

RESEARCH BASE

Quick Reference Guide



Changing the World One Protocol At A Time

- 91105** A Phase III Double Blind, Placebo Controlled Study of Donepezil in Irradiated Brain Tumor Patients
- 97106** Randomized Study to Determine whether ArginMax Improves the Sexual Function and Quality of Life in Female Cancer Survivors
- 97405** Randomized Study of Soy Protein and Effexor™ of Vasomotor Symptoms of Men with Prostate Cancer

Clinical Office Staff:

Robin Rosdhal RN, OCN
Phone # 336-713-6519
Pager # 336-806-3214

Laura Gilliam RN, BSN
Phone # 336-713-6907
Pager: 336-806-4834

91105: A Phase III Double Blind, Placebo Controlled Study of Donepezil in Irradiated Brain Tumor Patients

Stephen R. Rapp, Ph.D.

*Accrual Goal: 200 patients

SCHEMA

General Enrollment Criteria

- 200 adults \geq 6 mo. post whole brain irradiation or large field partial brain for the treatment of a primary brain tumor or metastatic disease to the brain.
- Karnofsky \geq 60 or ECOG 0-2
- Must have stable disease or no evidence of disease within 3 months prior to registration.

RANDOMIZATION

donepezil tablets x 24 weeks
(Week 1-6: one 5 mg tablet per day)
(Weeks 7-24: two 5 mg tablets per day)

Placebo tablets x 24 weeks
(Week 1-6: one tablet per day)
(Weeks 7-24: two tablets per day)

Stratification will be performed by irradiation type and accrual site.

Study Procedures

Baseline: Enrollment; randomization; baseline assessment (neurocognitive battery, fatigue, mood and quality of life questionnaires)

Weeks 1-6: Administration of donepezil (5 mg daily) or placebo

Week 6: Phone interview for assessment of toxicities; if indicated increase donepezil or placebo to 10 mg/day **starting week 7**

Week 12: Return to clinic for re-assessment of toxicities and study outcomes (neurocognitive battery, fatigue, mood, and quality of life questionnaires)

Week 24: Return to clinic for re-assessment of study outcomes (neurocognitive battery, fatigue, mood, and quality of life questionnaires); termination of study

OBJECTIVES

Primary Protocol Objectives

To determine whether administration of donepezil for 24 weeks to ≥ 6 month survivors of partial or whole brain irradiation will improve the neurocognitive symptom cluster (objective cognitive performance deficits + subjective cognitive functional impairments) as compared to placebo. The specific hypothesis to be tested is:

Objective 1A. Overall cognitive performance will be improved in donepezil treated patients as compared to placebo treated patients at 24 weeks.

Objective 1B. Subjective cognitive complaints/symptoms will be improved in donepezil treated patients as compared to placebo treated patients at 24 weeks.

Objective 1C. Fatigue will be improved in donepezil treated patients as compared to placebo treated patients at 24 weeks.

Secondary Protocol Objectives

To determine whether administration of donepezil for 24 weeks to ≥ 6 month survivors of partial or whole brain irradiation will improve mood and QOL as compared to placebo. The specific hypothesis to be tested is:

Objective 2A. Cancer-related quality of life will be improved in donepezil treated patients as compared to placebo treated patients at 24 weeks.

Objective 2B. Overall mood will be improved in donepezil treated patients as compared to placebo treated patients at 24 weeks.

Eligibility Criteria

- Adults >18 years old.
- Life expectancy of at least > 30 weeks.
- Must have received a prior course of at least 30 Gy fractionated whole or partial brain irradiation for treatment of a primary brain tumor or metastatic disease to the brain.
- Must have completed radiation > 6 months prior to enrollment and have no radiographic evidence of brain disease, or stable brain disease defined as no evidence of tumor progression in the 3 months prior to enrollment.
- Patients who have undergone one or more treatments with single fraction stereotactic radiosurgery (SRS) in addition to whole or partial brain irradiation are eligible.
- Radiation treatment records must be available for all prior radiation treatments (external beam and/or SRS).
- Patients who have received PCI (prophylactic cranial irradiation) are eligible.
- Karnofsky Performance Status must be > 60 or ECOG 0-2.
- Treatment with steroids, anti-cholinergics, anti-epileptics, anti-depressants, and /or sedatives/benzodiazepines is acceptable, but the patient must be on a stable or decreasing dose at the time of study entry.
- Patients using narcotic analgesics on a stable dose and/or prn basis are eligible.
- Patients currently on a stable dose of Methylphenidate or Dexamphetamine are eligible.
- For patients with brain metastases, if extracranial primary or metastatic disease is present, it must have responded to local and/or systemic treatment. Must be stable in the 3 months prior to enrollment.
- Must not be receiving chemotherapy at the time of enrollment.
- Patient must not have any planned therapy, including surgery, brain radiation of any type, chemotherapy, or immunotherapy during the next 30 weeks for brain or extracranial primary metastatic disease.
- Hormonal therapy for patients with breast or prostate cancer is acceptable.
- Breast patients receiving therapy with Herceptin are allowed.
- Patients must be able to give informed consent to participate in the study, including signing the consent form.
- Patients must have a telephone.

Exclusion Criteria

- Patients cannot be currently taking dementia drugs, cognitive enhancers, neuroleptics, and/or anti-parkinsonian agents. For patients who have used these drugs in the past, they must not have used them in the 2 weeks prior to enrolling on the study.
- Hypersensitivity to donepezil.
- Patients may not currently be taking Ketoconazole or Quinidine
- Arrhythmias including bradycardia or heart block
- Patients who have received, GliSite or other type of brain brachytherapy, (Gliadel Wafers permitted) convection enhanced delivery of immunotoxins, and/or any other investigational modalities for treatment of their brain tumor.
- The effects of donepezil on the developing human fetus at the recommended therapeutic dose are unknown. For this reason, women of child-bearing potential and men must agree to use adequate contraception (hormonal or barrier method of birth control; abstinence) prior to study entry and for the duration of study participation. Should a woman become pregnant or suspect she is pregnant while participating in this study, she should inform her treating physician immediately.
- It is unknown whether donepezil is excreted in breast milk, for this reason women who are currently breast-feeding are not eligible for this study.

Treatment Schedule

For the first 6 weeks of the study patients will take a single 5 mg Donepezil or placebo oral dose in tablet form. Following a positive toxicity review in Week 7, patients will take two 5 mg Donepezil tablets daily (10 mg total) or placebo through Week 24 at study termination. **It will be recommended those patients take tablets (donepezil and placebo) in the evening with or without food.**

Neurocognitive Battery

The neurocognitive battery will consist of 3 test booklets: Baseline Booklet, 12 Week Booklet and 24 Week Booklet. Each booklet will be completed by the patient at the appropriate visit.

You must use the forms indicated for Baseline, 12 week, and 24 weeks assessments.

Certification Procedures

Certification for the administration of the neurocognitive battery and questionnaires will include didactic presentations, role-played administrations with Q&A and feedback. All training will be supervised by experienced test administrators (Dr. Rapp at WFUSM, June Fletcher-Steede, Site Coordinator) who will be responsible for certifying test administrators. They will also be responsible for helping staff maintain certification by having regular meetings to discuss the procedures and providing supplemental training as needed. See Appendix 11 for certification requirements.

Pegboards will be provided on loan by the WFU Research Base. A pegboard will be shipped to the site when the study is opened. Pegboards must be returned to WFU Research Base at completion of the study.

Agent Ordering and Distribution

Donepezil (Aricept) is manufactured and marketed by Eisai Inc., Teaneck NJ and distributed by Roerig Division of Pfizer Inc, New York, NY. Pfizer, Inc. will provide donepezil and placebo at no cost for patients participating in this study.

At randomization, Biologics, Inc will automatically receive notification the patient has been enrolled. Biologics will call the site to obtain further information. Stratification will be performed by irradiation type and accrual site.

Storage & Stability

Study medication should be stored at room temperature. (15°C to 30°C /59°F to 86°F)

STUDY PARAMETERS

	Baseline	Wk 6	Wk 12	Wk 24
Informed consent	X			
Demographics	X			
Performance status	X		X	X
Brain MRI (B)	X			
Serum pregnancy test (A)	X			
Flow Sheet/Toxicity Assessment	X	X	X	X
Telephone Contact Form(C)		X		
Patient Survey Form	X			
Current Medication Form	X	X	X	X
Baseline Booklet	X			
12 Week Booklet			X	
24 Week Booklet				X
Pill Count (monthly & each visit)		X	X	X

A– Serum negative pregnancy test is required in women of child-bearing potential within 10 days of registration.

B – Brain MRI Report and CD – Required within histology parameters (Appendix 16) prior to registration. MRI must be obtained with and without contrast. Submit invoice for MRI CD to Attn. Gina Enevold, MSN, 2000 West First Street, Suite 401, Winston Salem, NC 27104.

C-- Phone interview for toxicity assessment.if indicated, increase donepezil/placebo to 10mg/day starting week 7.

HISTOLOGY Parameters for Brain MRI

1. MRI for brain mets & PCI are required within 3 months of registration.

2. MRI requirements are based on histology below:

Who Grade 3 or 4 (3 months prior to registration)

Glioblastoma
Anaplastic Astrocytoma
Anaplastic Oligodendroglioma
Oligoastrocytoma
Anaplastic ependymoma
Anaplastic or malignant meningioma

Who Grade 2 (6 months prior to registration)

Astrocytoma
Oligodendroglioma
Oligoastrocytoma
Ependymoma

Who Grade 1 (1 year prior to registration)

Meningioma
Pilocystic Astrocytoma

Baseline:

- * Initial Labs: None
- * MRI required within histology parameters prior to registration.
- * Study medication will be provided free of charge.

Patients will receive (2) \$20.00 gift after the baseline visit to cover travel expenses. (Maximum total amount per patient not to exceed \$60.00)

Comprehensive Cancer Center of Wake Forest University
CCOP Research Base Protocol # 91105

BRAIN MRI CD SUBMISSION FORM

Patient Name/Initial _____ PID# _____

Date MRI performed ____/____/____ Site submitting _____

Site Contact person _____ Phone # ____/____/____

Label MRI CD with patient's initials and PID#. Place CD in hard plastic cover and protect with bubble wrap. Mail CD and invoice with this form in a protective envelope to address below:

**Attn: Gina Enevold, MSN
2000 West First Street
Suite 401
Winston Salem, NC 27104**

***** Sites will be reimbursed \$25 for providing The MRI CD. *****

Please submit invoice for the MRI CD and provide the following reimbursement information:

Name of person to whom reimbursement is to be sent:

Mailing Address: _____

Phone # ____/____/____

Patient Health Questionnaire (PHQ)

Assessing Participant Emotional Distress

Included in the test booklet is the Patient Health Questionnaire (PHQ), the last questionnaire in each booklet). The PHQ assesses depressive symptom severity which can co-occur with serious medical conditions like brain tumors. The value of the PHQ is to ascertain who among study participants is experiencing moderate to severe distress so s/he can be encouraged to seek treatment. The study drug is not known to cause or increase depression.

The PHQ is scored by first assigning a numeric value to each of the 9 items ('Not at all'=0; 'Several days'=1; 'More than half the days'=2; 'Nearly every day'=3) and then totaling item scores. The minimum score is 0 and the maximum score is 27; a score ≥ 19 indicates moderate to severe depressive symptom severity.

At the end of each assessment period, add up the total score of the PHQ. If it is ≥ 19 or if item '9' is scored 1,2, or 3, then take a few minutes to discuss the participant's distress and what s/he is doing to manage it. You should mention:

- Distress is common among persons with serious medical conditions
- Treatments are available that might reduce the distress
- Discussing your distress with your doctor, family, friends, pastor or specialist (counselor, therapist) can be helpful
- Offer assistance making a referral to a mental health specialist if the person is interested.
- Inform the participant that you will notify the physician overseeing this study at the site as well as the study PI (Drs. Rapp and Shaw at Wake Forest University School of Medicine)
- Specifically ask:
 - In the past week, have you thought you would be better off dead or wished you were dead?
 - In the past week, have you wanted to harm yourself?
 - In the past week, have you thought about suicide?
 - In the past week, have you developed a suicidal plan?
 - In the past week, have you tried to kill or hurt yourself?
 - Do you think you might commit suicide

If participant indicates s/he is **currently actively suicidal (i.e., has a plan and intent), ask him/her to remain with you while you contact the site physician. If that is not possible, ask for permission to contact a family member.**

- Inform the site physician or family member and seek their guidance on how to get immediate help for the individual.
- If no one is available, you can call 911 or accompany the individual to the nearest Emergency Department. This is exceedingly rare in studies such as this.

If participant is not actively suicidal, encourage him/her to speak with his/her doctor, family, friends, pastor or mental health professional about getting additional help.

Note occurrence on PHQ Summary Sheet.

97106: A Randomized Study to Determine whether ArginMax Improves the Sexual Function and Quality of Life in *Female Cancer Survivors*

Dr. Kathryn Greven

***Required Sample Size: 144 women have been accrued to this study. An additional 39 minority patients will be accrued. (See section 15.1 last paragraph)**

SCHEMA

- **Stratification:**

Pelvic	vs	Non Pelvic Malignancies
Performance status	vs	0, 1 vs 2
Ovary functional	vs	yes vs no

- **Randomization**

}	Arm 1
	ArginMax 3 caplets twice daily x12wks
}	Arm 2
	Placebo 3 caplets twice daily x 12 wks

OBJECTIVES

Hypothesis: ArginMax will improve sexual function for women who are at least 6 months from active treatment of cancer and are without evidence of cancer.

- **Primary Protocol Objective**

The primary goal is to determine whether ArginMax improves the quality of life and sexual function for women cancer survivors by using the FACT-G and FSFI instruments.

- **Secondary Protocol Objectives**

- 1) To assess differences in quality of life between the two groups.
- 2) To determine differences in toxicity between the two groups.
- 3) To describe the sexual function symptom clusters (if any) in women cancer survivors.
- 4) To assess the effect of race on sexual function and quality of life.

97106: A Randomized Study to Determine whether ArginMax Improves the Sexual Function and Quality of Life in *Female Cancer Survivors*

Eligibility Criteria

- Any female cancer survivor who identifies herself as concerned with her sexual quality of life and answering yes to all three of the screening questions.
 - Are you dissatisfied with your sexual quality of life?
 - Do you have problems with sexual arousal or fulfillment?
 - Are you interested in improving your sex life?
- Must express interest in sexual activity.
- At least 6 months following completion of all cancer therapy. Hormonal therapy and treatment with Herceptin are allowed.
- No evidence of active cancer based on physical exam and / or radiographic images obtained within 3 months of study.
- Absence of any mental, medical or physical disorder known to affect sexual function.
- Absence of participation in another study with an investigational study drug or device during the 30 days prior to start of study drug.
- Lab values must meet the following criteria at study entry: Hgb \geq 10gm/dl, plt \geq 100,000, ANC \geq 1500, creatinine \leq 1.7, T Bili \leq 1.5
- ECOG performance status must be 0-2.
- Must be able to take oral medication
- Must be 18 years old or older

Exclusion Criteria

- History of allergic reactions attributed to compounds of similar chemical or biologic composition to ArginMax.
- Currently taking any blood thinner such as aspirin (one 81mg. aspirin or one baby aspirin daily is allowed), Persantine, Heparin, Lovenox or Coumadin. (Low dose coumadin for catheter patency is allowed.)
- Patients currently taking Ginkgo Biloba are not allowed on this study.
- Uncontrolled intercurrent illness including, but not limited to, ongoing or active infection, symptomatic congestive heart failure, unstable angina pectoris, cardiac, arrhythmia, or psychiatric illness/social situations that would limit compliance with study requirements and/or ability for sexual function.
- Pregnant women are excluded from this study because ArginMax may be an agent with the potential for teratogenic or abortifacient effects. Because there is an unknown but potential risk for adverse events in nursing infants secondary to treatment of the mother with ArginMax, breastfeeding should be discontinued if the mother is treated with ArginMax.
- Because patients with immune deficiency are at increased risk of lethal infections when treated with marrow-suppressive therapy, HIV-positive patients receiving combination anti-retroviral therapy are excluded from the study because of possible pharmacokinetic interactions with ArginMax. Appropriate studies will be undertaken in patients receiving combination anti-retroviral therapy when indicated.
- Any planned surgery during study participation.

Treatment Schedule

All patients will take 3 caplets in the morning and 3 caplets in evening daily by mouth. Pill diaries will be provided. A Sexual Function, Quality of Life, current medications and baseline toxicity information will be assessed prior to study entry, and at 4, 8 and 12 weeks.

97106: A Randomized Study to Determine whether ArginMax Improves the Sexual Function and Quality of Life in *Female Cancer Survivors*

STUDY PARAMETERS

Baseline evaluations and labs are to be conducted within 3 months prior to registration.

	Pre-Study	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
<u>Study Agent</u>		X	X	X	X	X	X	X	X	X	X	X	X
Informed consent	X												
Demographics	X												
Medical history	X												
Concurrent medication (D)	X				X				X				X
Physical exam	X												
Pulse	X												
Blood Pressure	X												
Height/Weight	X												
Performance status	X												X
Hgb, ANC, platelets (A)	X												
Creatinine, T. Bili (A,B)	X												
B-HCG (C)	X												
TAS (Toxicity Assessment Sheet) (D)	X				X				X				X
FACT – G (E)	X				X				X				X
FSFI (E)	X				X				X				X
Screening Questionnaire	X												
Medication Diary	X				X				X				X
Radiographic Images (F)	X												
Telephone Contact Form (D)					X				X				

** 12 Week assessment should be completed after patient has finished 12 weeks of study medication.
A: Baseline labs should be completed within 3 months prior to registration.
B: Chemistry panel to include creatinine and total bilirubin.
C: Negative serum pregnancy test within 10 days of registration in women of childbearing potential.
D: Toxicity Assessment Sheet (TAS) and concurrent medication sheet needs to be filled out at weeks 4, 8 and 12 if problem noted on telephone contact form.
E: FACT-G & FSFI may be mailed to patient to fill out for weeks 4, 8 and 12.
F: Not required unless using to verify no evidence of disease.

Drug Ordering

ArginMax and matching placebo will be provided free of charge by The Daily Wellness Company. Upon completion of on-line registration Biologics will automatically receive notification of patient enrollment and will contact site personnel for additional information.

Initial labs to be drawn: CBC w/diff, plts, creatinine, total bilirubin

***Study Medication is provided free of charge.**

97405: Randomized Study of Soy Protein and Effexor™ on Vasomotor Symptoms of Men with Prostate Cancer

Sample Size: A maximum of 176 men

Recruit, Screening, and Consent
Men receiving hormonal manipulation treatment for prostate cancer

Determine Eligibility-Pre Study period
Seven days symptom recording

↓
Baseline Assessment

Total Bilirubin/SGOT	Blood pressure
Height and weight	Fact-P
Soy food questionnaire	Medications and Supplement form
	Toxicity Assessment Sheet

↓
Enroll in study [stratified: disease severity (metastatic vs non-metastatic) and baseline severity of hot flashes] and randomized: 2 x 2 factorial design

Arm A



Soy protein powder (20gm)
+ Placebo pill

Arm B



Casein powder
+ EffexorXR™-75mg

Arm C



Soy protein powder-(20gm)
+ EffexorXR™-75 mg

Arm D



Casein protein powder
+ Placebo pill

↓
2 week contact (telephone)
Hot Flash Symptom and Adherence Diary
Medications and supplement form
Blood pressure request, Toxicity Assessment Sheet

↓
4 week contact (telephone)
Hot Flash Symptom and Adherence Diary
Medications and Supplement Form
Toxicity Assessment Sheet

↓
8 week contact (telephone)
Hot Flash Symptom and Adherence Diary
Medications and Supplement Form
Toxicity Assessment Sheet

↓
12/13 week clinic visit
Blood pressure, Weight, Fact-P
Medications and Supplement Form
Hot Flash Symptom and Adherence Diary
Instruction for how to taper study pills

Time on study: 7 day pre-screening symptom recording and 12 weeks on "treatment"
Followed by 1 week taper of EffexorXR™- / Placebo

97405: Randomized Study of Soy Protein and Effexor™ on Vasomotor Symptoms of Men with Prostate Cancer

OBJECTIVES

Primary Protocol Objective

Assess the effect of soy and Venlafaxine (Effexor XR™) on the hot flash symptom severity score in men receiving hormonal manipulation treatment for prostate cancer

Secondary Protocol Objective

Assess the effect of soy and Effexor XR™ on quality of life in men receiving hormonal manipulation treatment for prostate cancer

Monitor and assess participant drop out rate

Eligibility

- Histologic documentation of prostate cancer, any stage
- Life expectancy of \geq nine months
- Prior or current androgen deprivation for treatment or control of prostate cancer to include:
 - Bilateral Orchiectomy
 - LHRH agonist (with or without antiandrogen therapy) ie: leuprolide (Lupron), goserelin (Zoladex), bicalutamide (Casodex), flutamide (Eulexin), or similar agents
 - Chemotherapy
 - Radiation (Patients may undergo concurrent radiation therapy to the prostate, prostate + seminal vesicles, and/or pelvis).
- Participant report of hot flash frequency of an average of four or more per day, as defined by sweating, flushing, sensation of warmth, night sweats (Average of 28 per week)
- Participants report of overall hot flash severity as moderate to severe
- Age \geq 21
- No allergies to soy or dairy products
- No current use of SSRIs, SNRI's, MAOIs
- No uncontrolled hypertension (160/90) or Greater than Class I American Heart Association functional capacity
- No history of mania, hypomania, bipolar disorder, or anorexia nervosa
- No history of seizures
- Adequate hepatic function (total bilirubin \leq 2) AST (SGOT) \leq 2 x institutional ULN)
- Must have a telephone
- Signed protocol-specific Informed Consent
- Participant must be willing to discontinue and/or avoid consuming soy foods or soy based supplements during study participation
- Patients should maintain same treatment and medications throughout entire study.

97405: Randomized Study of Soy Protein and Effexor™ on Vasomotor Symptoms of Men with Prostate Cancer

Exclusion

- Anticipated changes in hormone treatment regimen, example: discontinuation of current chemotherapy or anticipating surgery
- Concurrent antidepressant therapy
- History of intolerance to venlafaxine
- Recent (within 14 days) use of venlafaxine (Effexor™), monoamine oxidase inhibitor, SSRI (selective serotonin reuptake inhibitor), or SNRI (selective norepinephrine reuptake inhibitor)
- History of seizure disorder
- Current use of medication to relieve hot flashes

Treatment schedule

Pre-study period (7 days) Candidates who are screened during a clinic visit and are eligible and willing to participate in the study, will be asked to complete the informed consent form at that visit, if possible. Patients signing the informed consent form will be asked to complete a vasomotor symptom diary for the next 7 days to document their baseline level of hot flashes. This week long period will also enable study personnel to determine if the patient is able to comply with completing the diary correctly during the entire 7 day period. Candidates experiencing difficulty in completing the diary correctly and/or completely will be counseled again in correct diary completion, and will be asked to complete a second 7 day vasomotor symptom diary to see if their recording of vasomotor symptoms improves. At the end of the second 7 day period, if the patient still has not completed the diary correctly and/or completely, the candidate will not progress to the intervention phase of the study and will be dropped.

The pre-study hot flash/flush symptom diary does not have to start on a Sunday.

The candidate must have an average of four or more hot flashes per day (i.e., 28 or more hot flashes for the week) and must report that his symptoms were moderate to severe. Candidates reporting fewer hot flushes will be deemed ineligible.

97405: Randomized Study of Soy Protein and Effexor™ on Vasomotor Symptoms of Men with Prostate Cancer

Baseline After the 7 day baseline record of hot flashes, participants are randomly assigned, in a blinded fashion, to (1) Effexor XR™ 75mg po qAM and casein powder (20 gms) 1 packet/day; or (2) placebo pill po qAM and soy protein powder (20 gms with 160 mg isoflavones) 1 packet/day; or (3) Effexor XR™ 75mg po qAM and soy protein powder (20 gms with 160 mg isoflavones) 1 packet/day; or (4) placebo pill po qAM and casein powder placebo (20 gms) 1 packet/day.

The participant will be issued a supply of study powder, pills and vasomotor symptom diaries at the participating institutions discretion. During the study period, participant will take one pill and consume one packet of study powder each day.

Sunday Participants will be instructed to begin their study treatments on a Sunday in order to make it easier to complete the symptom diaries. Participants will be instructed to document symptoms in the diary each day and to indicate if they took their pill and study powder each day.

Week 2 The participant will be contacted by telephone to complete forms and check compliance. Patients should be advised to have blood pressure checked and report result to research personnel. Study coordinators will evaluate how he is doing in completing the diaries, to see if he has any questions about the study powder and pills, and to encourage compliance.

Week 4 The participant will be contacted by telephone to complete forms and check compliance. Patients will also be asked to return their 4 week Hot Flash Symptom and Adherence Diaries to the study coordinators.

Week 8 The participant will be contacted by telephone to complete forms and check compliance. Participants will also be asked to return their 8 week Hot Flash symptom and Adherence Diaries to the study coordinators.

Week 12 Patients will come to the clinic to be weighed and have their blood pressure measures. They will be asked to return their remaining powders, pill bottle, pills, and all of their remaining symptom diaries. They should be provided with enough pills to complete the taper during week 13.

Week 13 Patients will be instructed to taper their pills EffexorXR™ - / Placebo to one every other day for 1 week.

Agent Ordering and Distribution

Following patient registration, Biologics, Inc will be notified through the on-line registration process. Biologics will contact the site directly to obtain specific shipping information. All treatment required for the participant to complete the study will be delivered to the site in one shipment.

Administration

Effexor XR™ / Placebo is a tablet to be taken by mouth every morning through week 12.

EffexorXR™ /Placebo will be tapered to one pill every other day for week 13.

97405: Randomized Study of Soy Protein and Effexor™ on Vasomotor Symptoms of Men with Prostate Cancer

STUDY PARAMETERS

Physical exam and lab tests required within 3 months of registration.

Study Measure	Pre-study Period	Baseline	Week 2 Telephone contact	Week 4 Telephone contact	Week 8 Telephone contact	Week 12/13 Clinic contact
Physical Exam	X ^A					
Hot Flash Symptom Diary (Appendix A)	X ^B					
Hot Flash Symptom and Adherence Diary (Appendix B)		X	X	X	X	X
Soy Food Questionnaire (Appendix C)		X				
Toxicity Assessment Sheet (Appendix K)		X	X	X	X	X
Fact-P (Appendix F)		X				X
Medications & Supplement Form (Appendix E)		X	X	X	X	X
Total Bilirubin (Appendix H)	X ^A					
SGOT (AST) (Appendix H)	X ^A					
Height (Appendix H)		X				
Weight (Appendix H)		X				X
Blood Pressure (Appendix H)		X	X ^C			X

(A) Must be completed within the last 3 months.

(B) Must be completed in a 7 day time period.

(C) Patient needs to have blood pressure monitored and results reported to research personnel.

- * **Initial labs to be drawn at baseline: Total Bilirubin, SGOT**
- * **Study medication is provided free of charge.**
- * **Upon patient registration, Biologics will receive notification to initiate shipment of study drug.**