

ResearchMethodologies and Ethical Issuesin Traditional Medicine

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Outline

- Research Methodologies
- Ethical Issues in Traditional Medicine
- Conclusions

Research Methodologies

Primary Objectives of Research on Therapeutic Methods and Medicinal Products:

To prove

SafetyEfficacy

Gold Standard: Methodology

Double – Blind Randomized Controlled Trial (RCT)

The 1st Randomized Controlled Trial

- Designed by Sir Austin Bradford Hill, a renown biostatistician
 Studied Streptomycin in TB patients in London
- Published in British Medical Journal in 1948
- It is the discovery of method for scientifically and impartially evaluate the treatment / product

| | Male | Female | Total | Dead (after 4 m.) |
|---------------|------|--------|-------|-------------------|
| Streptomycine | 22 | 32 | 55 | 7% |
| No STM | 21 | 31 | 52 | 27% |

The Advantage of RCT

To reduce all biases:

Recall Bias

- Allocation Bias Randomization
- Treatment Bias \longrightarrow (Blinding)
- Evaluation Bias

Based on GCP Principles

Clinical research must be conducted in sequence:-

- Laboratory studies
- Animal studies
- Clinical Studies:
 - Phase I
 - Phase II
 - Phase III

Past Experiences in TM

 Research in Traditional Medicine can not <u>STRICTLY</u> follow GCP Guidelines.
 Require some modifications
 Often had substantial human use prior to Clinical Trial evaluation

Nature of Traditional Medicine

- Mixture of uncharacterized constituents
- Efficacy depends on combined actions of the mixture
- Very difficult to find active ingredient as a single molecule

The Declaration of Helsinki No 11

"Medical research involving human subjects must conform to generally accepted scientific principles, be based on a thorough knowledge of scientific literature, other relevant sources of information, and on adequately equipped laboratory and, when appropriate, animal experimentation."

Thus, it is not easy to comply with this requirement

TDR Operational Guidance 2005

Operational guidance: Information needed to support clinical trials of herbal products



Phase I may take place without toxicology

- Extensive used without known safety problem
- Same preparation as used before
- Documents in literatures of its safety in man

Design of the study

It may not be easy to always apply RCT

Study Design

Apart from Randomized Controlled trial (RCT) whole spectrum of clinical research designs which are suitable for assessing traditional medicine is accepted : – Observational design

Control groups

The control group may involve :

- Non-treatment
- Well-established treatment
- Different doses of same treatment
- Placebo treatment
- Full scale treatment
- Minimal treatment
- Alternative treatment

Study outcome measures

Appropriate outcomes may include :
Quantitative and qualitative outcomes
Primary and/or secondary outcomes
Generic and/or highly specific outcomes

Basic Principle

Different study designs produce different levels of evidence

Levels of Evidence:

| Level | Type of evidence | |
|-------|--|--|
| Ia | Evidence obtained from meta-analysis of randomized controlled trials | |
| Ib | Evidence obtained from at least one randomized controlled trial | |
| IIa | Evidence obtained from at least one well-designed controlled study without randomization | |
| IIb | Evidence obtained from at least one well-designed controlled study without randomization | |
| III | Evidence obtained from well-designed non-experimental descriptive studies, such as comparative studies, correlation studies and case control studies | |
| IV | Evidence obtained from expert committee reports or opinions and / or clinical experience of respected authorities. | |

A Case Study : Qing hao

- Qing hao was traditional used for treatment of fever for thousand years
- It was good for treatment of malaria
- The active ingredient is Artemisinine
- The clinical study started at Phase II,III
- Phase I study conducted last

Ethical Issues

Objectives
Principles
An Experience in Thailand

Objectives of Clinical Research in Traditional Medicine

Same objectives as stated in ICH GCP Guidelines

- Good protection of research participants

– Data is credible

Ethical Principles

 Same as 1st stated in Belmont Report and stated again in CIOMS' Guidelines 1993
 – Respect for person
 – Beneficence and non-maleficence
 – Justice

An Experience in Thailand

Set up an "Ethics Committee for Research Involving Human Subject in Thai Traditional and Alternative Medicine"

Appointed by The Minister of Public Health

Modification of Guidelines

Only <u>ONE article of ethical guideline of the</u> Ethics Committee for Research in Human Subjects of the Ministry of Public Health

"2.7 <u>SHOULD</u> have adequate, convincing and qualified evidence to substantiate its safety based on PREVIOUS HISTORY OF USE, references OR TEXTBOOKS, animal experiment, or research papers"

On Safety issue

Accept data and information from :

 traditional knowledge
 long experience in traditional use

 Toxicity study in small mammals, i.e. mice is accepted

On efficacy issue

Accept traditional formula to be studied as a "single active ingredient"

Conclusions

Ethics in practice for traditional medicine doctor is same as of modern medicine doctor

Ethics in research on traditional medicine is the same as of modern medicine both in objectives and principles, but to make research on traditional medicine possible, some modifications of ICH GCP Guidelines are necessary.

Any question???