PARTICIPANT INFORMATION SHEET *for Whanau*

BerriQi for Kids: Boysenberry and apple product for respiratory recovery in kids *(Whakamatautau haumanu tamaraki)*

Your child is invited to take part in the BerriQi kids study. This Participant Information Sheet will help you (as the parent or guardian of a prospective research study participant) decide whether or not to let your child participate in the study. It sets out why we are doing the study, what you and your child's participation would involve, what might be the benefits and risks to you and what will happen after the study ends. If you are interested in your child participating, then we will go through this information with you in detail and answer any questions you may have. You do not have to decide today whether or not to give permission for your child to participate in this study. Before you decide, you may want to talk about the study with other people, such as whānau, friends, or healthcare providers. Feel free to do this. If you agree to let your child participate 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 this Participant Information Sheet and the Consent Form to keep. This document is 8 pages long, including the Consent Form. Please make sure you have read and understand all the pages.

Introduction

Seasonal upper respiratory tract infections are nearly unavoidable, contributing to school absenteeism, employee absenteeism, and reduced quality of life. According to Education Counts website, in New Zealand absenteeism increases dramatically in the colder months of term 2 (April-June) and term 3 (July-September), during which seasonal illnesses are the highest (Figure 1). In 2019, before the Covid 19 disruptions, the rate of primary school students regularly attending school dropped from 72.8% in term 1 to 57.6% and 59.6% in term 2 and 3 respectively. One of the major reasons for school absence is respiratory tract infection.

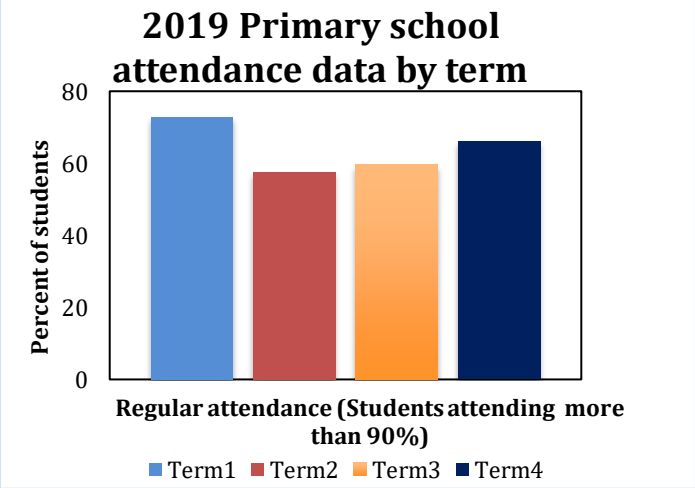


Figure 1. Regular attendance rates (students attending more than 90%) in New Zealand primary schools (2019 data).
Ministry of Education: Education Counts (2019) Compiled from Data: Attendance (XLS), accessed at https://www.educationcounts.govt.nz/statistics/attendance

Anagenix Ltd has developed a natural whole fruit-based product which may support immune and lung health.

Previous studies by Plant and Food Research Ltd found that Boysenberries reduce lung inflammation and symptoms from pollution and respiratory stress in animals. Further studies in animals showed that a unique combination of Boysenberries and apples reduce inflammation and mucus over-production. Anagenix Ltd partnered with Plant & Food Research to develop BerriQi, an ingredient that is a blend of Boysenberry and apple at the dose that has been shown to be effective in animal studies. Plant & Food Research is currently doing another study in Palmerston North to see if BerriQi can help prevent lung damage from ozone exposure in adults.

BerriQi is a freeze-dried powder made from pureed New Zealand Boysenberries (grown in Te Tau Ihu Nelson/Tasman region) and apples. It is not an extract and contains all the natural constituents of the fruit in their natural ratios. All the products for the studies come from the same batch and are standardised to anthocyanin level.

BerriQi may support the immune system during recovery, but this has not yet been tested in children. A specific anthocyanin, responsible for the purple red pigment in Boysenberries, is also responsible for most of the immune benefits in BerriQi. Boysenberries grown in New Zealand produce nearly 30% more anthocyanins than berries grown in the rest of the world due to increased UV intensity in New Zealand. A specific anthocyanin supports a type of immune cell called macrophages to switch from fight mode (during an active infection) into clean-up mode and further into recovery mode (Figure 2).

Figure 2. BerriQi helps macrophages to move from fight mode to recovery mode.

Aim of the study

This study aims to find out if the benefits of BerriQi translate to children experiencing respiratory symptoms.

Study Procedures

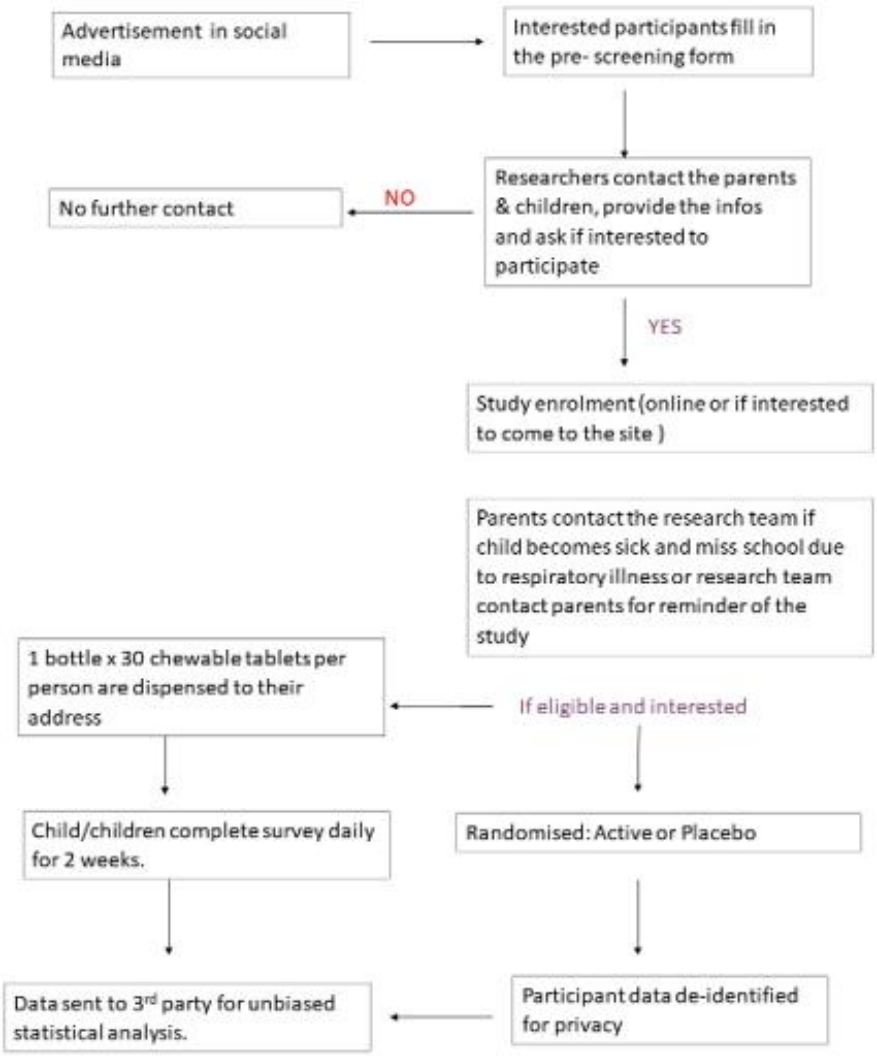
If your child is between the age of 5-13 years and are interested in participating in a clinical study that can help with respiratory illness (cold, cough etc), then this study might help you. If you are interested and willing for your child to take part in the study, you have been provided with more information about the study by our research team, including this information document and an assent form for your child. Our research team will answer any questions you and your child may have about participation either by a phone call, email or in person if required. If you are satisfied with everything, then you will be asked to sign the consent form on behalf of your child and also help your child fill in the assent form. You will then need to

provide the signed consent and assent form to our study team member. If you are not interested after reading this information, then you will not be contacted further.

You will need to contact the research team if your child gets sick due to respiratory illness and misses school. .
. We will then randomise your child to receive either BerriQi chewable tablet or placebo (a heat treated BerriQi chewable tablet in which the anthocyanins are no longer active). Your child needs to start taking the chewable within 2 days of missing school. A member of our study team will deliver the product to you or have it sent by courier. The sick child needs to consume 2 chewable tablets every day for 14 days and fill in the questionnaires (appendix 1) every day. The questionnaires can be completed online or in paper format, whichever is preferable, and may require some help from you. Your child will also be asked if they took any other medication (over the counter or antibiotics) on that day, if they experienced any adverse effects that day, and if they attended school that day.
The research team might contact you if you have signed the consent form earlier and have not contacted us during term 2 or 3 when cold and flu is most common, just as a as a reminder about the study. You will then be asked if you are still interested in the study. If not, you will not be contacted again.

You will also be asked if anyone else from your household would like to try the investigational products (IP). The IP is only recommended for children 5 and above as the chewable tablet may pose a choking hazard to younger children. If any other household members would like to try the IP, they will be given the same product as the participating child which has a 50/50 chance of being a placebo product. Household members trying the IP will not be asked to participate in the study or complete the questionnaires. Household members trying the IP will not be eligible for study assistance in the case of adverse events (see page 5); only participating children will be covered in the case of adverse events.

The study procedure is summarised below:



Summary of the study procedure

What your child needs to do?
Consume 2 chewable tablets of given product every day.
Fill in the symptom questionnaire every day. (See page 7)

Ingredients	MG/TAB
Active Ingredient	
BerriQi®	500
Excipients	
Xylitol DC	312
Magnesium stearate	33

Will I be compensated for my participation?

We do not anticipate that your child's participation will incur any costs. We appreciate your participation in this study and are happy to provide the IP not only to the participant but also to the interested family members free of charge.

Possible risks and benefits:
This study poses minimum risk as BerriQi is a natural fruit product and surpasses national and international standards for food and supplement quality and safety. However, if your child is allergic to Boysenberry or apple then you may observe allergic symptoms like redness, itching, swelling of lips or inside the mouth, on the tongue or soft palate. If you observe any of these symptoms, then your child should stop taking the product immediately. Your child is not eligible for the study if he/she is known to be allergic to berries or apples.

We will provide investigational products (active or placebo) - both are plant-based natural health products from Boysenberry and apples - to the entire family. The product provided may help reduce the severity of respiratory symptoms. The placebo is a blend of heat-treated Boysenberry (no anthocyanins) and apple. Therefore, despite the absence of anthocyanins the placebo still contains all of the other constituents of Boysenberries and apples.

What if Something Goes Wrong?
In the unlikely event your child gets injured as a direct result of participation in this study you won't be eligible for compensation from ACC, as this research study is for the principal benefit of its commercial sponsor, Anagenix Ltd.
However, Anagenix Ltd has satisfied the Health and Disability Ethics Committee that it has up-to-date insurance for providing participants with compensation if your child is injured as a result of taking part in this study. Compensation would be available from Anagenix Ltd, in line with industry guidelines. You are strongly advised to read the industry Guidelines and ask questions if you are unsure about what they mean for your child.

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

Should your child experience any adverse events or a severe decline their health during the 14-day study period in which they are consuming the IP and answering questionnaires that may be related to the IP or the course of illness, please anticipate the following course of action:

1. Please contact a member of our study team.
    a. If we notice a worsening of symptoms reported on the electronic daily questionnaire scores, we may also contact you.
2. Our study team member will contact our study Research doctor who will determine if emergency action should be taken, if an in-person GP visit is warranted, and if your child should withdraw from the study.
3. Should your child require assessment by a GP
    a) Our study will cover the cost of the assessment.
    b) Our study will cover the cost of subsequent treatment, should the GP determine that the adverse event was in relation to the study or the IP.

You may have your friend, family, or whānau support/help you understand the risks and/or benefits of this study or any other explanation you require.

What will happen to the information?
During this study, the study team (researcher, study doctor, data management team from the University of Auckland) and school administration staffs will have access to your identifiable information. The following groups may have access to your child's identifiable information.

- Your child's GP, if any adverse event is reported
- The sponsor and its representatives, if you make a compensation claim for study related injury, Identifiable information is required inorder to assess your claims.

De-identified Information
To make sure your personal information is kept confidential, information that identifies your child will not be included in any report generated by the researcher. Instead, your child will be identified by a code. The researcher will keep a list linking your code with your name, so that you can be identified by your coded data if needed.

The following groups may have access to your coded information

- The Investigator and suitably trained and experienced study staff, to conduct the study.
- Third parties Biostatistician (University of Auckland) will have access for data analysis
- The Health and Disability Ethics Committee, to comply with legal and regulatory duties.
- Health, regulatory, or government authorities, to comply with legal and regulatory duties.

The results of the study may be published or presented, but not in a form that would reasonably be expected to identify you.

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. The risk of people accessing and misusing your information (e.g. making it harder for you to get or keep a job or health insurance) is currently very small, but may increase in the future as people find new ways of tracing information.

Right to Access your information
You have the right to request the information held by the research team. You also have the right to request that any information you disagree with is corrected.

Right to Withdraw from Participation
Your child has the right to withdraw from this study at any time. Your contribution is entirely voluntary. If your child chooses to withdraw from the study, data that has already been collected and processed will continue to be used.

Anonymity and Confidentiality
Study files, and other information that you provide will be strictly confidential. Nothing that could identify your child will be used in any reports on this study. All samples and measurements will be coded and recorded against this code to keep your child's identity confidential. Coding will be numerical, and your child will not be identifiable by this code. When the analysis is complete, the researchers will analyse the whole group's data and report on averages. This data will be used for scientific publications, presentations, marketing, or media release. No person will be identifiable from the analysis. At the end of the study, your

records will be stored for no longer than 10 years once the youngest participant turns 16, in a secure place at the research unit of Anagenix Ltd. All computer records will be password protected. Study data will be under the care of the main study investigators. All future use of the information collected will be strictly controlled in accordance with national regulations.

Ownership Rights.
Information from this study may lead to discoveries and inventions or the development of a commercial product. The rights to these will belong to Anagenix Ltd. You and your family will not receive any financial benefits or compensation, nor have any rights in any developments, inventions, or other discoveries that might come from this information.

Contact Details
Should you have further inquiries you can contact the study coordinator and the research team at any stage:

Dr. Aahana Shrestha, Clinical Study Manager
Phone:+64221837265
Email:aahana.shrestha@anagenix.com

Dr Starin McKeen, Product Champion BerriQi & Feiolix
Email: starin.mckeen@anagenix.com

Emma Graham, Product (Actazin & Livaux), Sustainability & Quality Champion
Email: emma.graham@anagenix.com

For Māori cultural support please contact:
Ngāwaina Joy Shorrock
Pou Mauri Ora | Cultural Manager
Email: ngawaina-joy.shorrock@ngatirarua.iwi.nz

You can also contact the health and disability ethics committee (HDEC) that approved this study on:
Email: hdecs@moh.govt.n

APPROVED BY THE HEALTH AND DISABILITY ETHICS COMMITTEE ON
18th July 2024 Reference Number -2024 FULL 20075

CONSENT FORM
Parental Permission for Children participation

THIS FORM WILL BE HELD FOR A PERIOD OF 10 YEARS

Project title: **BerriQi for post respiratory infection recovery in kids**

Principal Investigator: Dr Starin McKeen
Co-Investigators: Dr Doug Rosendale
Co-Investigators: Ms Emma Graham
Co-Investigator & Study Manager: Dr Aahana Shrestha

I have read the Participant Information Sheet and I have understood the nature of the research. I have had the opportunity to ask questions and have them answered to my satisfaction.

- I consent voluntarily for my child to participate in this research.
- I have had the opportunity to use support from a family (whānau) member or a friend to help me ask questions and understand the research.
- I understand that my child is free to withdraw participation at any time, but the data already collected and processed will still be analysed
- I **wish/ do not wish** (please circle) to receive the summary of findings. I understand that there may be a delay between data collection and the publication and availability of the research results.
- I understand that the results from this study will be used for scientific publication, presentations, media release and marketing purpose.
- I understand that data will be kept for 10 years once the youngest participant turns 16, after which they will be destroyed.
- I, the undersigned, certify that I am the parent or legal guardian of the child and that I have the right to make decisions for my child that affect his/her well-being.

Name of the parents/local guardian _____

Signature _____ Date _____

Researcher's Signature_____ Date _____

APPROVED BY THE HEALTH AND DISABILITY ETHICS COMMITTEE ON 18th July 2024 Reference Number: **2024 FULL 20075**