**STUDY PROTOCOL AMENDMENT SUMMARY**

DATE: **28-Aug-23** PROTOCOL NUMBER: **00924**

PROTOCOL TITLE: **FLORUISH (Following Longitudinal Outcomes to Understand, Report, Intervene and Sustain Health of Infants, Children and Adolescents who are HIV-Exposed Uninfected) Study**

PRINCIPAL INVESTIGATORS: **Kathleen M. Powis MD, MPH, MBA, Joseph Makhema MBBS, Jennifer Joa, MD, MPH**

The following amendments are being proposed for the study above:

1. The Co-Investigator and Key Personnel list has been updated to reflect changes to the study team.
2. We have revised Cohort A to include recruitment of up to 700 pregnant women from 500. This revision is reflected in schema, sample size, section 2.4, and in section 3.2.1.
3. Amendments to the FLOURISH sample size can be found throughout the document to reflect the increase in recruitment goals of pregnant women. These revisions can be found in the synopsis, schema, sections 2.1, 2.4, 3.24, 5.0, and 5.2.

1. We have included an additional specimen collection of breastmilk for mothers who are living with HIV and still breastfeeding to understand the how levels of cell-free and cell-associated HIV in breastmilk corelates with systemic maternal viral load and risk of infant HIV acquisition. The revisions associated with this addition can be found in the following sections: 1.0, 2.2, 5.3 (Table 4b), 5.4 and 5.5 as well as on the adult participation consent form and brain ultrasound consent form.
2. For infants who were enrolled at birth and have consented to the brain ultrasound component of the FLOURISH study, at the existing 6-month visit, we will collect a stool sample. This is necessary to compare the gut microbiome at birth and at 6-months of age. Revisions can be found in section 5.5 as well as on the brain ultrasound consent form.
3. Reimbursement for mothers who consent into the ultrasound component will increase to 200 Pula at their study visit given the addition of breastmilk collection. Revisions were made on the Consent form for Ultrasound Visit.
4. Inclusion criteria will no longer limit newly enrolled pregnant women to have an intent to breastfeed. This revision is reflected in Table 3 as well as the adult consent form.
5. Recruitment of HUU children into Cohort B has been revised to allow for recruitment of previous BCPP participants in section 3.2.2 and 4.2.
6. Clarification of the visit structure and timing has completed in sections 5.4 Delivery Visit and 5.5 Newborn, Term corrected, and 6-Month Visit. The addition breast milk collection has been added (see revision #4 above) and clarification on timing of ultrasound visits have been added to section 5.5.
7. Hospitalization data for FLOURISH children will be collected in real-time if the study staff is made aware outside of in-person visits or quarterly calls. This adjustment is reflected in section 5.6.
8. The addition of questions regarding stigma will be asked to adolescents who are 12 years or older and whose caregivers have disclosed their HIV status, as well as to caregivers who are living with HIV. These questions will only be asked at the in-person study visits during enrollment and follow-up. This addition can be found in table 4a, 4b, 5a, and 5b, as well as the adult consent form, consent form on behalf of child, and assent form.
9. Caregivers will be asked about intimate partner violence during the in-person study visits. These revisions are reflected in Table 4b and 5b as well as the adult consent form.
10. The addition of HIV testing and counselling has been added for follow-up visits for children who do not have documentation of negative test results or are not in accordance with national guidelines depending on the child/adolescent’s age. This revision can be found in table 5a and in section 5.9.2.