: on:	MI: Phone i	Last Name: number:	

### 2- Project Description

Under which NeuroNEXT-specific PAR do you intend to submit your application:	
NeuroNEXT Clinical Trials (U01) (PAR-21-223)	
NeuroNEXT Small Business Innovation in Clinical Trials (U44) (PAR-21-224)	
Can the information provided in this form be circulated within the NeuroNEXT Network for purposes of determining feasibility?	
- If no, please include (as an attachment) a brief synopsis of your proposal that can be circulated within the Network.	

Title of the project (limit 200 characters):

Target disease:

Investigational agent (drug/biologic/device):

Primary aim(s) of the trial (limit 300 characters):

Secondary aim(s) of the trial (limit 300 characters):

What specific outcomes would make you determine that the investigational agent/biomarker warranted progress to a Phase III trial? Please provide a quantitative objective go criterion (limit 150 words).

What specific outcomes would make you determine that the investigational agent/biomarker did not warrant progress to a Phase III trial? Please provide a quantitative objective no-go criterion (limit 150 words).

If the proposed study is positive (meets the go criteria), please describe the possible design for the next study (e.g., primary objective, primary outcome) and how it would differ from the currently proposed study (limit 300 words).

#### 3- Pre-clinical and Clinical Data

Briefly describe the scientific rationale for the trial (limit 300 words).

Describe relevant **pre-clinical evidence** used to support this trial, addressing the questions below where applicable:

- Which animal models were used for the preclinical evaluation? (limit 150 words).
- Were control animals used during the preclinical evaluations? (limit 150 words).
- Describe the steps taken to minimize bias during the conduct of the preclinical evaluations (limit 150 words).

• Have the preclinical results been independently replicated? Yes No

Is there evidence that the interventional agent reached and engaged the target? 🗌 Yes 🗌 No. Please explain (limit 300 words).

Describe relevant <u>clinical evidence</u> used to support this trial, if any (limit 300 words).

#### 4- Clinical Trial Information

Describe the route/timing of the intervention delivery/dosing (limit 50 words).

Study Population:

Inclusion Criteria (limit 200 words):

Exclusion Criteria (limit 200 words):			
List participating pharmaceutical, biologic or device manufacturing companies. If any, please provide relevant communication you had with the company.			
List any foundation or non-profit organization that you have discussed this study with. If any, please provide relevant communication you had with the foundation or non-profit.			
Is the investigational agent (drug/biologic/device) under an open IND/IDE? Yes 🗌 No 🗌			
If yes: - Please provide the IND/IDE number:			
If no: - Will the proposed study be performed under an IND/IDE? Yes No Unknown			
<ul> <li>If yes:</li> <li>Has this protocol been submitted to the FDA? Yes No</li> <li>Please note our policy requiring documentation from the FDA regarding the status of the protocol you wish to implement: <u>http://grants.nih.gov/grants/guide/notice-files/NOT-NS-11-018.html</u></li> </ul>			
- If no: Has the FDA provided a written exemption from the IND/IDE requirement? Yes No			
Do you or any member of the study group have a financial conflict of interest or <u>hold a patent</u> with the use of the intervention? Yes No			
5- <u>Statistical Considerations (*please see the instructions located at the end of this document</u> before completing this section)			

Do you plan to request the use of an external statistician for this proto
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🗌 Yes 🗌 No

- If Yes: Please provide the name of the external statistician, contact information, and a rationale for the need to involve the external statistician (limit 150 words).

Please provide a 'guesstimate' of your study sample size to assist with the feasibility assessment. If this proposal moves on to a protocol working group (PWG), the DCC will help further define the sample size (limit 50 characters).

Proposed number of subjects to be enrolled (limit 50 characters):

Describe the statistical basis for the proposed sample size calculation (limit 150 words).

List proposed statistical methods to be used to analyze the primary and secondary aims of the trial (limit 150 words):

### 6- Additional information: Note responses to the following questions are for internal network planning purposes only. None of these items/activities are required and will not impact consideration of the proposal

Have you (or one of the Co-investigators) received past NIH funding for the preliminary work leading to this proposed trial? Yes No
- If yes, please list the grant numbers and titles.
Have you (or one of the Co-investigators) previously been a Site Principal Investigator (PI) for a clinical trial? Yes No - If yes, please list (up to 5) recent trials.
<ul> <li>Have you (or one of the Co-investigators) previously been the Principal Investigator (PI) for a Multisite clinical trial?  Yes No</li> <li>If yes, please list (up to 5) recent trials.</li> </ul>
Is your institution a NeuroNEXT clinical study site? Yes No
- Have you discussed this proposal with the NeuroNEXT PI at your institution? Yes 🗌 No 🗌
- Can we copy the NeuroNEXT PI from your site on correspondence about this proposal?
Yes 🗌 No 🗌
Is your institution a CTSA site ? Yes No - - If yes: Have you discussed this proposal with your CTSA's protocol development group and/or presented it at a CTSA Brainstorming Session / Studio / Mock Study Session? Yes No -
Are there "other resources" at your institution that you have used in developing this proposal? Yes $\square$ No $\square$
- If yes: Describe:
Was this proposal developed in conjunction with a NeuroNEXT Brainstorming Session? Yes  No
If this is a U44 application, was this proposal developed in conjunction with the NeuroNEXT Pipeline Development Committee ? Yes 🗌 No
Have you contacted a relevant non-profit or patient-support organization?
Additional information: Please list applicable references for your proposal here

#### \* Statistical Considerations:

For NeuroNEXT Network funded clinical trials, there are two general approaches that can be taken with respect to the statistical design and analysis activities:

- 1) For many funded trials, the NeuroNEXT Data Coordinating Center (DCC) performs all statistical design and analysis functions.
- 2) In other situations, if a Protocol Principal Investigator has previously worked with an external biostatistician, they may be allowed to join the project, under the following conditions:
  - The external biostatistician will work collaboratively with the NeuroNEXT DCC.
  - The NeuroNEXT DCC statisticians will serve as the unblinded statisticians for the trial.
  - The external biostatistician will be blinded to safety data and interim analysis results during the course of the trial.
  - The external biostatistician may only receive raw blinded data or datasets during the course of the trial if and when permitted or required by NINDS and the DCC PI.
  - The external biostatistician may be included as a blinded participant on the Protocol Steering Committee (PSC) or other relevant NeuroNEXT committees and may serve as a statistical advisor to these committees.
  - The external biostatistician may participate in the development of the Statistical Analysis Plan, in collaboration with DCC biostatisticians.
  - The external biostatistician may collaborate with the DCC biostatisticians in the final study analysis (if agreed upon by NINDS and the DCC).