GENETIC THERAPIES FOR CF
QUESTIONS TO ASK BEFORE ENROLLING IN A CLINICAL TRIAL

Before a clinical trial begins, you will meet with the study’s cystic fibrosis doctor or research coordinator to learn more about the trial. It is your right to know everything about your role in a clinical trial. Every trial is different, so feel free to ask as many questions as you need.

SUGGESTED QUESTIONS

1. What is the purpose of this study?
2. Why do you think I am a good candidate for this study?
3. What are the potential benefits of participating in this study?
4. What are the potential risks to me if I participate?
5. How many people will be in the study?
6. Can you explain what is known about my genetic mutation?
7. I am thinking of having a baby in the future. How will being in the study affect that?
8. How does the study drug/therapy work?
   • Will this affect my DNA or other genes?
   • Will this treatment last forever, or will I have to repeat it?
   • Which parts of my body will be affected (e.g., lungs, other organs)?
   • Will this reverse my existing lung damage?
   • How is the study drug different from taking a modulator?
9. What would I have to do if I participate in this study?
   • How long is the study?
   • How many study visits are there, and how much time will each visit take?
   • What tests or procedures will I have to do?
   • How is the study drug administered (e.g., inhaled, oral, injection)?
   • Do I need to change any of my other treatments?
10. If I participate in this study, will I be able to enroll in future gene therapy or other studies?
11. Will I be able to see my own data during the study?
12. Who else will be able to see my data (medical records)? How will my identity be protected?
13. If samples are taken such as blood or tissue, how long will they be stored and who will have access to them?
14. If I am responding well to the treatment, can I continue with the therapy after the study ends?
PARTICIPATING IN A CLINICAL TRIAL: FREQUENTLY ASKED QUESTIONS

How are current genetic therapy studies different than the CF gene therapy trials conducted in the past?
Genetic therapy research has come a long way since early clinical trials were conducted in CF decades ago. We’ve got more tools in our toolbox than at any other time in our history, including an improved understanding of CF biology, new technologies to deliver genetic therapies to cells, better ways to measure whether these treatments are working, and collaborations with industry and labs across the country. In addition, genetic therapies have been approved to treat other rare diseases, giving us encouraging examples of success. Most importantly, we’re partnering with members of the CF community to inform trial design and ensure that research meets the needs of people with CF.

How will my safety be protected during the study?
Each clinical trial must go through many layers of rigorous review before it can begin. The U.S. government has strict guidelines and safeguards in place to keep risks as low as possible and ensure that any risks are worth the potential benefits. On top of those requirements, we add additional safety measures for trials in CF. Each clinical trial is overseen by a committee of independent experts including clinicians, researchers, ethicists, statisticians, and people with CF. These committees are responsible for protecting the safety and welfare of every person who participates in a CF clinical trial, and they take many steps to ensure trials are safe, including:
- Reviewing the protocol before the study begins to make sure it includes an appropriate plan to monitor participants’ safety
- Monitoring the study in real time and at regular intervals to pick up early signs of potential side effects
- If necessary, suggesting changes or even stopping the trial to protect participants’ safety

What will happen if I get sick during the study?
The study team will monitor your health throughout the trial. If you experience any changes in your CF symptoms or overall health, they will work closely with you to determine whether you can safely continue with the study. If at any time the study team feels the study is not in your best interest, they have not only the right -- but also the duty -- to remove you from the study.

Who do I contact if I am not feeling well or have questions during the study?
It’s important to keep the study team informed about any changes in health or concerns you may have during a trial. Before enrolling in a study, identify which member(s) of the study team you should contact with questions or concerns and have their contact information readily available. If you are feeling unwell, the study team may also recommend contacting your regular CF care team.

Can I quit being in the study?
Your safety is the top priority, and your participation in any clinical trial is always voluntary. If you ever feel that being in the study is not in your best interest, you can choose to stop participating at any time.

Will I be compensated for my time?
Some clinical trials may compensate you for participating and amounts can vary. This is a decision made by the trial sponsor, who is paying for the study. You will receive information about compensation during the informed consent process before the study begins.

Will I be reimbursed for study-related expenses (e.g., mileage, parking, meals, etc.)?
Most studies offer reimbursement for expenses that you incur as a result of participating, including meals, mileage, and parking, as well as airfare and hotel stays, if needed. Some expenses, such as childcare, may not be covered. Before enrolling in a trial, ask the study team which costs will be reimbursed.

When will I be able to find out the results of the study and whether I was on the study drug or a placebo?
The easiest way to find out about the progress of your clinical trial is to talk to your research coordinator. Once the trial has been completed, the study sponsor will provide information on who received the treatment and who received the placebo, and your research coordinator will be able to share this information with you. If the study sponsor does not proactively provide this information, your research coordinator can place an inquiry to the sponsor. You can also track study results using the Clinical Trial Finder (cff.org/finder) or by searching for the trial on clinicaltrials.gov.

What is the difference between RNA therapy for CF and the RNA vaccines created for Covid?
Both approaches utilize messenger RNA (mRNA), but in different ways. The Covid vaccine contains mRNA that instructs cells to create a harmless piece of protein that is found on the surface of the virus that causes COVID-19. The protein then triggers an immune response that helps our bodies learn how to fight off future COVID-19 infections.

In RNA therapy for CF, CFTR mRNA is delivered to the lungs, where it instructs airway cells to produce healthy CFTR protein. The CFTR protein can then move to the cell surface to control the salt and water balance in the airways.

In both approaches, the cells break down the delivered mRNA and remove it after the protein piece is made. No permanent changes are made to a person’s cells or DNA. In order to keep producing healthy CFTR protein, mRNA therapy would need to be repeatedly delivered to lung cells.

June 2022