Date

Dear Dr *Name,*

Re: Participant name:
Date of Birth:
Hospital Number:
Address:

RE: **mulTi-Arm Therapeutic study in pre-ICu patients admitted with Covid-19 – Experimental drugs and mechanisms (TACTIC-E)**

Your patient was randomised to: Ambrisentan and Dapagliflozin arm

I am writing to inform you that your patient has agreed to participate in the above clinical trial at local hospital name.

TACTIC-E is a multicentre, randomised, parallel arm, open-label platform trial sponsored by Cambridge University Hospitals NHS Foundation Trust. The aim of the study is to test the hypotheses that:

a) Immune modulatory therapy is superior to standard of care alone (in that reduction of exaggerated host immune response to COVID-19 in patients at late stage 1/early stage 2 disease, reduces the composite of progression of these patients to organ failure or death);
b) Combination therapy with SGLT-2 and Endothelin Antagonism is superior to standard of care alone (in that antagonism of these pathways in patients at late stage 1/early stage 2 disease, reduces the composite of progression of these patients to organ failure or death);

More specifically, this study is evaluating the efficacy of the interventions of EDP 1815, or the combination therapy of Ambrisentan and Dapagliflozin taken together, compared to standard of care treatment.

Your patient has been selected for the Ambrisentan and Dapagliflozin arm.

The combined therapy arm is administered orally; Ambrisentan 5mg once daily, for 7 – 14 days with Dapagliflozin 10mg once daily, for 7-14 days. Drug-drug interactions are currently unknown for ambrisentan Therefore, caution is recommended in the case of co-administration. Dapagliflozin has a number of known interactions. Dapagliflozin may add to the diuretic effect of thiazide and loop diuretics and may increase the risk of dehydration and hypotension. Insulin and insulin secretagogues, such as sulphonylureas, cause hypoglycaemia. Therefore, a lower dose of insulin or an insulin secretagogue may be required to reduce the risk of hypoglycaemia when used in combination with dapagliflozin in patients with type 2 diabetes mellitus.

It is thought that utilising a maximum dose of 5mg of ambrisentan in this study combined with dapagliflozin will significantly mitigate any effects of fluid retention associated with ambrisentan use.

For further information on the study, I have enclosed a copy of the Participant Information Sheet for your reference, however, if you have any queries or require further information please contact the study team (Insert local contact details including contact number and website if available).

In the event of an emergency please call:

Insert emergency telephone number which must match the telephone number on the PIS

Should you have any concerns about your patient participating in the study, please feel free to contact a member of the study team

Yours Sincerely,

PI name

Study Team Contact Information:

Local Contact Name

Hospital

Role

Telephone number

Encs: Participant Information Sheet, version *(insert version number)* dated *(insert date)*