PARTICIPANT INFORMATION SHEET AND CONSENT FORM (Part B: Participants with HSV-2 Infection and Recurrent Genital Herpes)

Short Title:	A Study to Evaluate ABI-1179 in Healthy Participants and in Participants with Recurring Genital Herpes
Protocol Number:	ABI-1179-101
Sponsor:	Assembly Biosciences, Inc. Two Tower Place, 7th Floor, South San Fransisco, California, 94080, USA
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Phone Number:	0800 STUDIES (0800 788 3437)
Ethics Number:	**2024 FULL 20918**

This is the first time that ABI-1179 will be studied in humans with HSV-2 infection. You may not get any health benefit from the drug used in this study; but there are risks of you having a drug reaction, injury, or illness.

You are invited to take part in a clinical research study. This study will test an experimental drug, named ABI-1179, that may potentially be used for the prevention of recurrent genital herpes (RGH). ABI-1179 is an investigational product because it has not been approved by the New Zealand MedSafe or other drug regulatory authorities.

There are multiple parts to this study, and you are being asked to take part in Part B. This Participant Information Sheet will help you decide if you'd like to take part. It sets out why we are doing the study, what your participation would involve, what the benefits and risks to you might be, and what would happen after the study ends. We will go through this information with you and answer any questions you may have. We expect this will take about 30-60 minutes. You do not have to decide today whether or not you will participate in this study. Before you decide you may want to talk about the study with other people, such as family, whānau, friends, or healthcare providers. Feel free to do this. You will have the opportunity to meet one-on-one with the study doctor to discuss study information and ask any questions you may have before deciding if you would like to take part in this study.

Whether or not you take part is your choice. If you don't want to take part, you don't have to give a reason, and it won't affect the care you receive. If you do want to take part now, but change your mind later, you can pull out of the study at any time.

If you agree to take part in this study, you will be asked to sign the Consent Form on the last page of this document. You will be given a copy of both the Participant Information Sheet and the Consent Form to keep.

Please make sure you have read and understood all the pages of this document including the consent form.

1 WHY ARE WE DOING THE STUDY?

1.1 Purpose

ABI-1179 is being developed to prevent RGH due to Herpes Simplex Virus Type 2 (HSV-2) infection. HSV-2 infection is spread through sexual contact and can cause painful genital blisters or ulcers (lesions). HSV-2 affects approximately 15% of New Zealanders and there is currently no cure for the infection. Treatments have been developed to reduce the recurrence and transmission; however, these are only partially effective.

It is hoped that ABI-1179 may control HSV-2 by preventing it from reproducing itself (making new copies of the virus) inside the body, to potentially reduce the levels of virus within the body, and hopefully prevent the recurrence of genital lesions.

This study will investigate the effects of single ascending doses (SAD) of ABI-1179 in healthy participants with or without food (Food Effect) [Part A]. This study will also investigate multiple ascending doses (MAD) of ABI-1179 in individuals who are infected with HSV-2 and have been having recurrent genital lesions [Part B]. You are being asked to take part in the multiple ascending dose (Part B: MAD) part of the study.

The purpose of Part B of this study is to:

- Evaluate how safe and well tolerated ABI-1179 is, in participants with RGH.
- Measure levels of ABI-1179 in the blood over time, following multiple doses.
- Evaluate the ability of ABI-1179 to reduce level of HSV-2 virus in participants with RGH.

1.2 Study Design

Approximately 146 participants will take part in this study. Part B will consist of approximately 100 participants who are living with HSV-2 and experiencing RGH. Part B of this study is being run in several sites across New Zealand and Australia. Part B of the study requires a screening visit to determine eligibility and 10 scheduled clinic visits.

This is a randomised, blinded, placebo-controlled study:

Randomised means that the study medication you take (drug or placebo) will be assigned randomly (by chance).

Blinded means that neither you nor your study doctor will know whether you will be receiving ABI-1179 or placebo. In an emergency, the study doctor can find out what you are receiving.

Every person in Part B of the study will receive 5 doses of ABI-1179 or placebo (a substance that looks like ABI-1179 but contains no active medication). Each dose will be given by mouth, with a glass of water either in a fasted (no food) state or in a fed state, depending on the results from Part A of the study.

Up to 4 dose groups (cohorts) are planned for the study. Each cohort will receive 1 oral dose per week for 4 weeks (5 doses total). The group you are assigned to will depend on when you join the study.

In each dosing group, up to 20 participants will receive ABI-1179 and 5 participants will receive placebo. Whether you receive active investigational medicine or placebo will be assigned randomly (by chance). You will have a 4 out of 5 (80 %) chance of receiving ABI-1179.

Dose groups will be enrolled in order. You will be told which dose group you will be in. The dose levels for each cohort will be determined based on the safety results from Part A of the study.

Blood samples and other tests to measure investigational medicine levels and effects on the body will be collected at specific time points during the study, your safety will be monitored, and any changes in your health will be recorded.

1.3 Nature and Sources of Funding of the Study

This research project is being conducted and funded by Assembly Biosciences Inc., and locally sponsored in New Zealand by PPD, part of Thermo Fisher Scientific, a Contract Research Organisation (CRO) which helps conduct and monitor the study in New Zealand.

By taking part in this research study, you agree that data generated from your assessments throughout the study will be provided to the Sponsor. The knowledge gained from this data may lead to new discoveries, which would assist them in obtaining approval for a new drug and benefit the sponsor financially. There would be no financial benefit to you from these discoveries.

New Zealand Clinical Research will receive a payment from Assembly Biosciences Inc., for undertaking this research project.

No member of the research team will receive a personal financial benefit from your involvement in this research project (other than their ordinary wages).

1.4 Approval by Ethics Committee.

This study has been reviewed by an independent group of people called a Health and Disability Ethics Committee (HDEC). The ethical aspects of this research project have been approved by the **Southern** Ethics Committee.

A description of this clinical study will be available on http://www.ClinicalTrials.gov. This Web site will not include information that can identify you. At most, the Web site will include a summary of the results. You can search this Web site at any time.

2 WHAT WOULD YOUR PARTICIPATION INVOLVE?

Participation in this study will last up to approximately 15 weeks, including a screening, treatment, and follow-up period. If you wish to participate in this study, you will be asked to sign this consent form before any study assessments can be performed.

The details of the study and tests performed are discussed and shown below. During the screening period, assessments will be done to check whether the study is suitable for you. The day you have your first dose of ABI-1179 (or placebo) is called Day 1 and all other days are counted back or forward from this.

The results of the screening assessments will determine whether or not you can take part in the study. However, even if all your results are normal, you may not be guaranteed a place. We may screen more participants than we need and so you may be asked to be a reserve. This will mean you will be asked to come to the clinic and undergo the tests and procedures until the point that we have enrolled enough eligible participants. You will then be discharged and where possible we will try to include you in a later group.

2.1 Tests and Procedures

Collection of Your Information

At your Screening visit, the study staff will record your demographic information, such as your name, age, sex, race/ethnicity, address and phone number. The study doctors will also ask you questions about your health, including medical history, medications you are taking, social history (including smoking, alcohol and drug use), and contraception.

Physical Examination:
During the study, the doctor will perform a physical examination to check your health. This will include a physical examination of your anus and genital area. During this examination you can request a chaperone to be with you during this time, please ask one of our research nurses. Your height and weight will also be measured to calculate that your Body Mass Index (BMI) is within range for the study.

Electrocardiogram (ECG):
An ECG measures the electrical activity of your heart, using 12 wires attached to your chest and limbs with sticky pads.

Vital Signs:
Vital signs include recordings of your pulse, blood pressure, breathing rate, and temperature.

Blood and Urine Samples:
At study visits, blood samples are taken by direct vein puncture. On Day 1 and Day 29, a cannula (thin plastic tube) may be inserted into a vein in your arm to take blood samples. If your cannula stops working, direct vein punctures will be used.
Blood and urine samples will be collected to:

- Monitor your safety (blood cells, clotting, chemistry, fats, liver function, kidney function)
- Check whether you may be pregnant (for participants of childbearing potential only)
- Screen for recreational drugs such as cannabis, methamphetamine, and opiates
- Screen for specific infections (HIV, Hepatitis A, Hepatitis B, Hepatitis C, Hepatitis E, HSV)
- Measure the amount of ABI-1179 in the blood (pharmacokinetics)
- Measure the effect of ABI-1179 on specific immune system cells and proteins
- Measure HSV-1 and HSV-2 antibodies in your blood. Antibodies are proteins that recognise foreign substances in the body, so that the immune system can fight them off.

Alcohol Breath Testing
You will be screened for the presence of alcohol via a breathalyser. You will blow into the mouthpiece for a few seconds to measure the presence of alcohol on your breath.

Participant Swabbing and Symptoms Diary:
You will be asked to complete a diary at approximately the same time twice daily from Day 8 visit through the day before your Day 36 visit. You will record when the swab is collected and any symptoms and their location. The doctor will review this diary during your scheduled visits.

Anus and Genital Swabbing:
During the study, you will be required to complete twice daily swabbing of the anus and genital area from the Day 8 visit through the day before Day 36 visit. If any new lesions occur in the anus or genital area, you will need to collect an additional swab from the lesion site twice daily. You will record the date and time of each swabbing sample in a diary. Each used swab will be stored in a vial and then stored at your home in a box provided by the site until your next scheduled visit. You will bring all collected swabs in their vials and turn them to the site staff. You will receive training on this swabbing procedure on Day 1 and Day 8. All supplies will be provided by the site including instructions to take home that you can review at any time. You can request for a chaperone to be with you during the training time by asking one of our research nurses. You can also request a specific gender for your study doctor. If your study doctor is the opposite gender, a chaperone will be present.
Swabbing samples will be collected to:

- Monitor if HSV-2 is resistant to ABI-1179
- Check if ABI-1179 is able to reduce levels of HSV-2 in participants with HSV-2 infection with RGH.

- To screen for HSV DNA. This testing is specific to the HSV viral infection and is mandatory for the study.

Unscheduled Visits:
If any new lesions occur in the anus or genital area for the entirety of the study, you will need to return to the study site for an unscheduled visit within 48 hours of the lesion appearing, if possible. If the lesion appeared between Day 8 visit and the day before your Day 36 visit (during the required swabbing period), the study doctor will collect a swab from the lesion site, in addition to the genital swabs you have collected yourself.

Study Schedule

[a] EOS = End of Study
[b] A complete or symptom-directed physical exam will be performed at indicated visits and may be done at other points if needed
[c] Height will only measured at screening

Period	**Screening**	**Dosing**						**Follow-Up**		
Study Day	**-45 to -1**	**1**	**4**	**8**	**15**	**22**	**29**	**36**	**43, 50,**	**57 (EOS) [a]**
In-Study Study Visit	X	X	X	X	X	X	X	X	X	X
Questions about my health	X	X	X	X	X	X	X	X	X	X
Physical Exam [b]	X	X					X			X
Vital Signs	X	X	X	X	X	X	X	X	X	X
ECG	X	X	X	X	X	X	X		X[e]	X
BMI (Height & Weight)	X [c]	X					X			X
Dose Administration		X		X	X	X	X			
Review of Participant Swabbing and Symptoms Diary					X	X	X	X		
Participant Returns Collected Swabs					X	X	X	X		
Blood Sampling	X	X	X	X	X	X	X	X	X	X
Urine Sampling	X	X	X		X	X	X		X[e]	X
Pregnancy Test [d]	X	X			X		X			X
Urine Drug and Alcohol Breath Test	X	X					X			
Training for Genital Swabbing		X		X						
Self-Swabbing of Genital area		X		*Twice daily from Day 8 through to Day 35*						

[d] A blood pregnancy test will be performed at Screening for subjects of childbearing potential. Urine pregnancy tests (only for subjects of childbearing potential) will be measured on Day -1 or 1 (predose), Days 15 and 43. If the urine test is positive, a blood test for pregnancy will also be performed.
[e] ECG and urinalysis are required on Day 43 only

2.2 Who Can Take Part in this Study?

You have been invited to participate in this clinical trial as you have been diagnosed with HSV-2 infection with recurrent genital herpes.

To take part in this study you must:	
✓	Be able to give informed consent and follow the study procedures.
✓	Be aged 18 – 60 years, inclusive at the time of at the time of signing the informed consent form
✓	Have a BMI (Body Mass Index) between 18.0 kg/m^2 – 32.0 kg/m^2, inclusive
✓	Have a history of HSV-2 infection with recurrent genital herpes (with 4-9 episodes in the last 12 months) OR if currently on suppressive therapy, but had 4-9 episodes a year prior to this therapy
✓	Be willing to stop taking any herpes treatment (on the skin or orally) beginning 7 days prior to Day 1 through until Day 35

You may not be able to take part in this study if you:	
✗	Are pregnant or breastfeeding, or plan to become pregnant between now and end of study.
✗	Have taken certain prescription medication within 14 days prior to first day of dosing - please speak to the study doctor to discuss if any medications you are taking are exclusionary.
✗	Have a history of drug or alcohol abuse within 3 years prior to screening.
✗	Have a history of a significant medical problem, mental health problem or severe allergy, including acid reflux requiring acid reducing treatment.
✗	Have a history of significant drug-related allergic reactions, or drug-related skin reactions.
✗	Have donated or lost more than 500mL of blood within 60 days prior to screening or donated plasma within 7 days of screening, or plans to donate blood or plasma thorugh end of study.
✗	Have an episode of genital herpes on Day 1 prior to dosing.
✗	Have had cancer in the last 5 years, with exceptions – please ask the study doctor
✗	Have received an investigational agent within the last 30 days prior to Dosing. Please inform your study doctor of all recent use of investigational agents.
✗	Have an illness (such as the flu, common cold or COVID-19) within 5 days prior to receiving the first dose of study medication.

✗	Have a history of immunosuppression or have had long-term (more than 14 days) treatment with systemic steroids or other agents that regulate the immune system with 6 months prior to screening.
✗	Have had pritelivir, or any other HPIs (helicase primase inhibitors) within 12 months prior to screening. Your study doctor can discuss this with you.

If you think that any of the above applies to you, or you have one of the conditions described, please discuss these with your study doctor for more thorough assessment to see if you can take part in this study or not. Additionally, there are other criteria that you will need to meet in order to be eligible for the study, but the study doctor will discuss this with you at your screening visit.

2.3 Study Instructions

It is important that you follow the instructions you are given and attend all scheduled clinic visits. It is also possible that the study doctor may schedule extra visits or tests for you, if considered necessary. In the event that an assessment is not performed on the day outlined within the Schedule of Activities within this document, the assessment may be performed at your next study visit.

You will be given a Participant Identification Card if you participate in this study, stating the name of the study and the study doctor's contact information. This card should be carried with you at all times so that you can contact the study doctor at any time and so you can show it to any other doctor, dentist, or pharmacist that you might visit while in this study.

At each visit, the study staff will ask you questions about your health and the medications you are currently taking. You should always report any changes in your health, unusual feelings, or symptoms to the study staff. It is also important that you do not start, stop, or make changes to any of the medications you are currently taking without first discussing this with your study doctor.

Please inform the study doctor or staff if you decide to stop having the ABI-1179 for any reason. If you stop receiving investigational medicine for any reason (either your choice or on the advice of your study doctor) your study doctor will ask you to continue to attend the unit for follow-up assessments. If you decide to stop participating in the study for any reason your study doctor will discuss treatment choices with you.

When you are an inpatient with us, we will provide you with all of your meals. Meals play an important role in clinical trials due to their relationship with metabolism of the investigational medicine (the way that the drug is processed and broken down by the body). By signing this document, you are agreeing that you will be compliant with all meal requirements on this study. In certain cases, we are able to cater for dietary requirements, please discuss this with the study team before joining the study.

Restrictions:

- You must be willing to stop any herpes therapy (on the skin or orally) at least 7 days prior to Day 1 dosing, through to Day 35.
- You must be willing to obtain the required genital swabs during the study.
- You must be willing to maintain a diary of swabbing details and symptoms during the study.
- You must not consume any alcohol for at least 48 hours prior to the first dose, through to Day 29.
- You must not use illicit drugs (including marijuana) before screening until your last study visit.
- You must refrain from consuming grapefruit, pomelo, or Seville oranges whole fruits or juice for 7 days prior to dosing on Day 1 until Day 29.
- You must not donate blood or plasma until your last study visit.
- You must not engage in strenuous exercise beyond what you are used to from Day 1 until your last study visit.
- You must be fasted (no food, only water) for at least 8 hours prior to your screening visit and all of your follow up visits. You may need to fast at least 10 hours prior to a dosing visit and continue fasting for 4 hours after dosing. Study staff will remind you prior to each visit that you need to be fasted.

- You should keep away from excessive sun light/ultraviolet (UV) light from Day 1 through Day 35 since studies have not been conducted to evaluate the effect of UV light on ABI-1179.
- You should not take any herbal/dietary supplements (i.e. vitamins, St. John's Wort, ginkgo biloba, garlic supplements), over the counter (except paracetamol) or prescription medications not previously approved by your study doctor for at least 14 days before Day 1 and through your final study visit.

3 WHAT ARE THE ALTERNATIVES TO PARTICIPATION?

You do not have to take part in this research project to receive treatment for recurrent genital lesions due to HSV-2 infection. Other options are available. Your study doctor can discuss the risks and benefits of other options with you before you decide whether or not to take part in this research project. You can also discuss the options with your local doctor.

4 WHAT ARE THE POSSIBLE BENEFITS, COSTS AND RISKS TO YOU PARTICIPATING?

4.1 Benefits

We cannot guarantee or promise that you will receive any benefits from this research. Your condition may get better, but it could stay the same or even get worse. The information from this study might help to develop better treatments in the future for HSV-2 infection.

4.2 Reimbursement and Costs

All tests required to be done for this study will be paid for by Assembly Biosciences Inc., and there will be no cost for you to participate in this study. You will still have to pay for the costs of your regular medical care that are not a part of this study.

You will be reimbursed the sum of $3,500 (before tax), following the final study visit**.** However, the timing of reimbursement is flexible and can be adjusted to suit your needs – please discuss this with study staff if you have any concerns regarding your reimbursement. **We are required to deduct withholding tax at the applicable rate you have declared in the IR330C form**. You will be responsible for any other tax obligations (e.g., ACC). If you are GST registered, it may be possible for you to submit a GST invoice. Contact paymentforms@nzcr.co.nz if you would like to discuss this further.

The payment will be made after you complete the study, to cover your time and inconvenience. If you are receiving a benefit or allowance, your usual payments may be affected. Your tax statement will state that you were paid from your dosing day through to your final study visit.

To be able to receive reimbursement as part of this study you must be eligible to work in NZ (e.g. as a NZ resident, NZ citizen, or with the appropriate work visa) for the entire duration of the study. If you are no longer eligible to work in NZ during the study, you will be withdrawn from the study and your reimbursement will be a pro-rata of the total amount.

You will be reimbursed for travel and parking (if you use personal transport) or you can use uber or taxi for your study visits, which can be arranged and paid for by New Zealand Clinical Research if you live in the metropolitan area. Please discuss arranging study transport with the site study staff. If you live outside this area, we will discuss your travel costs individually. Full reimbursement requires completion of all visits according to study requirements. If you are withdrawn from the study for medical reasons, having received trial medication, you will receive reimbursement in full.

If you leave the study of your own choice or are released from the study for non-medical reasons, you will receive a partial reimbursement (a pro-rata reimbursement) according to how far you contributed to the study.

If you complete the screening visit assessments and are found not eligible for the study, you will not receive any reimbursement.

4.3 Possible Risks and Disadvantages?

Medications often cause side effects. You may have none, some or all the effects listed below, and they may be mild, moderate, or severe. There may also be unknown side effects from taking ABI-1179 alone or with other drugs you may be taking. If you have any of these side effects, or are worried about them, talk with your study doctor. Your study doctor will also be looking out for side effects.

What are the Risks or Side Effects of ABI-1179?

ABI-1179 is an experimental medication being studied for the treatment of RGH. There is no information yet on the use of ABI-1179 in humans. At this stage of development, the risk considerations for ABI-1179 are based only on nonclinical data, meaning data from laboratory and animal studies. ABI-1179 could potentially benefit patients with RGH in the future.

The safety of ABI-1179 was studied in animals. The overall results show that there is no significant risk of genetic changes that may lead to cancer from exposure to ABI-1179 in the non-clinical study. No harmful drug-related events to the central nervous (brain and spinal cord) system, respiratory (breathing) system, or circulatory (heart) system were observed in the animal studies. Overall, ABI-1179 was well-tolerated in animals for 28 days of daily dosing. There were no drug-related findings in some animals at any dose tested. In other animals there were changes in the adrenal and thyroid gland (where hormones are released, liver, spleen and minimal reductions in red blood cell counts. None of these changes were considered harmful.

To ensure participant safety, the study is designed to increase in dose over the study period, including a maximum dose step-up and a maximum dose. There are also individual participant and study stopping rules in the study. You will undergo complete and frequent clinical and laboratory safety monitoring. A Data Review Committee and the study Investigators will perform ongoing safety data reviews.

If you feel you may be experiencing any side effects or new signs or symptoms during the study, or you are worried about them, talk with your study doctor, who will be looking out for side effects throughout your study participation.

It is currently not possible to know whether taking ABI-1179 may cause cancer or birth defects in humans. The risks for ABI-1179 in pregnancy are unknown. Do not participate in this study unless you understand and accept this risk and are willing to take appropriate measures to avoid pregnancy. To be in this study, highly effective birth control is required; your study doctor can provide details on recommended types of birth control.

If new findings develop during this study that might suggest a chance for significant side effects when taking ABI-1179, or that might affect your willingness to participate, your study doctor will inform you and your legally authorised representative (if applicable) as soon as possible.

Some medications may not be safe when taken with ABI-1179. You should contact the study doctor before starting any new medications or supplements (including vitamins or herbal medicines).

As with other drugs, ABI-1179 may cause an immune reaction or allergic reaction. Symptoms may include rash, flushing, itching, sneezing or runny nose, abdominal pain, diarrhoea, swelling of face, tongue or throat, dizziness, lightheaded or fainting, trouble breathing, irregular or racing heart rate, and seizures. These reactions can be life-threatening / fatal. If you have a skin reaction or adverse event, the study doctor may take a photograph to document the event. This will not be of sensitive areas.

Because ABI-1179 has never been tested in humans, there is always a risk of some unexpected serious, life-threatening side effects occurring following the administration of a new experimental treatment. It is unknown whether some unexpected serious or life-threatening side effect could occur with ABI-1179. You will be monitored closely for them and treated if they occur.

Talk to your study doctor if you have any questions or would like more details on possible side effects.

What are the Risks or Side Effects of Study Procedures?

Blood Sample Collection & Cannulas:
Risks include bruises, swelling with itching, and slight bleeding. The area may become inflamed. In rare cases, it may result in a blood clot, an infection or nerve damage. As needles can cause pain, you may feel light-headed or faint.

ECG Tests and Holter Monitoring:
Sometimes the sticky pads used to attach the leads can cause skin irritation (redness / itchiness).

Physical Examination:
The physical examination will include examination of your anus and genital area. This means you will be asked to remove some items of clothing so a full examination can be done. You can request a chaperone to be with you at the time of the physical examination, please ask one of our research nurses. Please note that if the doctor is of the opposite gender, a chaperone will be present. You may request a specific gender for your study doctor.

Genital Swabbing:
After a swab test you may have a little bit of bleeding or discomfort where your skin was swabbed.

4.4 Contraception

Reproductive Risks for Sexually Active Participants of Child-Bearing Potential

The effects of ABI-1179 in pregnancy and breastfeeding are unknown, but there is a risk it may cause birth defects or foetal deaths, and/or be passed on in breast milk. If you are pregnant or breastfeeding, you cannot take part in this study.

If you are sexually active and of child-bearing potential (able to become pregnant), it is very important that you do not become pregnant during this study. A person of child-bearing potential is any pre-menopausal person who may become pregnant. If you are unsure if this applies to you, please check with the study doctor before you start the study medication. **You must use one of the methods of contraception listed below**, from at least screening through until your last study visit:

A highly effective method (less than 1 pregnancy per 100 people using the method for one year) e.g.:

- Intra-uterine device (IUD) containing either copper or levonorgestrel (e.g., Mirena®)
- Sterilisation (e.g., vasectomy of sole male partner at least 6 months prior to dose, bilateral tubal ligation ('clipping or tying tubes' or hysterectomy)

Hormonal methods of contraception, other than the Mirena®, are not acceptable forms of contraception for this study. If you are using a hormonal method (other than Mirena®) you will not be able to participate in this study.

You and your partner are also encouraged to use a barrier form of contraception, from your dose of investigational medicine through until your last study visit. Barrier methods of contraception include:

- Condoms (external or internal) – not to be used together due to increased risk of breakage
- Diaphragm ('cap')

Please note that barrier methods alone are not highly effective methods of birth control.

Total abstinence from heterosexual intercourse during the entire period of risk associated with the investigational medicine (from screening until your last study visit) is considered an acceptable form of contraception if this is in line with your preferred and usual lifestyle.

If you are unsure which method of birth control you are using (or want to start using) and whether it is acceptable for this study, please ask the study doctor for more information.

You must also agree to not donate eggs, from screening through until the end of the study.

If you do become pregnant during the study, you must tell the study doctor as soon as possible. If you do become pregnant you will be asked to sign a separate consent form, to allow the Sponsor to collect information about your pregnancy and the outcome of your pregnancy.

Reproductive Risks for Sperm in Sexually Active Participants

The effects of ABI-1179 if passed on through semen are unknown, but there is a risk it may cause birth defects or foetal deaths. **You are responsible for informing your sexual partner of these possible risks.**

If you are sexually active and have any partner who is of child-bearing potential (meaning a partner who may become pregnant) it is very important that you use contraception during this study. You and your partner must use one of the contraception options listed above for participants of child-bearing potential, from at least screening through until 90 days after your last study visit.

A hormonal method of contraception (e.g., pill, implant, injection) is also acceptable. This method of contraception must inhibit ovulation.

You and your partner must also use a condom (external or internal) from screening through until at least 90 days after your last study visit.

Please note that barrier methods alone are not highly effective methods of contraception unless you have had a vasectomy at least 6 months prior to your dose of investigational medicine.

Total abstinence from heterosexual intercourse during the entire period of risk associated with the investigational medicine (from screening until 90 days after your last study visit) is considered an acceptable form of contraception if this is in line with your preferred and usual lifestyle.

If a pregnancy occurs, you must report this to the study doctor as soon as possible. Your partner will be asked to give consent for their information and their infant's information to be collected for monitoring purposes.

You must also agree not to donate sperm, from dosing until at least 90 days after your last study visit.

5 WHAT WOULD HAPPEN IF YOU WERE INJURED IN THE STUDY?

As this research study is for the principal benefit of its commercial sponsor Assembly Biosciences Inc., if you are injured as a result of taking part in this study you **won't** be eligible for compensation from Accident Compensation Corporation (ACC).

However, Assembly Biosciences Inc has satisfied the **Southern** Health and Disability Ethics Committee that approved this study that it has up-to-date insurance for providing participants with compensation if they are injured as a result of taking part in this study.

New Zealand ethical guidelines for intervention studies require compensation for injury to be at least ACC equivalent. Compensation should be appropriate to the nature, severity and persistence of your injury and should be no less than would be awarded for similar injuries by New Zealand's ACC scheme.

Some sponsors voluntarily commit to providing compensation in accordance with guidelines that they have agreed between themselves, called the Medicines New Zealand Guidelines (Industry Guidelines). These are often referred to for information on compensation for commercial clinical trials. There are some important points to know about the Industry Guidelines:

- On their own they are not legally enforceable and may not provide ACC equivalent compensation.

- There are limitations on when compensation is available, for example compensation may be available for more serious, enduring injuries, and not for temporary pain or discomfort or less serious or curable complaints.
- Unlike ACC, the guidelines do not provide compensation on a no-fault basis:
- The Sponsor may not accept the compensation claim if:
    - Your injury was caused by the investigators, or;
    - There was a deviation from the proposed research plan, or;
    - Your injury was caused solely by you.

An initial decision whether to compensate you would be made the by the sponsor and/or its insurers.

If they decide not to compensate you, you may be able to take action through the Courts for compensation, but it could be expensive and lengthy, and you might require legal representation. You would need to be able to show that your injury was caused by participation in the trial.

You are strongly advised to read the Industry Guidelines and ask questions if you are unsure about what they mean for you:
https://www.medicinesnz.co.nz/fileadmin/user_upload/2015__Medicines_New_Zealand_Compensation_Guidelines__FINAL.pdf

If you have private health or life insurance, you may wish to check with your insurer that taking part in this study won't affect your cover.

6 WHAT WILL HAPPEN TO MY TEST SAMPLES?

Blood, urine, and genital swab samples will be collected throughout the study. These samples will be used for various tests.

Some of the samples will be used for regular routine blood counts and blood chemistry, to monitor your general health. All these routine samples will be sent to LabCorp Central Lab (Singapore) for testing. These samples will then be stored at a central laboratory (Azenta) in Indianapolis, USA for up to 5 years after the study is completed and will be destroyed by internationally accepted means.

All other study samples (pharmacokinetics and HSV serology, and genital swabs) will be sent to central laboratories Aliri Bioanalysis in Utah, USA, University of Washington in Washington, USA, LabCorp in Singapore and Signature Diagnostics Pittsburgh, USA, for testing. These samples will then be stored at a central laboratory Azenta, Indianapolis, USA, University of Washington or Assembly Biosciences (South San Francisco) in USA for up to 5 years after the study is completed and will be destroyed by internationally accepted means.

The maximum amount of blood collected from each participant during the study will be up to approximately 122 mL. For comparison, a standard blood donation at a blood collection centre, is about 470 mL. Samples collected by New Zealand Clinical Research will be identified by your study number, year of birth, and sex, to allow study doctors to quickly respond to any abnormal results. Before the results of these tests are sent to the Sponsor, your identifiable information will be removed and replaced with a code.

The proposed blood tests include a screening test for HIV and for viral Hepatitis A, B C and E. Signing the consent form means that you agree to have this testing performed. It is important to understand that a positive screening test does not necessarily mean you have the disease. Should you receive a positive screening result for HIV or either Hepatitis A, B, C or E then the study doctors will provide initial counselling and medical advice and will assist in arranging any follow up tests that you require. HIV, Acute (newly diagnosed) Hepatitis B/C are all 'notifiable diseases', which means that it is required by law to notify government health authorities of any new cases.

6.1 Are There Any Cultural Considerations?

You may hold beliefs about sacred and shared values about your tissue samples and/or data originating from this tissue. The cultural issues associated with sending your tissue samples and data overseas and/or storing your tissue and data should be discussed with your family/whānau as appropriate. If you wish to know more about the study, we can arrange for an Investigator to come and talk to you and your whānau. New Zealand Clinical Research are committed to preserving and upholding mauri through karakia and the handling of samples. You are invited to perform a karakia at the time of sample collection, please inform staff if you would like any assistance. However, due to your samples being sent to countries outside of New Zealand, a karakia will not be able to be performed at the time of your sample disposal.

Personal and health information is a tāonga and will be treated accordingly. The following data sovereignty principles are in place to ensure that the data generated from this research is protected and may benefit Māori now and into the future. The principles included are whakapapa, whanaungatanga, rangatiratanga, kotahitanga, manaakitanga and kaitiakitanga. Clinical trials are often driven by Sponsor companies overseas and involve very few Māori as participants.

Consideration of Tikanga and Tiriti obligations are highly valued at New Zealand Clinical Research whereby staff attend Tiriti and Tikanga workshops to acknowledge and understand Māori cultural values and principles. New Zealand Clinical Research also maintain contact with the Co-Chair of the Māori Governance Rōpu for Ira Tātai Whakaheke and Te Puna Oranga Māori Research Review Committee for consultation of Māori health services.

Before deciding whether to participate in this study or not, it may be appropriate to discuss your participation with your whanau/family and consider both the potential risks and benefits that may be involved. If you need cultural support, please let us know and we will arrange this for you. For additional cultural support or tikanga advice, please contact your local Māori support contact listed at the end of this document.

7 WHAT ARE THE RIGHTS OF PARTICIPANTS IN THE STUDY?

7.1 Participation is Voluntary

Participation in any research project is voluntary. If you do not wish to take part, you do not have to. If you decide to take part and later change your mind, you are free to withdraw from the project at any stage. This will not affect your routine treatment/medical care which you may otherwise receive, your relationship with New Zealand Clinical Research or with those treating you.

If you do decide to take part, you will be given this Participant Information and Consent Form to sign and you will be given a copy to keep.

7.2 New Information

Sometimes during the course of a research project, new information becomes available about the medication that is being studied. If this happens, your study doctor will tell you about it and discuss with you whether you want to continue in the research project. If you decide to withdraw, your study doctor will make arrangements for your regular health care to continue. If you decide to continue in the research project, you may be asked to sign an updated consent form.

Also, on receiving new information, your study doctor might consider it to be in your best interests to withdraw you from the research project. If this happens, they will explain the reasons and arrange for your regular health care to continue.

7.3 Privacy and Confidentiality and Right to Access Information Collected During the Study

What will Happen to my Information?

During this study, the study doctors, researchers, nurses and other New Zealand Clinical Research staff will record information about you and your study participation. This includes the results of any study

assessments. Information such as your name, sex, age, race/ethnicity, address and phone number will be on the demographics page for the study so we can identify you correctly at visits and contact you. This information may be used to obtain health records (detailed below) but is not supplied to anyone overseas.

If needed, **information from your hospital records and your usual doctor (GP) may also be collected**, and your GP will be notified about your participation in the study. You cannot take part in this study if you do not consent to the collection of this information.

Type of information	Where is it stored?	Who can access it?
Identifiable Information – *this information can be traced back to you*		
• Information collected from you • Laboratory results • Participant Symptoms and Swabbing Diary • Photograph if required for any adverse events, e.g. skin reactions (these will not be taken of sensitive areas)	• **Paper**: stored securely under restricted access at NZCR. Following study completion paper forms are transferred to a secure site and stored for 15 years, then destroyed • **Electronic**: stored on secure NZCR servers (in New Zealand and Australia)	• NZCR staff • Your GP / usual doctor • Local laboratory staff to process and report your screening and safety tests • Sponsor/CRO monitors to ensure the study is run properly and data is collected accurately • Representatives from the Sponsor if you make a compensation claim as a result of study-related injury. Identifiable information is required to assess your claim • Ethics committee, regulatory authorities, and sponsor/CRO representatives if the study or site is audited • Medical Officer of Health for positive test results for a notifiable disease (i.e., HIV, Hepatitis B/C) • The study doctor may share your information with other people, in the rare event of a serious threat to public health or safety, or to the life or health of you or another person OR if the information is required in certain legal situations
De-identified (coded) Information – *this information is only labelled with your unique study ID*		
• Study assessment results are uploaded into the study database to be analysed • De-identified photographs, if required (as above)	• **Electronic**: will be stored-on a secure platform and will be retained indefinitely. Storage will comply with local and/or international data security guidelines.	• The Sponsor, for the purposes of this study. • People and companies working with or for the Sponsor, for the purposes of this study. • Regulatory or other governmental agencies worldwide.
Anonymised Information – *this information cannot be traced back to you (code removed)*		

• All de-identified information for which the code has been removed	• **Electronic**: stored on a secure sponsor-managed database	• Access not restricted

Future Research Using Your Information
Your coded information may be used for future research related to ABI-1179 or recurrent genital herpes.

This future research may be conducted overseas. You will not be told when future research is undertaken using your information. Your information may be shared widely with other researchers or companies. Your information may also be added to information from other studies, to form much larger sets of data.

You will not get reports or other information about any research that is done using your information.

Your information may be used indefinitely for future research unless you withdraw your consent. However, it may be extremely difficult or impossible to access your information or withdraw consent for its use once your information has been shared for future research.

Security and Storage of Your Information
During the study, your information will be stored on paper forms at NZCR and electronically on secure servers. When the study has finished, paper forms will be transferred to a secure site and stored for at least 15 years, then destroyed. De-identified information in electronic form will remain on a secure platform and will be retained indefinitely. Storage will comply with local and/or international data security guidelines.

Risks
Although efforts will be made to protect your privacy, absolute confidentiality of your information cannot be guaranteed. Even with coded and anonymised information, there is no guarantee that you cannot be identified. While the risk is currently very small, the chance that someone might access and misuse your information (for example, by making it harder for you to get or keep a job or health insurance) might increase in the future as people find new ways of tracing information.

Your coded information is being sent overseas. Other countries may have lower levels of data protection than New Zealand. There may be no New Zealand representation on overseas organisations which make decisions about the use of your information. There is a risk that overseas researchers may work with information in a way that is not culturally appropriate for New Zealanders.

Rights to Access Your Information and Results
You have the right to request access to your information held by the research team. You also have the right to request that any information you disagree with is corrected.

Please ask if you would like to access your screening and safety tests during the study. You may access other study-specific information before the study is over, but this could result in you being withdrawn from the study to protect the study's scientific integrity.

If you have any questions about the collection and use of information about you, you should ask a study doctor.

8 WHAT WILL HAPPEN AFTER THE STUDY ENDS, OR IF I WANT TO PULL OUT?

8.1 If You Decide to Withdraw

You may withdraw your consent for the collection and use of your information at any time, by informing your Study Doctor. Please notify a member of the research team before you withdraw. This notice will allow that person or the research supervisor to discuss any health risks or special requirements linked to withdrawing, such as follow up visits.

If you withdraw your consent, your study participation will end, and the study team will stop collecting information from you. Information collected up until your withdrawal from the study will continue to be used and included in the study. This is to protect the quality of the study.

8.2 Why the Study Might be Unexpectedly Stopped

This research project may be stopped unexpectedly for a variety of reasons. These may include reasons such as:

- Unacceptable side effects and safety issues
- Poor recruitment
- Poor study conduct

8.3 Will the Study Medication Continue to be Available After the Study Finishes?

ABI-1179 is at an early stage of development. Therefore, after the research finishes, you will not be able to continue to receive ABI-1179. When the research project ends the study doctor will discuss treatment choices with you.

8.4 Results

When the research project ends the study data must be analysed, so the results of the study may not be available until about a year after the research finishes. The study doctors and/or Sponsor may decide to discuss or publish the results of the study. This may include publication in journals, presentation at conferences or other professional forums. In any publication, information will be provided in such a way that you cannot be identified. Results of the study will be provided to you. If you do not wish to receive a summary of the study results when they become available, then please inform NZCR staff.

9 WHO DO I CONTACT FOR MORE INFORMATION OR IF I HAVE CONCERNS?

If you have any questions, concerns, or complaints about the study at any stage, you can contact:

Dr Ed Gane
Phone: (09) 373 3474 or 0800STUDIES (08007883437)
Email: finch.auckland@nzcr.co.nz

If you want to talk to someone who isn't involved with the study, you can contact an independent health and disability advocate on:

Phone: 0800 555 050
Fax: 0800 2 SUPPORT (0800 2787 7678)
Email: advocacy@advocacy.org.nz
Website: https://www.advocacy.org.nz/

Māori cultural support is available through:

The Office of the Chief Advisor Tikanga, He Kamaka Waiora, Te Whatu Ora (Health New Zealand) – Waitemata and Auckland

Mobile: 021 0203 1167
Phone: 09 486 8320 ext 43204
Email: hkwresearch@waitematadhb.govt.nz

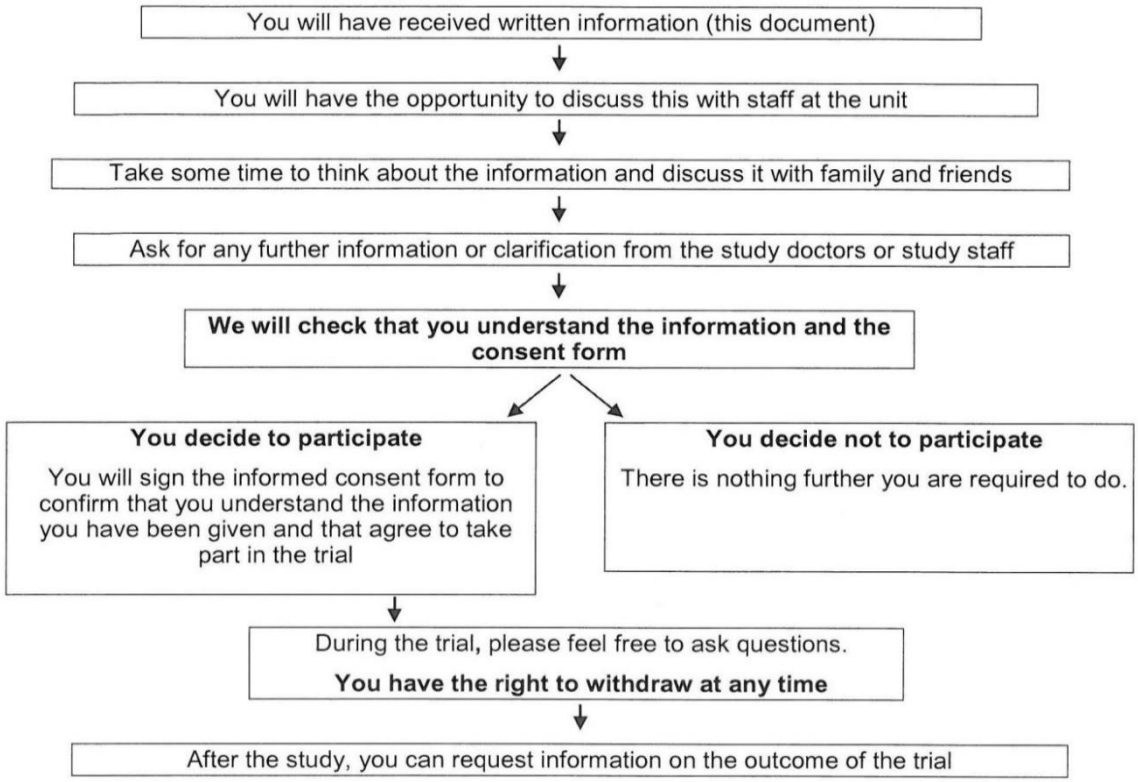
You can also contact the health and disability ethics committee (HDEC) that approved this study on:

Email: hdecs@health.govt.nz
Phone: 0800 400 569 (Ministry of Health general enquiries)

10 WHAT ABOUT ANY OTHER QUESTIONS I MAY HAVE?

11 DO I HAVE TO DECIDE STRAIGHT AWAY?

No, you do not have to decide straight away. You should take some time to consider whether or not to participate, we will be in touch in a week or so to discuss your decision**.** The following steps are useful in helping you reach a decision.



CONSENT FORM
(Part B: Participants with HSV-2 Infection and Recurrent Genital Herpes)

Short Title:	A Study to Evaluate ABI-1179 in Healthy Participants and in Participants with Recurring Genital Herpes
Protocol Number:	ABI-1179-101
Principal Investigator:	Dr Ed Gane

***Please let study staff know if you require an interpreter*.**

Declaration by participant:

- I have read the Participant Information Sheet, or have had it read to me in a language I understand, and I fully comprehend what it says.
- I have been given sufficient time to consider whether or not to participate in this study.
- I have had the opportunity to use a legal representative, whanau/ family support or a friend to help me ask questions and understand the study.
- I am satisfied with the answers I have been given regarding the study and I have a copy of this consent form and information sheet.
- I understand that taking part in this study is voluntary (my choice) and that I may withdraw from the study at any time without this affecting my medical care.
- I consent to the research staff collecting and processing my information, including information about my health (including information collected from my GP and other Health Providers).
- If I decide to withdraw from the study, I agree that the information collected about me up to the point when I withdraw may continue to be processed.
- I understand that there may be risks associated with the medication in the event of myself or my partner becoming pregnant. I undertake to inform my partner of the risks and to take responsibility for the prevention of pregnancy.

- I agree to my tissue samples being sent overseas, and I am aware that these samples will be disposed of using established guidelines for discarding biohazard waste.
- I agree to an approved parties including Sponsor or CRO representatives for monitoring and auditing, auditor appointed by the New Zealand Health and Disability Ethic Committees, or any relevant regulatory authority or their approved representative reviewing my relevant medical records for the sole purpose of checking the accuracy of the information recorded for the study.
- I understand that my participation in this study is confidential and that no material, which could identify me personally, will be used in any reports on this study.
- I understand the compensation provisions in case of injury during the study.
- I know who to contact if I have any questions about the study in general.
- I understand my responsibilities as a study participant.
- I understand I will need to complete anogenital swabs at home, and bring these samples in on indicated study days.
- I understand that part of my study participation will include sensitive anogenital examinations.
- I understand that I will receive a summary of the study results and if I do not wish to receive this, I will inform site staff.
- I consent to my GP or current provider being informed about my participation in the study and of any significant abnormal results obtained during the study.

Statement by Participant I hereby consent to take part in this study. I understand that I will receive a signed copy of this consent form for my records.

_____ (full name)

_____ (signature)

__ __ / __ __ __ / __ __ __ __ (Date DD/MMM/YYYY)

Statement by Consenter (Investigator/designee) I have discussed this study with the above-named participant. The participant appeared to fully understand the information provided about the study.

_____ (full name)

_____ (signature)

_____ (project role)

__ __ / __ __ __ / __ __ __ __ (Date DD/MMM/YYYY)