

# PARTICIPANT NEWSLETTER

## WELCOME TO THE FIRST ADD ASPIRIN PARTICIPANT NEWSLETTER

Thank you for your continued contribution to the Add-Aspirin trial. We have launched this newsletter to help the trial's participants keep in touch, if you want to, with developments in the study. This will include study results, when they become available. We will aim to include content we think will be interesting and relevant to you, but if you have particular ideas about what we should include, please let us know via your study doctor or nurse.

We hope you enjoy reading.

*The Add-Aspirin Team*



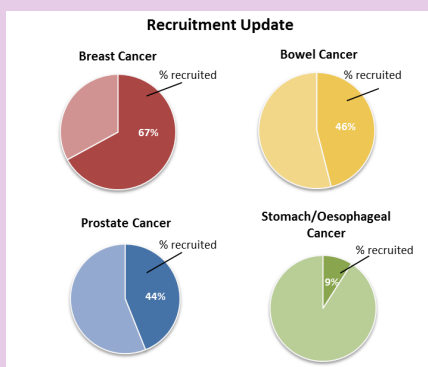
## WHY SHOULD YOU JOIN THE MAILING LIST?

We will continue to send future newsletters to your hospital. If it is your preference to have a paper copy of the newsletter, please ask your trial nurse.

However, if you prefer, you can sign up to our email mailing list and get newsletters sent straight to your inbox as they are available. We expect to send these around every 6 months. Sign-up is completely optional, and you can unsubscribe at any time too. Any family members or friends who might also be interested in trial news are also welcome to sign up. If you might be interested in joining the mailing list, go to: [www.addaspirintrial.org/patientnews](http://www.addaspirintrial.org/patientnews)

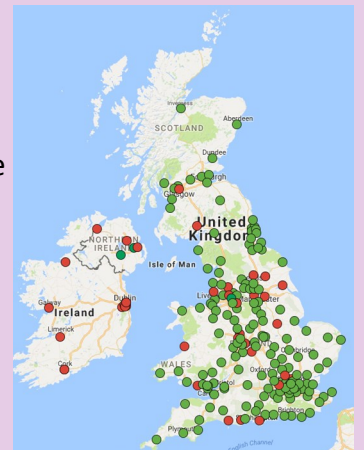
## ADD-ASPIRIN RECRUITS MORE THAN 4500 PARTICIPANTS!

We are aiming to recruit 11,000 people to the Add-Aspirin trial in total. Of these, there will be 3100 in the part of the trial about breast cancer, 2600 for bowel cancer, 2100 for stomach/oesophageal cancer and 2120 for prostate cancer. The diagram on the right shows the proportion of participants who have joined each group in the study. Some of the groups will recruit more quickly than others, and the recent addition of Indian sites has seen an improvement in recruitment to the stomach/oesophageal group. Thank you for your



contribution to this! The first participant joined the trial in October 2015 and as of March 2018 there are 4528 people enrolled.

These participants have joined the trial through the 180 hospitals that are currently open to the trial in the UK and India. Open hospitals in the UK are shown with green dots on the map to the right. There are more hospitals that are preparing to join (red dots) including some in the Republic of Ireland.



If you would like to follow recruitment more closely, we have weekly recruitment updates on the Add-Aspirin website. Follow the link:

[www.addaspirintrial.org](http://www.addaspirintrial.org)

## MESSAGE FROM THE CHIEF INVESTIGATOR (LEAD DOCTOR), PROF RUTH LANGLEY



Thank you for agreeing to join the Add-Aspirin trial.

Aspirin is used to treat heart attacks and strokes because people like you agreed to take part in earlier clinical trials. The Add-Aspirin trial is trying to find out whether aspirin is useful in the treatment of cancer. Long term data from clinical trials looking at the effect of aspirin on heart attacks and strokes, has shown that participants who received aspirin were less likely to develop cancers, and if cancers did develop they were less likely to have spread. The Add-Aspirin trial is designed to investigate the effect of aspirin on early stage cancers in more detail.

Your contribution to the trial will help us answer whether aspirin, a commonly available and low cost drug, could help stop cancer coming back in people who have had treatment for early stage cancer. This could be really important in the future to many people who, like you, have experienced cancer.

## FAQs: SHOULD I BE TAKING A PROTON PUMP INHIBITOR (PPI)?

Proton pump inhibitors (PPIs), such as omeprazole, are a type of medication that reduce the production of stomach acid. A rare side effect of aspirin is bleeding in the stomach and a PPI can be given with aspirin to offer some protection against this. **However, this is not generally recommended except for specific groups of people who are more likely to experience bleeding.**

A study reported last year, confirmed that older people (those over 75) are more likely to experience bleeding with aspirin and that, in the under 75s, few people experience bleeding. The study included people who have a higher risk of bleeding than those recruited to Add-Aspirin, such as those with a history of stomach ulcers or kidney failure. These patients would not be able to take part in the Add-Aspirin trial. Also, those over 75 joining the trial will not be given the higher dose of aspirin.

In the Add-Aspirin trial, your study doctor can decide for each individual whether or not to prescribe a PPI, and they may consider this for older patients. **If you have any concerns, please discuss these with your study doctor at your next hospital visit.**

## WE ARE INTERNATIONAL: ADD-ASPIRIN IN INDIA

Hospitals in India are now recruiting participants to the Add-Aspirin trial, including people who have had treatment for breast, stomach or gastro-oesophageal cancer. The Indian part of the trial is being co-ordinated by the Tata Memorial Centre in Mumbai which opened to recruitment in August last year. Currently 11 hospitals are open and a 1 further site will join shortly.

Unlike many new cancer treatments, aspirin is a low cost and widely available drug. In the trial we hope to show that it can be used alongside standard cancer treatments in a range of different healthcare settings. The Indian participants will make a vital contribution to the study, ensuring that the results have an international impact. They will also help us to look at whether aspirin works in the same way for different groups of people.



Thank you for reading this participant newsletter. If you have any suggestions for future editions, please let your doctor or nurse know so that they can pass the message on to us.

For more information on Add-Aspirin, go to [www.addaspirintrial.org](http://www.addaspirintrial.org)