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# Figure S1. Ethics committee approval letter

8/2/2019

Approval Letter (Amendment)



<b>NAME OF ETHICS COMMITTEE/IRB</b> Medical Research Ethics Committee, University Malaya Medical Centre	<b>MREC ID NO:</b> 2018112-6848
<b>ADDRESS :</b> LEMBANG PANTAI, 59100 KUALA LUMPUR, MALAYSIA	
<b>PROTOCOL NO</b> (if applicable) : P1-PKPD-Metabolomic	
<b>TITLE:</b> A Phase 1, Open Label, Randomized, Three-Period, Crossover, Single Dose Oral Administration Of Andrographis Paniculata And Metformin Clinical Trial In Healthy Volunteers Under Fasting Condition.	
<b>PRINCIPAL INVESTIGATOR :</b> LUQMAN BIN IBRAHIM	<b>SPONSOR</b> Bantuan Kecil Penyelidikan Universiti Malaya

The following item ☒ have been received and reviewed in connection with the above study to conducted by the above investigator.

<input checked="" type="checkbox"/> Application for Amendment/Notification to Research Project (form)	Ver.No : -	Ver.Date : 29-07-2019
<input type="checkbox"/> Annual Study Report/Study Closure Report	Ver.No : -	Ver.Date : -
<input type="checkbox"/> Serious Adverse Event Report	Ver.No : -	Ver.Date : -
<input checked="" type="checkbox"/> Other documents		
1) GCP certificate Dr Luqman bin Ibrahim	Ver.No : 2.0	Ver.Date : 16-07-2019
2) Revised Clinical Trial Insurance	Ver.No : 2.0	Ver.Date : 05-11-2018
3) Clinical Trial Protocol P1-PKPD-Metabolomic	Ver.No : 2.0	Ver.Date : 16-07-2019
4) P1-PKPD-Metabolomic Patient Information Sheet English	Ver.No : 2.0	Ver.Date : 16-07-2019
5) P1-PKPD-Metabolomic Patient Information Sheet Malay	Ver.No : 2.0	Ver.Date : 16-07-2019
6) P1-PKPD-Metabolomic Informed Consent Form English	Ver.No : 2.0	Ver.Date : 16-07-2019
7) P1-PKPD-Metabolomic Informed Consent Form Malay	Ver.No : 2.0	Ver.Date : 16-07-2019
8) P1-PKPD-Metabolomic Advertisement	Ver.No : 2.0	Ver.Date : 16-07-2019
9) Curriculum vitae Dr Luqman Ibrahim	Ver.No : 1.0	Ver.Date : 23-07-2019

and the decision is ☒

- ☒ Approved (Expedited)  
☐ Approved (Full Board)  
☐ Rejected (reasons specified below or in accompanying letter)  
☐ Noted

Comments:

-

The investigators are required to:

- 1) follow instructions, guidelines and requirements of the Medical Research Ethics Committee.
- 2) report any protocol deviations/violations to Medical Research Ethics Committee.
- 3) provide annual and closure report to the Medical Research Ethics Committee.
- 4) comply with International Conference on Harmonization – Guidelines for Good Clinical Practice (ICH-GCP) and Declaration of Helsinki.
- 5) obtain a permission from the Director of UMMC to start research that involves recruitment of UMMC patient.
- 6) ensure that if the research is sponsored, the usage of consumable items and laboratory tests from UMMC services are not charged in the patient's hospital bills but are borne by research grant.
- 7) note that he/she can appeal to the Chairman of Medical Research Ethics Committee for studies that are rejected.
- 8) note that Medical Research Ethics Committee may audit the approved study.
- 9) ensure that the study does not take precedence over the safety of subjects.

Date of expedited approval : 01-08-2019

Date of notification : -

This is a computer generated letter. No signature required.



## Figure S2. Randomization methods

### 2.1 Randomization table

Seed number = 736522

block	subject	sequence
1	001	A B C
1	002	C A B
1	003	B C A
1	004	C A B
1	005	B C A
1	006	A B C
2	001	A B C
2	002	C A B
2	003	B C A
2	004	C A B
2	005	A B C
2	006	B C A
3	001	C A B
3	002	C A B
3	003	B C A
3	004	A B C
3	005	B C A
3	006	A B C

### 2.2 Randomization source code

SAS Randomization Program Code Seed 736522

```
data _null_;
x=round(ranuni(0)*1000000);
call symput ('seed', x);title "Seed number = &seed.";
run;
title "Seed number = &seed.";
proc plan seed=&seed.;
factors block=3 ordered subject=6 ordered/noprint;
treatments sequence=6 random;
output out=out
sequence cvals=('A B C' 'A B C' 'B C A' 'B C A' 'C A B' 'C A B');
run;
proc print data=out noobs;
var block subject sequence ;
format subject z3.;
run;#
```

## Figure S3. Investigational product dispensing activity record

Protocol No: P1-PKPD-Metabolomic

### Investigational Product Dispensing Activity

Date:

Investigational product:

No	Steps	Performed by
1	Clean the dispensing table with alcohol or ensure the table is clean and empty.	
2	Prepare the __ labels, spoon, envelops.	
3	Check the randomization table seed no: _____ list with labels.	
4	Stick the label on each envelope.	
5	Retrieve the IP time:	
6	Put __ capsules/tablets into the envelope with label and seal the envelope.	
7	Check the envelopes with randomization table seed no:	
8	Return the IP time:	
9	Put the finish IP into container.	

### Investigational Product Dispensing Activity

Date:

Investigational product:

No	Steps	Performed by
1	Clean the dispensing table with alcohol or ensure the table is clean and empty.	
2	Prepare the __ labels, spoon, envelops.	
3	Check the randomization table seed no: _____ list with labels	
4	Stick the label on each envelope.	
5	Retrieve the IP time:	
6	Put __ capsules/tablets into the envelope with label and seal the envelope.	
7	Check the envelopes with randomization table seed no:	
8	Return the IP time:	
9	Put the finish IP into container.	

Figure S4. Representative investigational product label

[illegible]

## Figure S5. Subject investigational product dosing time

Protocol No: P1-PKPD-Metabolomics



### Subject IP Dosing Time

Date: \_\_\_\_\_ Period: \_\_\_\_\_

#### Dosing Procedure: [Print 3 pages for cohort 1]

1. Checked the identity tag.
2. Checked the label.
3. Dose the subject with the IP with a glass of water.
4. Mouth checked after complete dosing.
5. Write the dosing time and sign.

Subject ID	T0	Actual Dosing Time	Subject Signature	SC signature
S1	8.00			
S2	8.02			
S3	8.04			
S4	8.06			
S5	8.08			
S6	8.00			
S7	8.02			
S8	8.04			
S9	8.06			



# Figure S6. Subject blood sampling time

Protocol No: P1-PKPD-Metabolomics



## Subject Blood Sampling Time

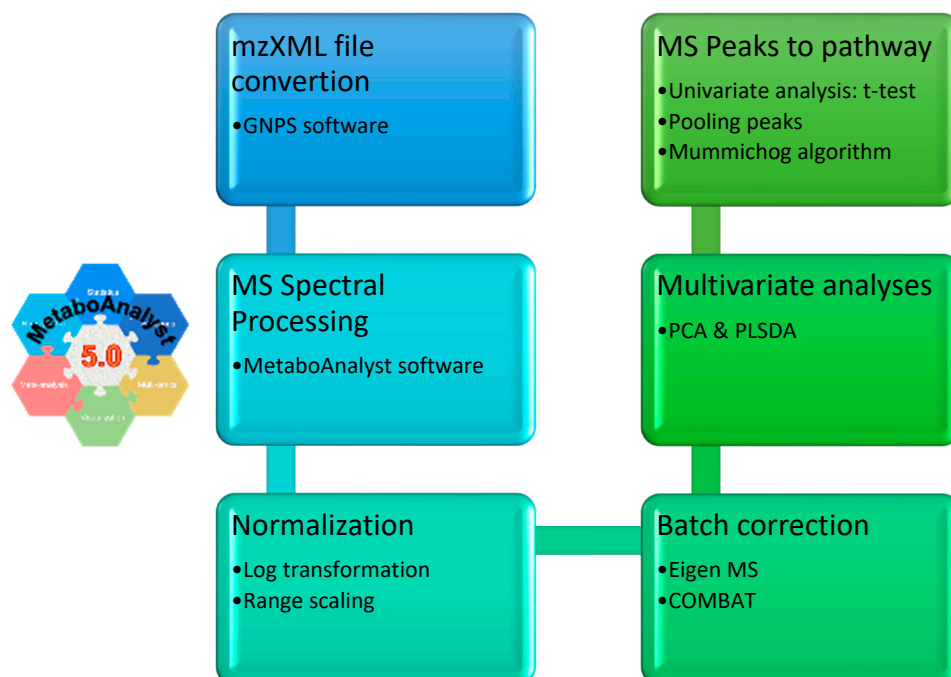
Subject ID	T0	T0.5	T1	T1.5	T2	T2.5	T3.0	T3.5	T4	T5	T6	T8	T10	T12	T24
S1	8.00	8.30	9.00	9.30	10.00	10.30	11.00	11.30	12.00	13.00	14.00	16.00	18.00	20.00	8.00
S2	8.02	8.32	9.02	9.32	10.02	10.32	11.02	11.32	12.02	13.02	14.02	16.02	18.02	20.02	8.02
S3	8.04	8.34	9.04	9.34	10.04	10.34	11.04	11.34	12.04	13.04	14.04	16.04	18.04	20.04	8.04
S4	8.06	8.36	9.06	9.36	10.06	10.36	11.06	11.36	12.06	13.06	14.06	16.06	18.06	20.06	8.06
S5	8.08	8.38	9.08	9.38	10.08	10.38	11.08	11.38	12.08	13.08	14.08	16.08	18.08	20.08	8.08
S6	8.00	8.30	9.00	9.30	10.00	10.30	11.00	11.30	12.00	13.00	14.00	16.00	18.00	20.00	8.00
S7	8.02	8.32	9.02	9.32	10.02	10.32	11.02	11.32	12.02	13.02	14.02	16.02	18.02	20.02	8.02
S8	8.04	8.34	9.04	9.34	10.04	10.34	11.04	11.34	12.04	13.04	14.04	16.04	18.04	20.04	8.04
S9	8.06	8.36	9.06	9.36	10.06	10.36	11.06	11.36	12.06	13.06	14.06	16.06	18.06	20.06	8.06
S10	8.00	8.30	9.00	9.30	10.00	10.30	11.00	11.30	12.00	13.00	14.00	16.00	18.00	20.00	8.00
S11	8.02	8.32	9.02	9.32	10.02	10.32	11.02	11.32	12.02	13.02	14.02	16.02	18.02	20.02	8.02
S12	8.04	8.34	9.04	9.34	10.04	10.34	11.04	11.34	12.04	13.04	14.04	16.04	18.04	20.04	8.04
S13	8.06	8.36	9.06	9.36	10.06	10.36	11.06	11.36	12.06	13.06	14.06	16.06	18.06	20.06	8.06
S14	8.08	8.38	9.08	9.38	10.08	10.38	11.08	11.38	12.08	13.08	14.08	16.08	18.08	20.08	8.08
S15	8.00	8.30	9.00	9.30	10.00	10.30	11.00	11.30	12.00	13.00	14.00	16.00	18.00	20.00	8.00
S16	8.02	8.32	9.02	9.32	10.02	10.32	11.02	11.32	12.02	13.02	14.02	16.02	18.02	20.02	8.02
S17	8.04	8.34	9.04	9.34	10.04	10.34	11.04	11.34	12.04	13.04	14.04	16.04	18.04	20.04	8.04
S18	8.06	8.36	9.06	9.36	10.06	10.36	11.06	11.36	12.06	13.06	14.06	16.06	18.06	20.06	8.06



## Figure S7. List of tables, listing and figures.

1. Clinical part
  - A. Table for subject demographic and clinical laboratory data
  - B. List of adverse events
  - C. Listing of vital sign monitoring
2. Pharmacokinetics
  - Method validation
    - i. Listing of accuracy, precision, calibration curve, stability and others.
  - Subject sample analysis and in-study validation
    - A. *Andrographis paniculata* 1000mg and 2000mg for three bioactive compounds; andrographolide, neoandrographolide and deoxyandrographolide
      - i. Table: Plasma concentration time-point
      - ii. Figures: Plasma concentration time-point/ AUC
      - iii. Table: Maximum plasma concentration, time to reach the maximum plasma concentration, volume of distribution, clearance and half-life.
    - B. Metformin 1000mg
      - i. Table: Plasma concentration time-point
      - ii. Figures: Plasma concentration time-point/ AUC
      - iii. Table: Maximum plasma concentration, time to reach the maximum plasma concentration, volume of distribution, clearance and half-life.
3. Untargeted metabolomics for plasma and urine samples
  - A. Metformin 1000mg, *Andrographis paniculata* 1000mg and 2000mg
    - i. Figure: principal component analysis and/or partial least square discriminant analysis for metabolites in pre-dose versus peak plasma post-dose.
    - ii. Listing: Predicted perturbed human metabolic pathways between time-point pre-dose and peak plasma post dose.
    - iii. Figure: Identification of the significant pathway from Kyoto Encyclopedia of Gene and Genome

Figure S8. Workflow for Metabolomic Data Processing and Statistical Analysis.



1. Convert the chromatograms from .d file to mzXML file using GNPS software.
2. Perform the MS Spectral Processing module using batch data of subject samples and pool quality control samples in MetaboAnalyst software to obtain list of metabolites according to subject samples.
3. Perform normalization statistical analysis for the batch data in MetaboAnalyst software.
4. Continue the batch correction when the samples were run in different days or instrument interruption using Eigen MS or COMBAT analysis.
5. Run multivariate analyses using the principal component analysis (PCA) and partial least square discriminant analysis (PLSDA) with cross validation using MetaboAnalyst software or SIMCA software.
6. Using the MS Peaks to pathway module in the MetaboAnalyst software. The module included t-test to identify significant features, follow by pooling peaks and to match the significant features with Kyoto Encyclopedia of Gene and Genome (KEGG) to predict the dysregulated human metabolic pathways using mummichog algorithm.
7. Above step 1 to 7 workflow will be repeated for *Andrographis paniculata* 1000mg, *Andrographis paniculata* 2000mg and Metformin 1000mg.