

AWARD NUMBER: W81XWH-18-2-0062

**TITLE: The Gulf War Illness Clinical Trials and Interventions Consortium
(GWICTIC)**

PRINCIPAL INVESTIGATOR: Nancy Klimas

**CONTRACTING ORGANIZATION: NOVA SOUTHEASTERN UNIVERSITY, INC.
FORT LAUDERDALE FL 33314-7721**

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6. AUTHOR(S) Nancy Klimas, MD; Rebecca McNeil, PhD; Gordon Broderick, PhD; Kimberly Sullivan, PhD; Travis Craddock, PhD; Amanpreet Cheema, PhD E-Mail: nklimas@nova.edu, acheema@nova.edu					5d. PROJECT NUMBER	
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14. ABSTRACT 1. Create a collaborative consortium of clinical and scientific researchers that will rapidly implement rigorous and innovative phase I and II clinical trials for GWI. 2. Perform at least four phase I or phase II clinical trials. 3. Provide a foundation of scalable infrastructure and management in support of the efficient and successful operation of the Consortium. 4. Partner with the GWI Biorepository Resource Network and other GWI investigators, hosting a minimal data elements working group to develop a platform for core assessment and outcomes with broad consensus, for use in these studies and the wider field in support of our shared research mission.						
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1. INTRODUCTION: *Narrative that briefly (one paragraph) describes the subject, purpose and scope of the research.*

A key objective of this Consortium to quickly deliver treatments to patients suffering from this debilitating illness. Based on our early experiences with combination synergistic approaches, as well as single drugs with multiple mechanisms of action, we truly believe that the targets in this proposal will help to improve energy production, restore immune function and reduce inflammation. They will provide a more targeted approach to improve patient outcomes, halt disease progression, and reset dysfunction tied to the disease, at least in a subset, if not in all, patients with GWI.

2. KEYWORDS: *Provide a brief list of keywords (limit to 20 words).*

GWI, Inflammation, DSMB, EAB, IRB, EDC, FDA, GWICTIC, RTI, RGH, BU, Bronx VA, WRIISC, PA, NJ.

3. ACCOMPLISHMENTS: *The PI is reminded that the recipient organization is required to obtain prior written approval from the awarding agency grants official whenever there are significant changes in the project or its direction.*

What were the major goals of the project?

Specific Goal 1: Create a collaborative consortium of clinical and scientific researchers that will rapidly implement rigorous and innovative phase I and II clinical trials for GWI.

	Timeline	Percentage complete
Major Task 1: Implement the overarching research Consortium structure.	Months	
Subtask 1: Provide leadership and infrastructure to support the clinical trials consortium	1-60	
Establish an executive team partnership with weekly meetings of the two PIs (Drs. Klimas and McNeil), the GWICTIC Administrative Director (Dr. Aman Cheema), and the National Clinical Trials Coordinator (Elizabeth Balbin)	1-60	100%
Coordinate monthly steering committee meetings by webcast or teleconference with the 5 site PIs, the 4 Core Directors, the Advocacy Committee chair, and the Consortium Directors	1-60	Ongoing
Subtask 2: Establish and coordinate the Advocacy committee		
<i>MILESTONE: Start monthly meetings/teleconferences in the first quarter.</i>	4	100%
<i>MILESTONE: Elect a chair to represent the group and community on the Steering committee and Advocacy Committee.</i>	4	100%
Hold monthly meetings that include the recruitment and retention team by webcast or teleconference.	4-60	100%
Subtask 3: Establish and coordinate the Steering Committee.		
Review proposed GWICTIC studies and forward them to the External	1-48	50%

Review Panel.		
Review the recommendations of the External Review Panel and authorize studies for submission to HRPO or request revision and re-review.	1-48	50%
Develop and/or review and monitor the completion of milestones for individual studies.	1-60	15%
Develop and/or review and monitor the completion of milestones for the Cores and Operations Center.	1-60	15%
Prioritize and review additional studies depending on resources.	12-60	10%
Hold monthly meetings to (a) review work in progress and (b) discuss scientific process and findings, in support of coordinated and collaborative research.	1-60	0%
Subtask 4: Establish and coordinate the Data Safety and Monitoring Committee.		
Develop all materials for DSMC support.	5	80%
Follow up with candidates recommended by NSU and determine their willingness and eligibility to participate (including potential COI).	5	100%
<i>MILESTONE: Establish the DSMC.</i>	5	100%
Coordinate dates and times for DSMC teleconferences, host and moderate teleconferences, and write and distribute meeting minutes.	5-60	5%
Subtask 5: Establish and support working groups and committees.		
For each trial, establish a Clinical Trial Working Group.	1-48	5%
Establish Site Working Groups.	1	5%
Establish the Clinical Coordinators Working Group, to report on progress, arrange trainings, and other activities.	1-60	5%
Establish the Publications committee, to assure appropriate authorship and contributors' statements, acknowledgement of support, review of planned products to avoid potential redundancy, and encourage student participation and acknowledgement in the research process.	2-60	80%
Establish the Recruitment and Retention Working Group, to meet at least monthly and assure that resources are sufficient for advertising, social media strategies, and event attendance for recruitment.	2-60	60%
Subtask 5: Establish and coordinate External Review Panel reviews.	4-60	
Follow up with candidates recommended by NSU and determine their willingness and eligibility to participate (i.e. vetting potential COI).	4	85%
Coordinate dates and times for ERP teleconferences, host and moderate teleconferences, and write and distribute meeting minutes.	4-60	50%
Coordinate dates, times, and venues for in-person ERP meetings,	4-60	45%

remain on site to manage logistics, and take minutes during meetings.		
Subtask 1: Establish the Biomarker/Biorepository core.	1-60	
<i>MILESTONE: Establish standard operating procedures for the collection, shipping, accession, and specimen processing for both the biorepository and the standard lab panel described in the narrative.</i>	4	80%
Coordinate with the biorepository consortium for access to samples from requesting groups.	4-60	20%
Process and provide the laboratory assays described in the individual protocols, coordinating with the data management team at RTI.	4-60	0%
Support the development of projects and protocols that require access to biorepository samples or our core lab facility.	1-60	20%
Subtask 2: Establish the Computational Modeling Core.	1-60	
Review analytic plans for studies.	1-60	50%
Perform computational analyses per protocol and as requested.	1-60	0%
Subtask 3: Establish the Neuroscience core.	1-60	
Review the proposed neurocognitive testing platform after the Common Data Elements meeting, in the context of existing research.	1-12	50%
Review neuroimaging plans with coinvestigators, organize logistics, and work with the data management team to develop data transfer methods and appropriate analytic plans.	1-60	10%
Coordinate with site teams regarding logistics, training and QC.	1-60	0%
Subtask 3: Establish the Study Management and Biostatistics Core.	1-60	
Provide staff to meet Core responsibilities.	1-60	100%

Specific Goal 2: Perform at least four phase I or phase II clinical trials.

	Timeline (months)	
Major Task 1: Implement and complete individual clinical trials.	2-60	
Subtask 1: Complete implementation of common assessment platform after Common Data Elements project meeting.	12	10%
Subtask 2: Hire and train key personnel as needed.	6-42	75%
Subtask 3: Complete trainings on assessment, safety, and protocol issues.	6-42	10%
<i>MILESTONE: Activate sites after study monitor initiation visit.</i>	6-18	
Subtask 4: Hold monthly meetings of active site working groups	2-60	0%
Subtask 5: Hold monthly meetings of each active trial working group	2-60	0%
<i>MILESTONE: Develop standard operating procedures for each site.</i>	6-24	
Subtask 6: Prepare regulatory documents and research protocol for studies	(-3)-48	
Request pre-IND meeting to determine exemption; if necessary, submit IND upon notice of fundable score and 3 months prior to award date.	Prior to start date	5%
Refine eligibility criteria, exclusion criteria, screening protocol, finalize consent form & human subjects' protocol.	Prior to start date	30%
IRB protocol submission: NSU, RTI, and to relevant clinical sites IRB, and Military 2nd level IRB review (ORP/HRPO).	6-24	30%

<i>MILESTONE: Two studies with Local IRB (NSU & RTI), VA site, and HRPO approval.</i>	6-11	
Subtask 7: Recruitment of subjects, screening, and informed consent process.	4-60	0%
<i>Milestone: Clinical trial underway, meeting recruitment goal, and last subject completes intervention and final assessment.</i>	4-60	

Specific Goal 3: Provide a foundation of scalable infrastructure and management in support of the efficient and successful operation of the Consortium.

	Timeline (months)	
Major Task 1: Develop and maintain the Consortium Policies and Procedures Manual and By-Laws	4-60	
Develop Policies and Procedures Manual and By-Laws.	4	80%
Initiate and complete an annual review to keep By-Laws current.	12-60	10%
Distribute By-Laws and Policies.	4-60	20%
Major Task 2. Provide comprehensive Clinical Research Informatics support.	4-60	
Develop and maintain a REDCap platform for each non-regulated trial, and a Medidata Rave platform for each regulated trial.	4-60	25%
Develop and maintain data transfer procedures and capture systems for data that cannot be captured in the above-named systems.	4-60	20%
Train site staffs on electronic data capture systems.	4-60	0%
Provide data management and report development for each trial.	4-60	0%
Develop summary reports for the DSMB and other review bodies.	4-60	0%
Develop and implement randomization plans for randomized trials.	4-60	0%
Major Task 3. Provide study monitoring support for Consortium-supported clinical trials.	4-60	
Monitor data quality indicators through the electronic data capture platform(s), issue data queries on a routine basis, and review datasets for unusual patterns that may indicate problems at a site.	4-60	0%
Perform on-site monitoring visits for all supported clinical trials.	6-60	0%
Coordinate adverse event and severe adverse event reporting.	6-60	0%
Task 3. Provide study management support for clinical trials.	1-60	
Support development of proposals.	1-60	10%
In partnership with the Research Site Coordinators, support IRB protocol submissions and track all related documents and approvals.	1-60	10%
Task 5. Provide comprehensive study design and biostatistical support for trials.	1-60	
Support the identification of rigorous and innovative trial designs appropriate to the characteristics of Gulf War Illness interventions.	1-60	25%
Develop and implement statistical analysis plans.	1-60	20%
Provide support for the development of Common Data Elements.	1-12	20%
Provide support for the development of abstracts, presentations, manuscripts, and other research reports.	1-60	0%

	Timeline (months)	
Major Task 1: Projects in support of the GWICTIC Mission	8	
Subtask 1: Develop a consensus-based Common Data Elements platform for use in GWI clinical trials.	8	85%
Plan a field meeting to coincide with the February/March GWI RAC meeting at NSU.	1	100%
Form a working group to complete a review of the data elements commonly used in GWI studies and compare them to the work product of the NIH ME/CFS Common Data Elements project.	1	100%
<i>MILESTONE: Complete a review of the data elements commonly used in GWI studies.</i>	8	95%
Subtask 2: Community outreach and partnership activities	12-60	30%
<i>MILESTONE (ANNUAL): Hold regular, well-publicized webcasts with research updates targeted to the GWI patient community.</i>	12-60	20%
<i>MILESTONE (ANNUAL): Host an annual patient/research subject meeting or event with webcast at NSU or other research sites.</i>	12-60	20%

What was accomplished under these goals?

Out of the five clinical trials submitted as LOI, we were able to comprehensively develop three clinical trial protocols (Two Phase Is and one Phase II).

Clinical trial development:

- The study 1 and 2 (Enbrel/Mifepristone reboot study; Phase I and II) went through three cycles of comprehensive review with external review panel (ERP). The protocol was then written in Phase I/II design and was approved by the panel. It then was submitted to External Advisory Board (EAB) and Nova Southeastern University (NSU), RRTI and Rochester General Hospital (RGH) IRBs. RTI International (RTI) IRB is currently reviewing the submission but NSU (clinical site) and RGH (computational site) has approved the study. The protocol was pre-reviewed by HRPO and comments were received. Upon IRB approval, we made revisions and the whole packet was then submitted to HRPO in Oct for their final review. Amendments are being added to the IRBs for the revisions. We expect approval from HRPO to come in Nov.
- The study 3 (Phase I antioxidant) was reviewed in two ERP cycles and then was submitted to Boston University (BU), NSU, and RTI IRB in July/Aug. NSU IRB has provided approval letter. Both RTI and BU are currently reviewing the submission. The protocol was also submitted to HRPO for pre-review for which we are waiting on their response.
- Study 5 (Phase I Bacopa) is being rewritten with an innovative, and new virtual clinical trial design. We are currently streamlining the processes for e.g. recruitment strategies, study agent dispensing, platform, and assessments. This protocol is expected to be submitted to ERP for review in late November. This protocol is expected to go through the review process relatively quickly since the investigator already has received comments from ERP from the first two cycles of reviews. Expected timeline for its submission to IRB/HRPO preview is Dec/January. The design has shifted significantly to allow a well powered phase 2 design, testing a cost-effective platform for nutraceutical-based interventions that relies on a virtual platform for assessment and local phlebotomy services for biomarker studies. In this way we can extend recruitment to a national base, allowing veterans who do not live near a research center the opportunity to participate in clinical trials.

Clinical trial initiation:

- The Phase I (Enbrel/Mifepristone reboot study 1) is expected to initiate in Dec 2019. We are preparing the NSU site to be ready for the trial. NSU and RTI are currently developing the RedCap assessment platform and going over licensing agreements with the companies/individuals with ownership of the assessment tools selected for the study. It is expected that the platform will be ready for testing and staff training in Nov.
- The Phase I (Antioxidants, study 3 at BU) is expected to receive approvals no later than Dec 2019. We are currently working on getting the site and RedCap assessment platform ready to avoid delay in initiation once we receive HRPO approval.

GWICTIC Infrastructure:

- **Staffing:** Zena Kirby has been brought on as lead recruiter for GWICTIC Coordinating Center at NSU. She has prior experience in recruitment and clinical trials as a contractor with DoD. We currently have one scheduler and GWV recruiter (Jimmy Arocho). Jimmy Arocho has been instrumental in training the recruitment team and chairing advocacy committee. The advocacy committee is tasked, prior to approval by HRPO, to identify the locations where potential participants could be recruited other than the ones we have identified with our team's long history of clinical research in this underserved population. They have also been asked to establish presence in GWV communities as well as explore and narrow down the issues that hinder participation in clinical studies. This process will create grass roots level campaign for outreach which will be merged with our social media and presence in local community.
- **Website Development:** Institute of Neuro-Immune medicine hosts a website, which lists all the studies being conducted. We have created GWICTIC website where all research studies under GWICTIC will be added upon receipt of HRPO approval. The website will also serve as a resource for the GW Veteran community where they can find publications produced by the collaborating investigators, contacts for the researchers, different sites, recruitment team and advocacy committee. The team has already uploaded information on the five clinical trials under the consortium. Not yet published due to protocols not yet approved by IRB and HRPO, the team however is working on the back end to create recruitment related information, space for webcasts, etc. It will be published upon receiving approvals.

Coordinating center is also developing S.O.Ps to guide the publishing of information keeping compliance with the regulations.

Advisory Committee activity:

- Briefed the committee on the CDMRP grant and launch of the national GWICTIC. The committee was challenged to recruit additional members to meet the demands of national consortia. In response, Jimmy Arocho recruited the newest member, Jeff Hogan.
- The committee was charged with the continued advocating and recruiting GWV's for clinical study/trials of participants/volunteers having served in the Persian Gulf War, Desert Shield/Storm, 1990-1991.
- Committee met telephonically, to discuss Phase1 recruitment activities and to air challenges. The committee has identified that the 4-clinical sites represent challenges: cities, statistically represented by low GWV population density. The best suggestion was for taking the studies remote to vicinity CBOCs or to be prepared for travel related expenses. Moreover, it was suggested, the mirroring of a common WRIISC participant practice is to allow a primary care giver to travel with the GWV.

Advocacy committee regularly meets to discuss issues facing a GWV which hinders them to participate in clinical studies with potential of treatment. The committee also provided input in developing the recruitment materials and GWICTIC website.

NSU will host the advocacy committee on Nov 15, 2019 for an in-person meeting to brainstorm recruitment ahead of the First Phase I study initiation.

We appreciate and welcome Todd Anthony “Tony” Langeland for joining the Military Advisory Committee as the newest member to the team. He is a GWV, has participated at the WRIISC/DC, demonstrated the highest potential for patient advocacy and support; US Marine Reserves, 1983-1988; Transition to the US Army Ft. Lee, VA, POL Specialist

GWICTIC Recruitment Strategies

Recruitment Team:

Lead Recruiter, Associate Recruiter, Scheduler and Social Media Associate
National and Regional Advocates
Each site is assisting with regional recruitment and strategies

Recruitment Strategies:

Using Prior Research Study Populations
Using National, Local and Governmental Registries
Direct Recruitment and Referrals from GW Veterans
Recruitment Letters and Flyers
Social Media Outreach (Web page, Facebook and Twitter)
Collaboration with Clinical Providers and Professionals who treat GW Veterans
Community Engagement (Health Fairs, Hosting GW related events and attending GW Veteran events)
Participation Incentives (Challenge Coin, Pen, Water Bottle, Monetary Compensation, etc...)
Developing partnerships with Veterans Advisory Committee’s locally and Nationally
Creating a database of potential research candidates
Data mining current databases for potential research candidates
Traveling outside main catchment area for recruitment

Study Management and Biostatistics Core:

PY1Q2: Due to RTI’s federal reporting requirements and resulting fiscal management approach, they are limited with respect to their duration of work in the absence of a subaward. Accordingly, they did not work during February and March of this quarter. With establishment of the subaward in early April, they resumed work. The pause in work delayed protocol finalizations but also reduced funds expended by the data core during this project year. However, RTI and NSU worked closely to initiate subaward renewal well in advance of year-end for remaining performance years to prevent future work stoppages. We have fed 4 protocols in the review pipeline which will put us ahead of our timeline with approvals expected in May for Study 1, 2, and 3.

During PY1Q3, the SMAB Core:

- finalized two study protocols for review by the External Review Panel
- began Statistical Analysis Plan development for one finalized protocol
- established a shared RTI-NSU project in Microsoft Teams to support efficient workflow monitoring, timeline/deliverable tracking, and document development and sharing
- released the Consortium By-Laws v1.0 to NSU
- released the DSMB Charter and associated documents (v1.0) and began recruitment of DSMB members
- continues to plan the electronic data capture (EDC) infrastructure strategy
- began DSMB report template development

- received a brief training on Revision 1 of the ICH E9 guidelines and will propose protocol updates as needed to maintain GWICTIC alignment with the ICH guidelines

In addition, the Core completed the following internal activities:

- finalized the Quality Management Plan (v1.0) for Core activities
- added two team members to maintain support for Core activities
- implemented an internal Microsoft Teams instance to efficiently manage workflow and deliverables

During PY1Q4, the SMAB Core:

- completed recruitment of clinical, bioethics, and biostatistics members of the Data and Safety Monitoring Board
- implemented the REDCap electronic data capture (EDC) platform
- received existing REDCap study instruments from NSU and BU and began programming of revisions and additional forms
- completed DSMB report draft template development
- completed the RTI IRB submission
- provided budgets and supporting documents for Core support of two ancillary studies to be proposed under the Collaborative Consortium mechanism

In addition, the Core completed the following internal activities:

- added two team members to provide support for adverse event coding for the upcoming studies
- added one team member to provide REDCap form development support
- added one team member to provide additional project coordinator support
- implemented an internal Jira instance to support Core informatics activities and maintain full documentation of the workflow, specifications, and testing processes

Gulf War Illness Common Data Elements

The first draft documents describing the Gulf War Illness Common Data Elements initiative were posted on the Department of Defense's CDMRP website this week. You can access them via this link:

https://cdmrp.army.mil/gwirp/research_highlights/19gwi_cde_initiative_highlight.aspx

We anticipate that these documents will be posted soon on the VA website and later on the NIH/NINDS website. The military experience/environmental exposure module is still in the development phase and was not posted yet. Our intention is to collate and categorize the comments according to the domain and then to review the comments as a group. At the end of the review, we plan to create the initiate final version of the GWI CDEs and post it on the CDMRP, VA, and NIH/NIMDS websites.

External projects:

Two external research proposals were submitted with GWICTIC collaboration this CDRMP GWIRP cycle (Oct 2019). If awarded, GWICTIC will provide infrastructure and clinical research management support to these projects.

What opportunities for training and professional development has the project provided?

Nothing to Report

How were the results disseminated to communities of interest?

Nothing to report

What do you plan to do during the next reporting period to accomplish the goals?

Describe briefly what you plan to do during the next reporting period to accomplish the goals and objectives.

Initiation and completion of two Phase I studies
Fully staffed sites
Development, review and Initiation of Study 5 (Phase II with Bacopa)
Development and review of Study 4 (Phase II antioxidant)
Final review and approval of Study II (Phase II Reboot)

4. IMPACT:

What was the impact on the development of the principal discipline(s) of the project?

Development of streamlined infrastructure to conduct clinical trials using CDEs.

What was the impact on other disciplines?

Nothing to report

What was the impact on technology transfer?

Nothing to report

What was the impact on society beyond science and technology?

Nothing to report

5. CHANGES/PROBLEMS:

PY1Q2: Due to RTI's federal reporting requirements and resulting fiscal management approach, they are limited with respect to their duration of work in the absence of a subaward. Accordingly, they did not work during February and March of this quarter. With establishment of the subaward in early April, they resumed work. The pause in work delayed protocol finalizations but also reduced funds expended by the data core during this project year. However, RTI and NSU worked closely to initiate subaward renewal well in advance of year-end for remaining performance years to prevent future work stoppages. We have fed 4 protocols in the review pipeline which will put us ahead of our timeline with approvals expected in May for Study 1, 2, and 3.

Actual or anticipated problems or delays and actions or plans to resolve them

Nothing to report

Changes that had a significant impact on expenditures

Due to administrative delays and multiple review cycles at External review panel stage, we did not complete staffing which has saved us significant amount in salaries. The staffing is being completed now to prepare for initiation of Study 1 by Dec 2019. Once initiated, the study will rigorously recruit and catch up on the timeline.

Significant changes in use or care of human subjects, vertebrate animals, biohazards, and/or select agents

Significant changes in use or care of human subjects

Nothing to report

Significant changes in use or care of vertebrate animals

Nothing to report

Significant changes in use of biohazards and/or select agents

Nothing to report

6. PRODUCTS: *List any products resulting from the project during the reporting period. If there is nothing to report under a particular item, state “Nothing to Report.”*

- **Publications, conference papers, and presentations**

Journal publications.

Nothing to report

Books or other non-periodical, one-time publications.

Nothing to report

Other publications, conference papers and presentations.

Nothing to report

- **Website(s) or other Internet site(s)**

The GWICTIC site is not live yet. We will submit the link in next Quarterly.

- **Technologies or techniques**

Nothing to report

- **Inventions, patent applications, and/or licenses**

Nothing to report

- **Other Products**

Nothing to report

7. PARTICIPANTS & OTHER COLLABORATING ORGANIZATIONS

What individuals have worked on the project?

Name: Nancy Klimas
Project Role: Principal Investigator
Researcher Identifier: eCommons: nklimas
Nearest person month worked: 2.4
Contribution to Project: Overseeing the entire consortium structure. Developing the protocols. Oversees hiring of all personnel.

Name: Becky McNeil
Project Role: Co-Principal Investigator; Director, Study Management and Biostatistics Core
Researcher Identifier: eCommons: rmcneil
Nearest person month worked: 4
Contribution to Project: No change.

Name: Amanpreet Cheema

Project Role: Administrative Director
Researcher Identifier: eCommons: acheema
Nearest person month worked: 6.36
Contribution to Project: Oversaw the day-to-day operations of entire consortium structure, coordinated the Kick-off with department of Defense (including travel), contracting related documentation, ordering equipment and supplies, budgeting and ensuring the initial timely set up of the consortium structure including centralized recruiting team, sub committees and cores. Responsible for developing and writing the protocols and actively involved in the review and approval process. Developing the job descriptions for hiring of essential personnel critical for project implementation and interviewing.

Name: Alison Bested
Project Role: Clinical Core Director
Researcher Identifier: eCommons: abested
Nearest person month worked: 0.36
Contribution to Project: Oversaw the initial set up of the clinical core structure.

Name: Jimmy Arocho
Project Role: GWI Veteran Recruiter/Patient advocate
Researcher Identifier: N/A
Nearest person month worked: 6
Contribution to Project: Recruitment and outreach

Name: Maria Abreu
Project Role: Laboratory Associate Director
Researcher Identifier: eCommons: mabreu
Nearest person month worked: 3.20
Contribution to Project: Establishment of standard operating procedures for the collection, shipping, accession, and specimen processing for both the biorepository and the standard lab panel described in the narrative

Name: Mary Ann Fletcher
Project Role: Laboratory Associate Director
Researcher Identifier (e.g. ORCID ID): eCommons: mFletcher
Nearest person month worked: 0.60
Contribution to Project: Overseeing the establishment of standard operating procedures for the collection, shipping, accession, and specimen processing for both the biorepository and the standard lab panel described in the narrative

Name: Zena Kirby
Project Role: Recruiter/Program Manager
Researcher Identifier (e.g. ORCID ID): N/A

Nearest person month worked: 6
Contribution to Project: *Recruitment and outreach*

Name: *Shuntae Parnell*
Project Role: *Scheduler/recruiter*
Researcher Identifier (e.g. ORCID ID): *N/A*
Nearest person month worked: 12
Contribution to Project: *Recruitment and outreach*

Name: *Daniel Zaccaro*
Project Role: *Lead Biostatistician, Study Management and Biostatistics Core*
Researcher Identifier: *N/A*
Nearest person month worked:
Contribution to Project: *No change.*

Name: *Keith LeGrow*
Project Role: *Informatics Lead, Study Management and Biostatistics Core*
Researcher Identifier: *N/A*
Nearest person month worked:
Contribution to Project: *Management of informatics team, Electronic Data Capture platform development, forms development.*

Name: *Mallory Harris*
Project Role: *Project Manager, Study Management and Biostatistics Core*
Researcher Identifier: *N/A*
Nearest person month worked:
Contribution to Project: *Management of operations, IRB submission, DSMB coordination.*

Has there been a change in the active other support of the PD/PI(s) or senior/key personnel since the last reporting period?

Nothing to report

What other organizations were involved as partners?

Organization Name: RTI, Inc.

Location of Organization: North Carolina

Partner's contribution to the project: Collaborator (Study design, data management)

Organization Name: Boston University

Location of Organization: Boston

Partner's contribution to the project: Collaborator (Neuroscience Core, Clinical Site)

Organization Name: Rochester General Health

Location of Organization: Rochester

Partner's contribution to the project: Collaborator (Computational core)

8. SPECIAL REPORTING REQUIREMENTS

N/A

9. APPENDICES:

The Gulf War Illness Clinical Trials and Interventions Consortium (GWICTIC)



Award Number: GW170044 / W81XWH1820062

PI: Dr. Mariana Morris

Org: Nova Southeastern University

Award Amount: \$9,100,000

Approach

1. Create a collaborative consortium of clinical and scientific researchers that will rapidly implement rigorous and innovative phase I and II clinical trials for GWI.
2. Perform at least four phase I or phase II clinical trials.
3. Provide a foundation of scalable infrastructure and management in support of the efficient and successful operation of the Consortium.
4. Partner with the GWI Biorepository Resource Network and other GWI investigators, hosting a minimal data elements working group to develop a platform for core assessment and outcomes with broad consensus, for use in these studies and the wider field in support of our shared research mission.

Study 1: Phase I Optimizing dosage of Etanercept and Mifepristone for homeostatic "reboot" (Specific goal 2).

Study 2: Phase 2 Homeostatic "reboot" placebo control (Specific goal 2).

Study 3: Phase 1 Determining CNS penetrance of two antioxidants (liposomal glutathione and CoQ10 (ubiquinol)) (Specific goal 2)

Study 4: Phase 2 Study of CNS antioxidant and intranasal insulin (Specific goal 2).

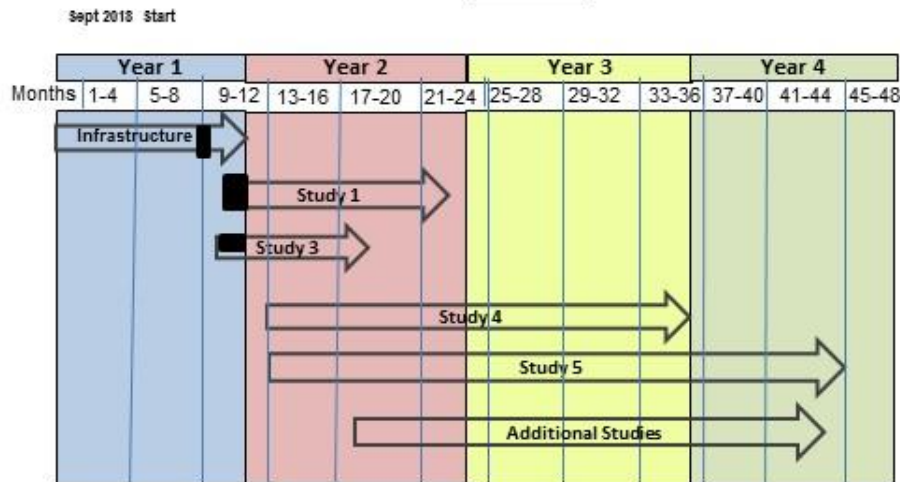
Study 5: Phase 2 Study of Bacopa for neurocognitive and immune function in GWI (Specific goal 2).



Accomplishments:

- Establishing infrastructure for streamlined clinical trial implementation per CDEs.
- Study 1, and 2, successfully developed and approved by ERP, EAB, IR. Received HRPO's pre-review and currently with HRPO for official review.
- Study 3 successfully developed and approved by ERP and EAB. Currently with IRB for review and HRPO for pre-review
- Study 5 currently undergoing complete design overhaul and developing into a Phase II virtual clinical trial.
- Assessment Platforms and EDC system being finalized
- CDEs for GWI field drafted and posted for public comments

Timeline



Goals/Milestones

FY18 Goal – Implement the overarching research Consortium structure (Task 1)

- Kick-off meetings with GWIRP staff and study PIs
- Protocol preparation and initiation of approvals
- Provide leadership and infrastructure to support the clinical trials consortium
- Establish cores of the consortium, and committees
- Prepare regulatory documents and protocols for Phase I trials
- Develop assessment platform and electronic data capture systems for Phase I studies

FY19 Goal – Implement Phase I trials (Study 1 and 3)

- Activate site post approval and site visit
- Provide data management, statistical and report development for each trial
- Recruitment for two Phase I studies
- Prepare regulatory documents and protocols for Phase II trials

FY20 Goal – Implement Phase II trials (Study 2, 4 and 5)

- Activate site post approval and site visit
- Provide data management, statistical and report development for each trial
- Recruitment for two Phase I studies

Prepare regulatory documents and protocols for Phase II trials

FY21 Goal –

- Complete the clinical studies
- Disseminate findings

