

## **Bronchiolitis of Discharge Study (BIDS) ISRCTN28405428**

### **Data Monitoring Committee (DMC) Charter**

#### **1. Scope**

The purpose of this document is to describe the roles and responsibilities of the independent DMC for the BIDS trial, including the timing of meetings, methods of providing information to and from the DMC, frequency and format of meetings, statistical issues and relationships with other committees.

#### **2. Aims of the committee**

To safeguard the interests of BIDS participants, assess the safety and efficacy of the interventions during the trial, and monitor the overall conduct of the trial.

#### **3. Terms of reference**

The DMC should receive and review the progress and accruing data of this trial and provide advice on the conduct of the trial to the Trial Steering Committee.

The DMC should inform the Chair of the steering committee if, in their view:

- (i) the results are likely to convince a broad range of clinicians, including those supporting the trial and the general clinical community, that one trial arm is clearly indicated or contraindicated, and there was a reasonable expectation that this new evidence would materially influence patient management; **or**
- (ii) it becomes evident that no clear outcome would be obtained.

#### **4. Specific roles of DMC**

- assess data quality, including completeness (and by so doing encourage collection of high quality data)
- monitor recruitment figures and losses to follow-up
- monitor compliance with the protocol by participants and investigators
- monitoring evidence for treatment differences in the main efficacy outcome measures
- monitor evidence for treatment harm (eg SAEs)
- decide whether to recommend that the trial continues to recruit participants or whether recruitment should be terminated either for everyone or for some treatment groups and/or some participant subgroups
- suggest additional data analyses
- advise on protocol modifications suggested by investigators or sponsors (eg to inclusion criteria, trial endpoints, or sample size)
- monitor planned sample size assumptions
- monitor continuing appropriateness of patient information

- monitor compliance with previous DMC recommendations
- assess the impact and relevance of external evidence

## **5. Frequency of meetings**

The DMC will meet before the trial starts to discuss the protocol, the trial, any analysis plan, future meetings, and to have the opportunity to clarify any aspects with the principal investigators. The DMC will meet within one year of recruitment commencing.

An initial “dummy” report (showing empty tables) to familiarise the DMC members with the reporting format will be tabled at the first DMC meeting.

During recruitment, the committee will meet at least yearly, but additional meetings may be organised if required. Additional meetings will be agreed and organised between ECTU and the Chair. DMC meetings will be arranged to ensure meetings are face-to-face. Members should join the meeting by videoconference if they cannot attend the meeting in person. If, at short notice, any DMC members cannot attend at all then the DMC may still meet if at least one statistician and one clinician, including the Chair (unless otherwise agreed), will be present. If a member does not attend a meeting, it should be ensured that the member is available for the next meeting. If a member does not attend a second meeting, they should be asked if they wish to remain part of the DMC. If a member does not attend a third meeting, they should be replaced.

It is expected that DMC meetings will include a mixture of open and closed sessions. Closed and open sessions will be defined. Only DMC members and others whom they specifically invite, eg the trial statistician, will be present in closed sessions. In open sessions, all those attending the closed session will be joined by the Chief Investigator, and/or the Trials Manager, and sometimes also representatives of the sponsor, funder (as relevant).

## **6. Membership**

The members of the DMC are independent of the trial. Any competing interests, both real and potential, should be declared by completing a completing interest form and returning this to the Edinburgh Clinical Trials Unit.

The members of the DMC are:

- (1) Dr Shelia McKenzie (Chair)
- (2) Dr Mike McKean (Independent member)
- (3) Dr Carrol Gamble (DMC statistician)

## **7. Responsibilities of DMC members and associated individuals**

The DMC Chair will facilitate and summarise discussions during DMC meetings.

The trial statistician will produce (or oversee the production of) the report to the DMC and will participate in DMC meetings, guiding the DMC through the report, participating in DMC discussions and, on some occasions, taking notes.

The trial office team (eg Trial Manager, etc) usually only inputs to the production of the non-confidential sections of the DMC report.

The Chief Investigator may be asked, and should be available, to attend open sessions of the DMC meeting. The other TMG members will not usually be expected to attend but can attend open sessions when necessary.

## **8. DMC reporting**

### **8.1 Reporting during recruitment phase**

The DMC will report its recommendations in writing to the Trial Steering Committee (TSC) or sponsor's representative. This should be copied to the trial statistician and Trial Manager and if possible should be sent via the trials office in time for consideration at a TSC meeting.

Expected recommendations include:-

- No action needed, trial continues as planned
- Early stopping due, for example, to clear benefit or harm of a treatment, futility, or external evidence
- Stopping recruitment within a subgroup
- Extending recruitment (based on actual control arm response rates being different to predicted rather than on emerging differences) or extending follow-up
- Stopping a single arm of a multi-arm trial
- Sanctioning and/or proposing protocol changes

The DMC members should store the papers safely after each meeting so they may check the next report against them. After the trial is reported, the DMC members should destroy all interim reports.

If the DMC has serious problems or concerns with the TSC decision a meeting of these groups should be held. The information to be shown would depend upon the action proposed and the DMC's concerns. Depending on the reason for the disagreement confidential data will often have to be revealed to all those attending such a meeting. The meeting should be chaired by a senior member of the trials office staff or an external expert who is not directly involved with the trial.

### **8.2 End of trial reporting**

At the end of the trial there may be a meeting to allow the DMC to discuss the final data with principal trial investigators/sponsors and give advice about data interpretation

The DMC may wish to see a statement that the trial results will be published in a correct and timely manner.

DMC members should be named and their affiliations listed in the main report, unless they explicitly request otherwise. A brief summary of the timings and conclusions of DMC meetings should be included in the body of this paper.

The DMC may wish to be given the opportunity to read and comment on any publications before submission.