BIOREPOSITORY LIST

BIOREPOSITORY 1. The Center for AIDS Research (CFAR) Network of Integrated Clinical Systems (CNICS)

Project description: The CNICS consortium is made up of ten sites across the U.S that collect and maintain biological specimens from people living with HIV (PLWH). All specimens are directly linked to participants' comprehensive clinical data and are made available to any qualified investigator with a feasible and relevant research question. Overall, from March 25, 1987 to 2019, CNICS has collected and stored 1,043,374 aliquots of biological specimens from 18,188 unique PLWH at 139,148 timepoints.

>**Specimens stored:** frozen plasma, viably frozen peripheral blood mononuclear cells (PBMCs), snap frozen PBMCs, saliva specimens https://sites.uab.edu/cnics/specimens/

BIOREPOSITORY 2. The UW / Fred Hutch Center for AIDS Research (CFAR) Translational Research Subcore (TRS) HIV Specimen Repository

Project description: The HIV Specimen Repository is a collection of frozen plasma and viably frozen peripheral blood mononuclear cells (PBMCs) donated by people living with HIV (PLWH). Any person who is cared for at the University of Washington HIV Clinics and is enrolled in University of Washington Patient Registry may join the Repository. Recruitment is ongoing and participants are asked to voluntarily donate up to 34 mL of blood annually. Coded clinical data extracted from the patients' electronic medical record is linked to these repository specimens, enabling translational studies on the virologic, immunologic, genetic, and demographic determinants of HIV disease and associated comorbidities. Overall, from October 29th, 2002 to May 19th, 2022 the Repository has collected and stored 105,589 aliquots of biological specimens from 1,576 unique PLWH across 9,359 timepoints.

>Specimens stored: frozen plasma and viably frozen peripheral blood mononuclear cells (PBMCs)

BIOREPOSITORY 3. Partners PrEP Study specimens in the International Clinical Research Center Specimen Repository

Project Description: The Partners PrEP Study was a randomized, phase III clinical trial of antiretroviral pre-exposure chemoprophylaxis (300 mg Tenofovir once daily versus 300 mg Tenofovir/200 mg emtricitabine once daily versus matching placebo) provided to the HIV-1 exposed partner in HIV-1 sero-different heterosexual African couples to reduce risk of HIV-1 acquisition. The sample size was 4758 couples, recruited from 9 clinical trial sites in Kenya and Uganda with 133 HIV-seroconversion events. Enrollment in this study began in July 2008 and was completed in November 2010, with follow-up concluded in 2012. In total the ICRC repository retains over 1.4 million specimen remainders from the Partners PrEP Study. The study collected self-reported clinical information on active TB disease from all participants living with HIV-1. In addition, in a subsequent study 49 female participants had peripheral blood mononuclear cells (PBMCs) from 118 visits evaluated by interferon gamma-release assay (IGRA) with 16 participants identified as IGRA positive, and 6 participants found to have converted from IGRA negative to IGRA positive.

Specimens Stored: serum, plasma, whole blood, vaginal swabs, and semen. A subset of participants and visits with PBMCs and whole blood RNA.

BIOREPOSITORY 4 Seattle-King County household contacts to patients with pulmonary TB:

Project Description: Through the Seattle TB Control Program we enrolled 569 close contacts of patients with pulmonary TB to identify risk factors for latent TB infection (LTBI). From these close contacts we collected DNA from Asian and Black participants among whom 143 LTBI test positive and 106 LTBI test negative. Candidate gene analyses from this cohort have been published (PMID: 27485354; PMID: 28463648) **Specimens Stored:** DNA

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Contact: David Horne, MD (<u>dhorne@uw.edu</u>)

BIOREPOSITORY 5. PHIV in western Kenya screened for TB:

Project Description: We enrolled PHIV in western Kenya to screen for TB. Among 383 participants, pulmonary TB was diagnosed in 5. Collected data included information on prior receipt of TB preventive therapy. Published manuscripts on this cohort include the sensitivity of different methods for TB screening (PMID: 33632173) and associations between TB transcriptional risk profiles (RISK6) and prior receipt of TB preventive therapy (PMID: 35608118).

Specimens Stored: mRNA, DNA

BIOREPOSITORY 6. TB aerobiology, infectiousness, and transmission (TBAIT)

>**Project Description:** This prospective study is currently enrolling adults with newly diagnosed pulmonary TB in Nairobi, Kenya. Participants are followed for 12 months and undergo studies to determine infectiousness, cough recordings, lung function and other assessments. Household contacts are also enrolled and followed for 12 months to assess IGRA status over time.

Specimens Stored: Plasma, mRNA, DNA, sputum, urine, M. tuberculosis isolates **Contact Videlis Nduba**, **MBBS** (<u>vnduba@gmail.com</u>)

BIOREPOSITORY 7. Prospective evaluation of novel diagnostics for tuberculosis in KwaZulu-Natal, South Africa (PROVE TB)

Project Description: This prospective study enrolled approximately 800 adults and 200 children. In the adult cohort enrolled ~ 275 HIV-infected patients with active TB, 105 HIV-uninfected persons with active TB, and 365 HIV-infected patients without active TB. In the pediatric cohort enrolled ~10 HIV-infected children with active TB, 10 HIV-exposed, uninfected (HEU) children with active TB, and 30 HIV-uninfected children with active TB. TB status was confirmed by Xpert and MTB culture.

Specimens Stored: Dried Blood Spots, Whole Blood EDTA, Plasma EDTA, Serum, PBMC, urine, tongue swabs. **Contact:** Paul K. Drain, MD, MPH, FIDSA (<u>pkdrain@uw.edu</u>)

BIOREPOSITORY 8. Prospective evaluation of novel diagnostics for tuberculosis in KwaZulu-Natal, South Africa (PROVE TB 2)

Project Description: A 2-component prospective cohort study of adults with signs and symptoms of having active TB disease. Component I – a minimum of 750 adults with signs or symptoms of active TB are currently enrolled in a prospective cohort study.

Component II – a minimum of 125 participants with active TB disease, as defined by either by sputum Xpert or MTB culture or started on TB therapy based on clinical suspicion, are currently enrolled into a longitudinal cohort. The enrollment period will be 18 months and all participants will be followed for at least 6 months.

Specimens Stored: Dried Blood Spots, PaxGene Whole Blood, Plasma EDTA, Serum, urine, tongue swabs. **Contact: Paul K. Drain, MD, MPH, FIDSA** (<u>pkdrain@uw.edu</u>)

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