

Informed Consent and Ethical Considerations in Clinical Trials

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Disclosures

- **Commercial**
 - Pfizer
 - Sickle Cell Disease Council for Change & Advisory Board
 - Global Blood Therapeutics
 - Sickle Cell Disease Access-to-Care Summit, travel reimbursement
- **Other**
 - American College of Emergency Physicians
 - Member, Board of Directors and Vice-President

What We Will Cover

- **Historical perspective on research ethics**
 - Focus on consent
- **Brief Discussion on Federal regulations**
 - Food and Drug Administration (FDA) versus Health and Human Services (HHS) regulations
 - Potential new regulations

Human Subject Research: Balancing Two Goals



**Protection of
Subject Welfare/Rights**

**Advancement
of Science**



Nuremberg Code (1947)

First Codification of Research Guidelines

“The voluntary consent of the human subject is absolutely essential.”

- No coercion in informed consent
- Subjects must be free to stop at any time.
- Prior animal data
- Scientific value; Anticipated results justify the risks
- Favorable risk/benefit ratio
- Suffering by subjects should be avoided
- No expectation of death/disability

Lessons Learned from Nuremberg Trials



- **Medical Practice**

- Clinical Ethics: guided by Hippocratic Oath
 - Patient is silent; dutifully obedient to the beneficent physician
 - Doctor's primary obligation is the patient and acts in the patients' best interest

- **Research**

- Lies outside of the context of the physician-patient relationship
 - Primary goal is to test a hypothesis, secondary obligation is to subject

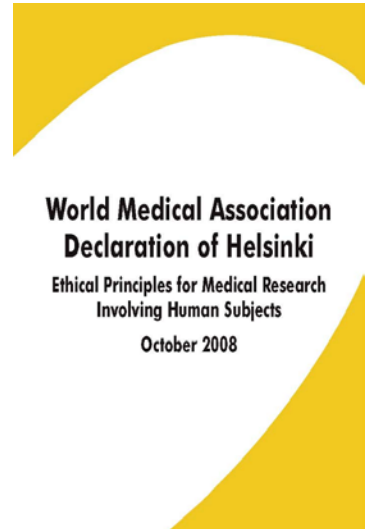
- **Conflict of Roles?**

Declaration of Helsinki

World Medical Association

- Adopted by the 18th WMA General Assembly, Helsinki, Finland, June 1964
 - Subsequent multiple amendments

- **Updated informed consent**
 - **Consent individuals**
 - Capable of giving informed consent
 - Recognizes that consent may not always be possible



Tuskegee Syphilis Study (1932 - 1972)



- In 1932, medical authorities firmly believed in the efficacy of arsenic therapy for treating syphilis
- Tuskegee, Alabama
 - High prevalence of syphilis
 - Although treatment existed, African-Americans in the rural South were not receiving treatment
 - Lack of funds/Lack of doctors
 - Study natural course of syphilis
 - Enrolled 400 African-Americans males infected with syphilis to study the natural course of syphilis
 - Not an experiment but rather a “study in nature”

Tuskegee Syphilis Study (1932 - 1972)

Ethical Issues



- Inadequate disclosure of information
- Subjects believed they were getting free treatment
- Told that spinal taps were therapy
- US Government actively prevented men from receiving penicillin
- 1972 press reports caused the study to stop

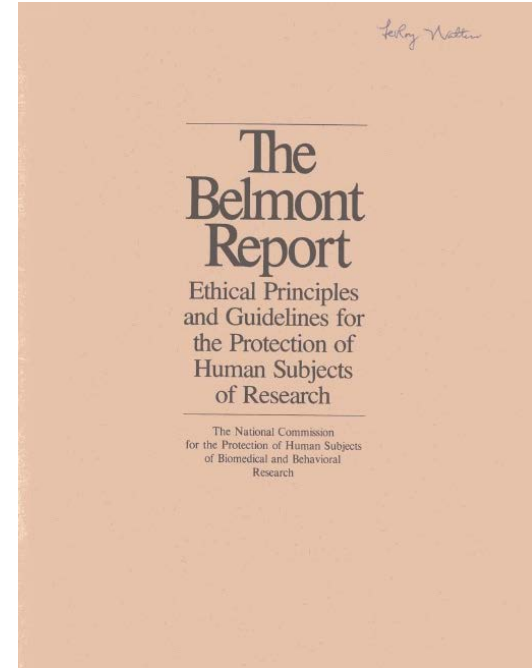
Tuskegee: Ethical Lapses

- Lacking in Social Value
- Scientifically Invalid Study: Existing Therapy for Syphilis
- Unfair Subject Selection
- Unfavorable Risk-Benefit Ratio
- Failure of Independent Review
- Informed Consent Process Invalid; No provisions for ongoing Consent
- Lack of Respect for Enrolled Subjects: Failure to provide new information, Coercive Activities

The Belmont Report

April 18, 1979

- **Basic ethical principles**
 - **Respect for Persons**
 - Autonomy
 - **Beneficence**
 - Maximizing benefits while minimizing risks
 - **Justice**
 - Fair distribution of costs and benefits
- **The Common Rule (1981)**
 - No exceptions for emergencies



“The Common Rule”

- The HHS regulations, [45 CFR part 46](#) include
 - Four subparts:
 - subpart A, also known as the Federal Policy or the “Common Rule”;
 - subpart B, additional protections for pregnant women, human fetuses, and neonates;
 - subpart C, additional protections for prisoners; and
 - subpart D, additional protections for children.
 - Published in 1991
- The **Common Rule** regulations are separate from **FDA** regulations

International Ethical Guidelines for Biomedical Research Involving Human Subjects

Free

The Council for International Organizations of Medical Sciences (CIOMS) announces the publication of its revised/updated International Ethical Guidelines for Biomedical Research Involving Human Subjects.



<https://cioms.ch/shop/product/international-ethical-guidelines-for-biomedical-research-involving-human-subjects-2/>

Clinical Research: 7 Ethical Requirements



- Social or Scientific Value
- Scientific Validity
- Fair Subject Selection
- Favorable Risk-Benefit Ratio
- Independent Review
- Informed Consent
- Respect for Potential/ Enrolled Subjects

Informed Consent in Emergency Research

Consensus Statement From the Coalition Conference
of Acute Resuscitation and Critical Care Researchers

Michelle H. Biros, MD, MS; Roger J. Lewis, MD, PhD; Carin M. Olson, MD; Jeffrey W. Runge, MD;
Richard O. Cummins, MD, MPH; Norman Fost, MD, MPH

JAMA April 1995

What is Informed Consent?

- ***It is a process- not just a document!***
 - (1) disclosing to potential research subjects information needed to make an informed decision;
 - (2) facilitating the understanding of what has been disclosed; and
 - (3) promoting the voluntariness of the decision about whether or not to participate in the research

Informed Consent



- Informed consent ensures that individuals themselves decide:
 - whether to enroll in research and
 - whether research fits with their own values, interests, and goals.
- Research on individuals who cannot decide:
 - Children and individuals with cognitive impairment
 - Requires surrogate consent

Informed Consent

- Guidelines require several items to be disclosed to potential subjects:
 - Purpose and duration of participation
 - Procedures and identification of which are experimental
 - Risks/Benefits
 - Alternatives
 - Confidentiality of records
 - Compensation of injuries
 - Person to contact for answers to questions
 - Voluntariness and right to withdraw

Quality of informed consent



- **Informed consent in research is important, but imperfect.**
 - Consent forms are complete, but complex (often incomprehensible)
 - Importance of personal explanation, time to digest
 - Ongoing consent process
 - Subject may leave study at his/her discretion

Respect for Enrolled Subjects

The ethical requirements of research do not end with a signed consent document.

- Respecting enrolled subjects includes:
 - Protecting confidentiality
 - Permitting withdrawal
 - Providing new information
 - Monitoring welfare throughout the study

Informed Consent

**It's the process, not the
paper!**

Clinical Leadership & Infection Control

Minneapolis hospital enrolled ER patients in ketamine studies without consent, FDA finds

Written by Harrison Cook | October 29, 2018 | [Print](#) | [Email](#)



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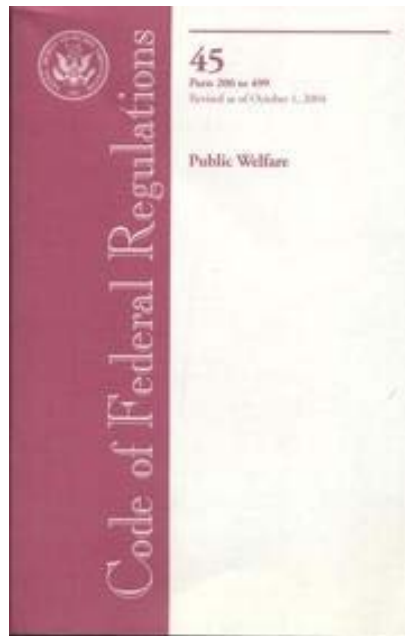
Tweet

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Federal inspectors found Minneapolis-based Hennepin County Medical Center tested antipsychotics and ketamine on emergency room patients without their consent, which violates human research regulations, according to [STAT](#).

<https://www.beckershospitalreview.com/quality/minneapolis-hospital-enrolled-er-patients-in-ketamine-studies-without-consent-fda-finds.html>

FEDERAL REGULATIONS



Definitions



- ***"Medical Practice"*** (IRB is not involved)
 - Interventions designed solely to enhance the well-being of the patient.
 - Provides diagnosis, prevention or therapy with the expectation of a successful outcome.
- ***"Experimental"***
 - Defined as new, untested or different.
 - An experimental procedure is not automatically categorized as research.
 - A new "experimental" procedure should be formally researched (investigated) to determine if is safe and effective.

Research Definition (HHS)

- ***“Research”*** (IRB is involved)
 - Activities designed to contribute to generalizable knowledge.
 - Tests a hypothesis and draws conclusions.
 - Research is described in a formal protocol and a set of procedures designed to reach an objective.
 - The line between practice and research is often blurred.
 - Research and practice can occur simultaneously

Definition of a Human Subject (HHS)



- A “human subject” (participant, volunteer) is a living individual about whom an investigator conducting research obtains:
 - Data through intervention or interaction with the individual
 - or
 - Identifiable private information

From: 45 Code of Federal Regulations (CFR) 46.102

Responsibilities of the IRB and Human Research Protections Program



- Protect the rights and welfare of human research subjects

- Determine if **Benefit** of the research (to the individual or society) *exceeds* the **Risk** to the participant (subject, volunteer, patient)

Research Regulations FDA and HHS



- Regulatory Scope
 - Regulated products (FDA)
 - All human subjects research (HHS)
- Definitions (synonymous)
 - Clinical Investigation (FDA)
 - Research (HHS)

Research Regulations FDA and HHS



- Human Subject (FDA):
 - an individual who is or becomes a participant in research, either as a recipient of the test article or as a control.
- “Virtually Identical” regulations
 - IRB Composition,
 - Criteria for approval
 - Record requirements
 - Informed consent requirements

Research Regulations FDA



- Need for drug and device review and approval
 - investigational new drug application (**IND**)
 - investigational device exemption (**IDE**)

CHANGES TO THE FEDERAL REGULATIONS GOVERNING HUMAN SUBJECTS RESEARCH

Revised Common Rule

Significant Changes

- IRB Operations
 - Single IRBs for multi-site cooperative research
 - External IRBs
 - For specific research activities, continuing review will no longer be required

Significant Changes

- Scope
 - Definitions
 - human subjects,
 - clinical trial research
 - identifiable biospecimen
 - identifiable private information/vulnerable population
 - Tribal law
- Exemption categories expanded

What Has Already Been Implemented?

- Clinical trials
 - Definition expansion for NIH research
 - Registration/reporting enforcement
- Certificates of confidentiality
- NIH requirements for Good Clinical Practice (GCP) training
- Single IRBs (sIRB)
 - For multi-site cooperative research

sIRB Objectives

- NIH and revised Common Rule compatible
- Enhance and streamline the IRB review process for multi-site research
- High standards and protections for human subjects maintained
- Efficient and effective
- Eliminate redundancy

sIRB- When Do They Apply?

- Applies to
 - U.S. institutions engaged in cooperative research for the portion of the research conducted in the U.S.
- Does not apply to:
 - When more than single IRB review is required by law (including tribal law)
 - When determined by a Federal department or agency
 - Foreign sites
 - Training awards (e.g.: K, T and F awards)

sIRB- Local Responsibilities

- Conflict of Interest (COI) management plans
- HIPAA may be handled locally
- Ensuring that investigators/study staff are qualified and meet standards to conduct research
- Responsible for the safe and appropriate performance of the research
 - Includes monitoring study compliance.

sIRB Challenges

- Implementation ongoing nationally
 - Only a small number of institutions are currently functional as a sIRB
- CICERO currently not configured to operate as a single IRB for large multi-site studies
 - UMB is committed to ensuring the successful implementation of a sIRB for these trials requiring reliance agreements

Upcoming Changes

- Revised Common Rule
 - Published in Federal Register
 - January 19th, 2017
 - Implementation date??
 - ~~January 19, 2018~~
 - ~~July 19, 2018~~
 - January 21, 2019?

Human Subject Definition

- Human subject - a living individual about whom an investigator conducting research:
 - Obtains information or **biospecimens** through intervention or interaction with the individual, and uses, studies, or analyzes the information or **biospecimens**; or
 - Obtains, uses, studies, analyzes, or generates identifiable private information or **identifiable biospecimens**

Exempt Studies- Expansion

- Significant expansion
 - Scholarly and journalistic activities
 - Oral history, Journalism, Biography, Literary Criticism, Legal Research, Historical Scholarship
 - Public health surveillance activities
 - “conducted, supported, requested, ordered, required or authorized by a public health authority (PHA)”
 - Intent for governmental public health agencies
- Multiple other categories added or revised

Informed Consent

- New language/clarity
 - Basic and additional elements of informed consent
- Broad consent
- Recruitment/screening waivers
- Clinical trials consent forms
- Electronic consent
- Legally authorized representatives

Continuing Review



- No longer required (examples)
 - Research approved by expedited review
 - Exempt research requiring limited IRB review
 - Research in which interventions have been completed:
 - Data analysis including analysis of identifiable private information or identifiable biospecimens
 - Data from clinical care accessed as part of follow-up
- The IRB can still require continuing review but this must be documented.
- Guidance forthcoming from oversight agencies and UMB

Many more Common Rule changes...



- Federal Register
 - <https://www.gpo.gov/fdsys/pkg/FR-2017-01-19/pdf/2017-01058.pdf>

| Federal Register / Vol. 82, No. 12 / Thursday, January 19, 2017 / Rules and Regulations | | | 7149 |
|---|--|--|------|
| DEPARTMENT OF HOMELAND SECURITY | NATIONAL SCIENCE FOUNDATION | III. Definitions for Purposes of this Policy (§ _____.102) | |
| 6 CFR Part 46 | 45 CFR Part 690 | IV. Ensuring Compliance with this Policy (§ _____.103) | |
| DEPARTMENT OF AGRICULTURE | DEPARTMENT OF TRANSPORTATION | V. Exempt Research (§ _____.104) | |
| 7 CFR Part 1c | 49 CFR Part 11 | VI. Protection of Identifiable Private Information and Identifiable Biospecimens | |
| DEPARTMENT OF ENERGY | Federal Policy for the Protection of Human Subjects | VII. IRB Membership and Modification to References to Vulnerability (§§ _____.107(a), _____.111(a)(3), and _____.111(b)) | |
| 10 CFR Part 745 | AGENCY: Department of Homeland Security; Department of Agriculture; Department of Energy; National Aeronautics and Space Administration; Department of Commerce; Social Security Administration; Agency for International Development; Department of Housing and Urban Development; Department of Labor; Department of Defense; Department of Education; Department of Veterans Affairs; Environmental Protection Agency; Department of Health and Human Services; National Science Foundation; and Department of Transportation. | VIII. IRB Functions and Operations (§ _____.108) | |
| NATIONAL AERONAUTICS AND SPACE ADMINISTRATION | | IX. IRB Review of Research (§ _____.109) | |
| 14 CFR Part 1230 | | X. Expedited Review Procedures (§ _____.110) | |
| DEPARTMENT OF COMMERCE | | XI. Criteria for IRB Approval of Research (§ _____.111) | |
| 15 CFR Part 27 | | XII. Cooperative Research (§ _____.114) | |
| SOCIAL SECURITY ADMINISTRATION | | XIII. IRB Records (§ _____.115) | |
| 20 CFR Part 431 | | XIV. General Requirements for Informed Consent (§ _____.116) | |
| | ACTION: Final rule. | XV. Documentation of Informed Consent (§ _____.117) | |
| | | XVI. Applications and Proposals Lacking Definite Plans for Involvement of Human Subjects (§ _____.118) | |
| | | XVII. Research Undertaken Without the Intention of Involving Human Subjects (§ _____.119) | |

Questions?



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