Global Trend in Human Subject Protections

Melody Lin, Ph.D.

Deputy Director, Office for Human Research Protections
Director, International Activities

Melody.Lin@hhs.gov

Taiwan

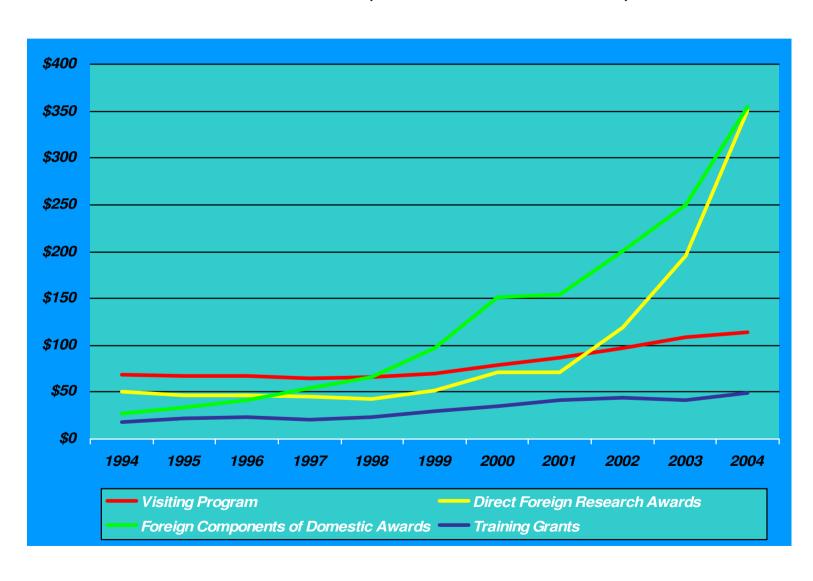
August 2006

Objectives

- Clinical Trials Expanding Globally
- ➤ U.S. Expectation
- Lessons Learned TG1412
- > Future Directions

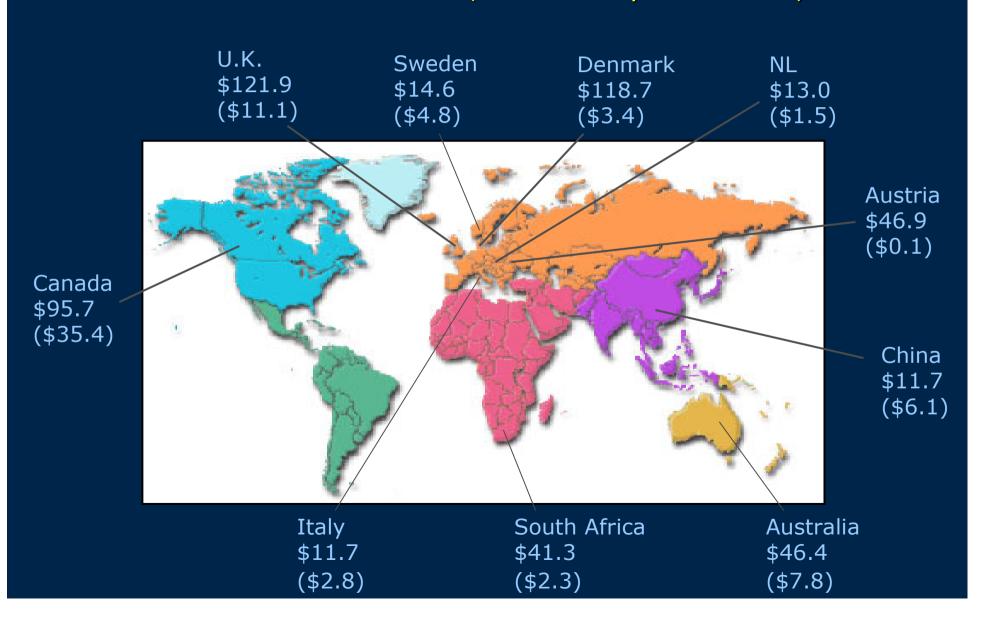
NIH International Research Expenditures

FY1994-2004 (Dollars in Millions)



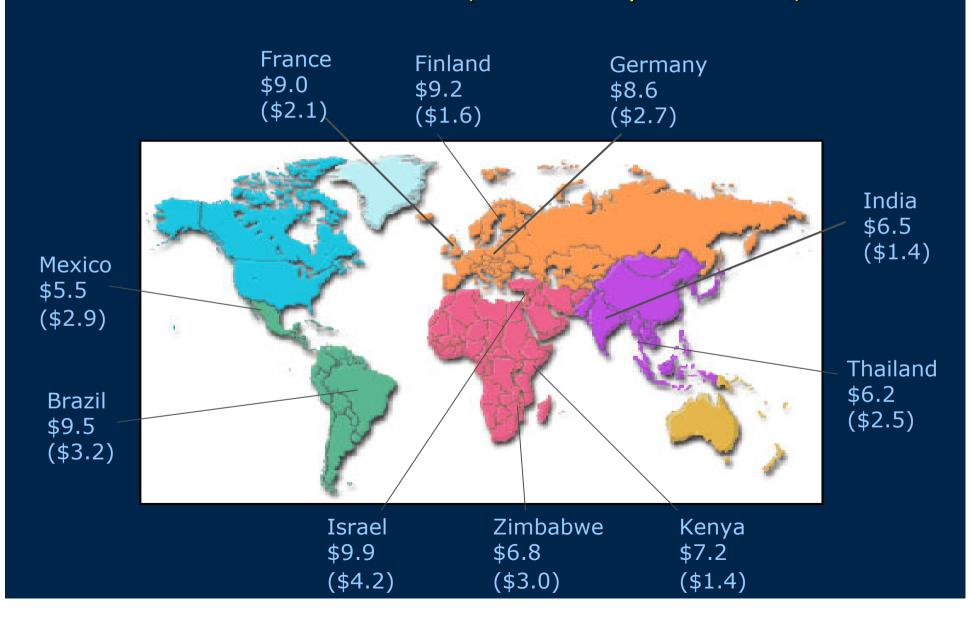
Recipients of NIH Awards, >\$10m

Millions \$ in FY2004 (FY1999 in parenthesis)



Recipients of NIH Awards, \$5-10m

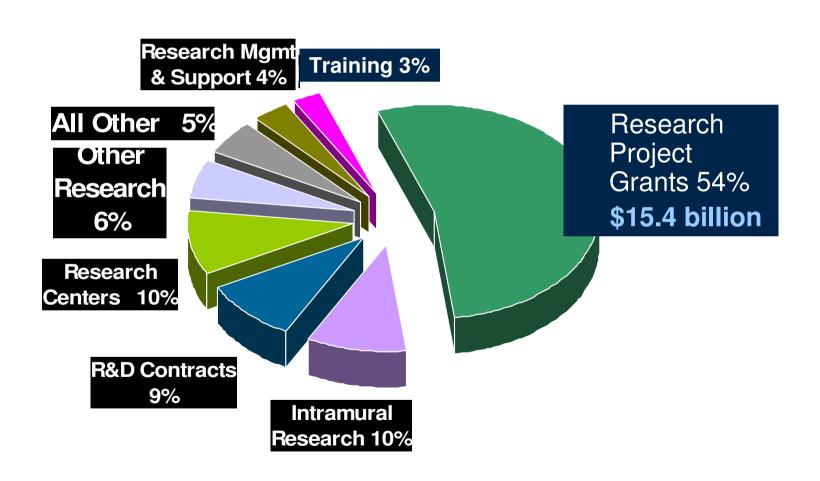
Millions \$ in FY2004 (FY1999 in parenthesis)



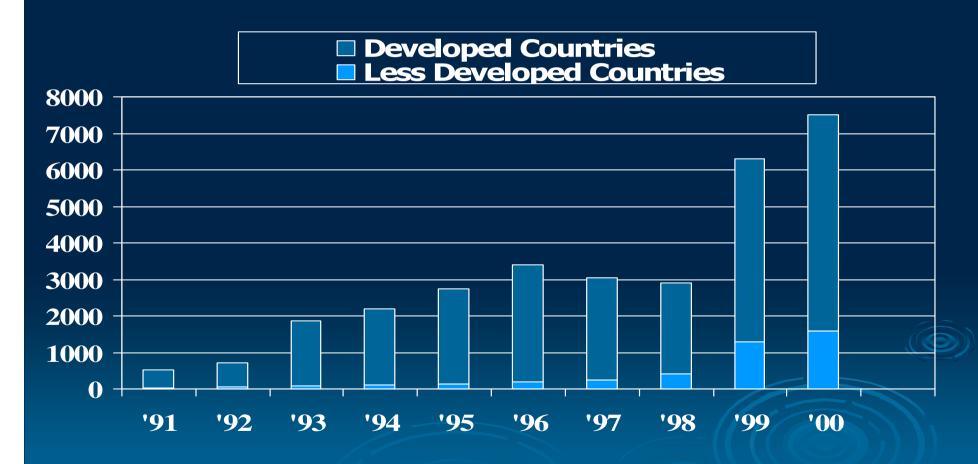
Countries Where NIH Support has Grown at Least Five-Fold: 1999-2004

- Austria: 552.8
- Denmark: 34.9
- South Africa: 18.0
- United Kingdom: 11.0
- Netherlands: 8.7
- > Australia: 5.9
- > Finland: 5.6
- Kenya: 5.1

FY '06 Budget \$28.61 Billion Dollars

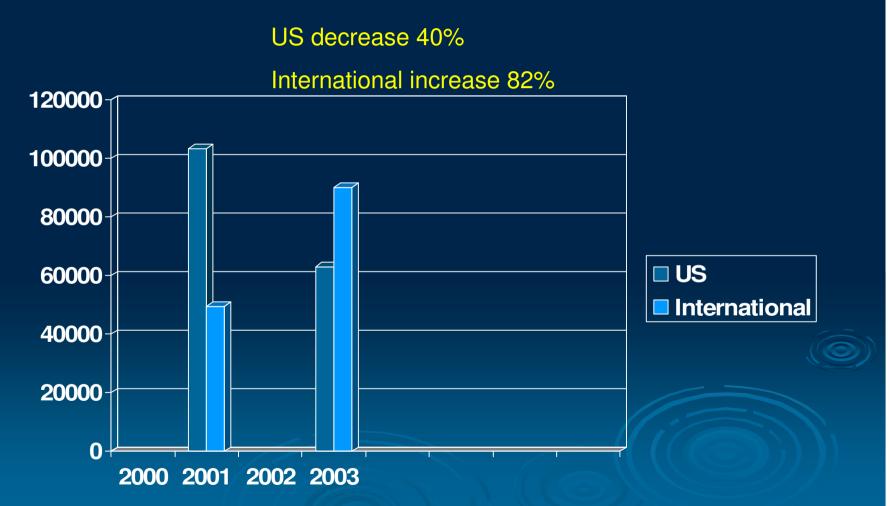


Number of Overseas Human Clinical Trials for New Drugs



Sources: FDA Biomonitoring Research database; Parexel's Pharmaceutical R&D Statistical Sourcebook 1999; Aculaunch; Washington Post Research

Human Subjects in Clinical Trials



Cost, regulations move more drug tests outside USA

	<u>2004</u>	<u>2006</u>
Wyeth Pharmaceuticals	50%	70%
Merck	50%	
GlaxoSmithKline	29%	50%

http://www.usatoday.com/news/health/2005-05-16-dru-trials-usatx.htm_

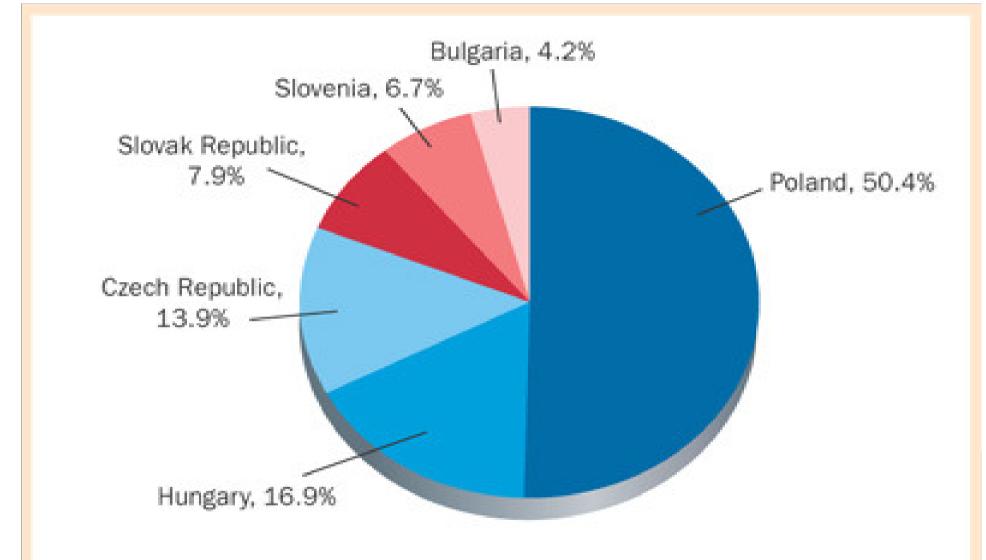
CRO

North America 400

Europe 450

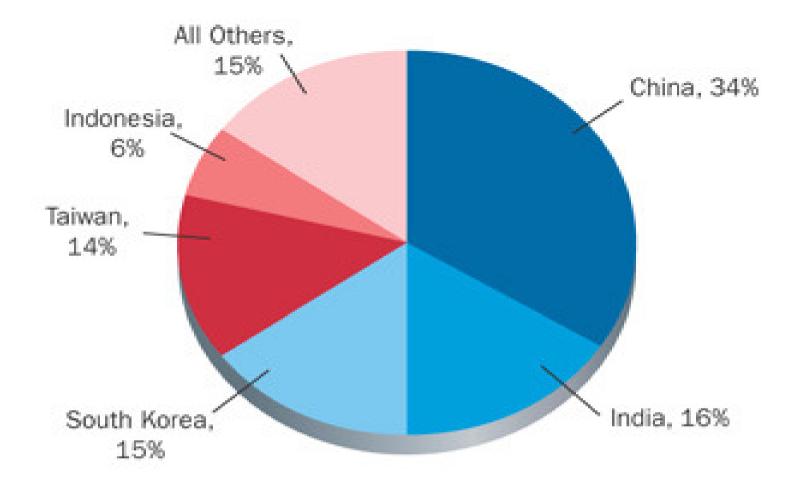
Others 150

Worldwide 1000



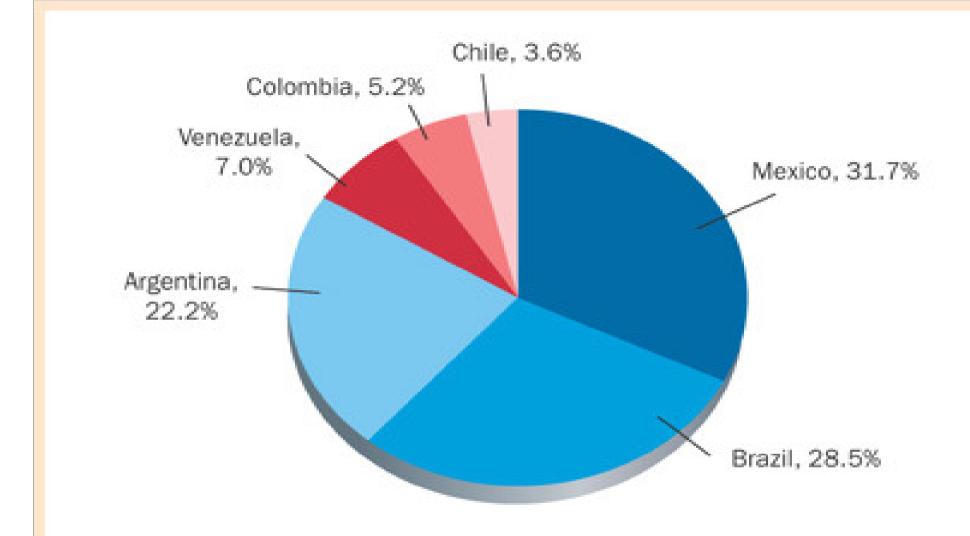
Source: IMS-Global, 2003

Figure 2. Share of \$7.9 billion Central/Eastern European pharmaceuticals market.



Source: IMS-Health, 2003

Figure 3. Share of \$22 billion Asian pharmaceutical market.



Source: IMS-Global, 2003

Figure 4. Share of \$30 billion Latin American pharmaceutical market.

U.S. Expectation

Department of Health and Human Services



Regulations: 45 CFR 46

Food and Drug Administration



Regulations:

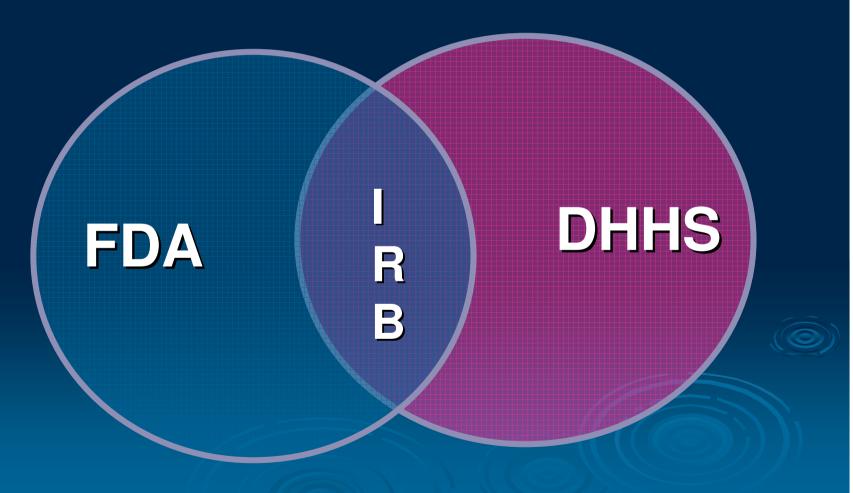
IRB - 21 CFR 56

Informed Consent - 21 CFR 50

Health and Human Services (HHS) vs. FDA Regulations

- Basic requirements for IRBs and for Informed Consent are congruent
- Differences center on differences in applicability
 - HHS regulations based on federal funding of research
 - FDA regulations based on use of FDA regulated product: drugs, devices, or biologics

HHS vs. FDA Regulations



What is TGN 1412?

- Monoclonal Antibody
- Boosts the activity of human immune system protein

TGN 1412: What happened?

- > First time in man
- > Phase I March 13 2006
- > 8 subjects in first cohort
 - < 40 healthy male volunteers
 - 2 placebo
 - 6 active
- > All 8 treated in rapid succession
- > \$4,000



Hell of human guinea pigs

How the drug trial horror unfolded

By MICHAEL SEAMARK, Daily Mail 17th March 2006



We saw human guinea pigs explode

Victims tearing at shirts
By NICK PARKER, EMMA MORTON and JACQUI THORNTON

16th March 2006

SUN: A VOLUNTEER who escaped the drug test disaster told last night how he saw six healthy young men turn into wailing wrecks within minutes.

Human guinea pig *Raste Khan* — who did not know he had been given a harmless placebo in the test — said it was like a horror film unfolding before his eyes.



RASTE KHAN

"The test ward turned into a living hell minutes after we were injected. The men went down like dominoes. First they began tearing their shirts off complaining of fever, then some screamed out that their heads felt like they were about to explode"

"After that they started fainting, vomiting and writhing around in their beds"

"It was terrifying because I kept expecting it to happen to me at any moment. But I felt fine and didn't know why. An Asian guy next to me started screaming and his breathing went haywire as though he was having a terrible panic attack"

RASTE KHAN

"They put an oxygen mask on him but he kept tearing it off, shouting 'Doctor, doctor, please help me!' He started convulsing, shouting that he was getting shooting pains in his back."

TGN 1412: What went wrong?

- Rapid onset
 - Cytokine Release Syndrome
 - Angioedema
- > Testing continued
- > Multiple Organ Failure
- > 6 subjects admitted to ICU
- Prolonged immunosuppression

TGN 1412

Medicines and Healthcare Products Agency (MHRA)

- Suspended CTA
- Immediate Inquiry
- Released
 - protocol, review and inquiry



UK Government announces expert inquiry

TGN 1412

Expert Inquiry (Terms of Reference)

- What may be necessary in transition from preclinical to first-in-man Phase 1 studies, specifically:
 - Biological molecules with novel mechanisms of action
 - New agents with highly species-specific action
 - New drugs for immune system targets
- > Interim report May 4, 2006
- > 22 Recommendations

Recommendations

- Drugs that involve immune system should not be administered to healthy volunteers
- First dose to one person only
- Set up specialist centers for Phase I studies on high risk research
- Dialogue between drug maker and regulatory agency about safety data
- Use an alternative first dose assessment if the drug involves novel agents
- Conduct clinical trials at hospitals that has ICU

Lessons Learned TGN 1412 (1)

- > Recruitment
 - Financial Incentives
- Adequacy of Information
- Choice of Subject in Phase I
- Number of Subjects
- > Timing of Administration

Lessons Learned TGN 1412 (2)

- Sources of Information Reviewed
 - Regulatory Review
 - Ethical Review
- Independent Expert Review
- > Relevance of Preclinical Testing
- Transparency in Development
 - Publishing preclinical work
- Response to Disasters

The Relevance of Animal Testing

- Need to establish validity
- Staggered timing
- Microdosing
- > Ex-vivo

Future Direction for Human Subject Protections

Investigator's Qualification

VS.

Investigator's Certification (GCP)

IRB Registration

VS.

IRB Accreditation

Institution Commitment

&

Accreditation of HRPP

Monitoring of Consent Process

- > Research Intermediate
- Consent Auditor

Sponsor

- ➤ Government NIH
- > Industry Pharmaceutical & Devices
- > Training IRB and Investigators

HUMAN SUBJECT PROTECTIONS

