


Role of IRB/IEC in GCP

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Institutional Review Board (IRB)

- An independent body constituted of medical, scientific and non scientific members
 - Responsible for ensuring protection of rights, safety and well being of human subjects
 - Responsible for reviewing, approving and providing continuing review of protocol and obtaining and documenting informed consent of trial subjects
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Independent Ethics Committee (IEC)

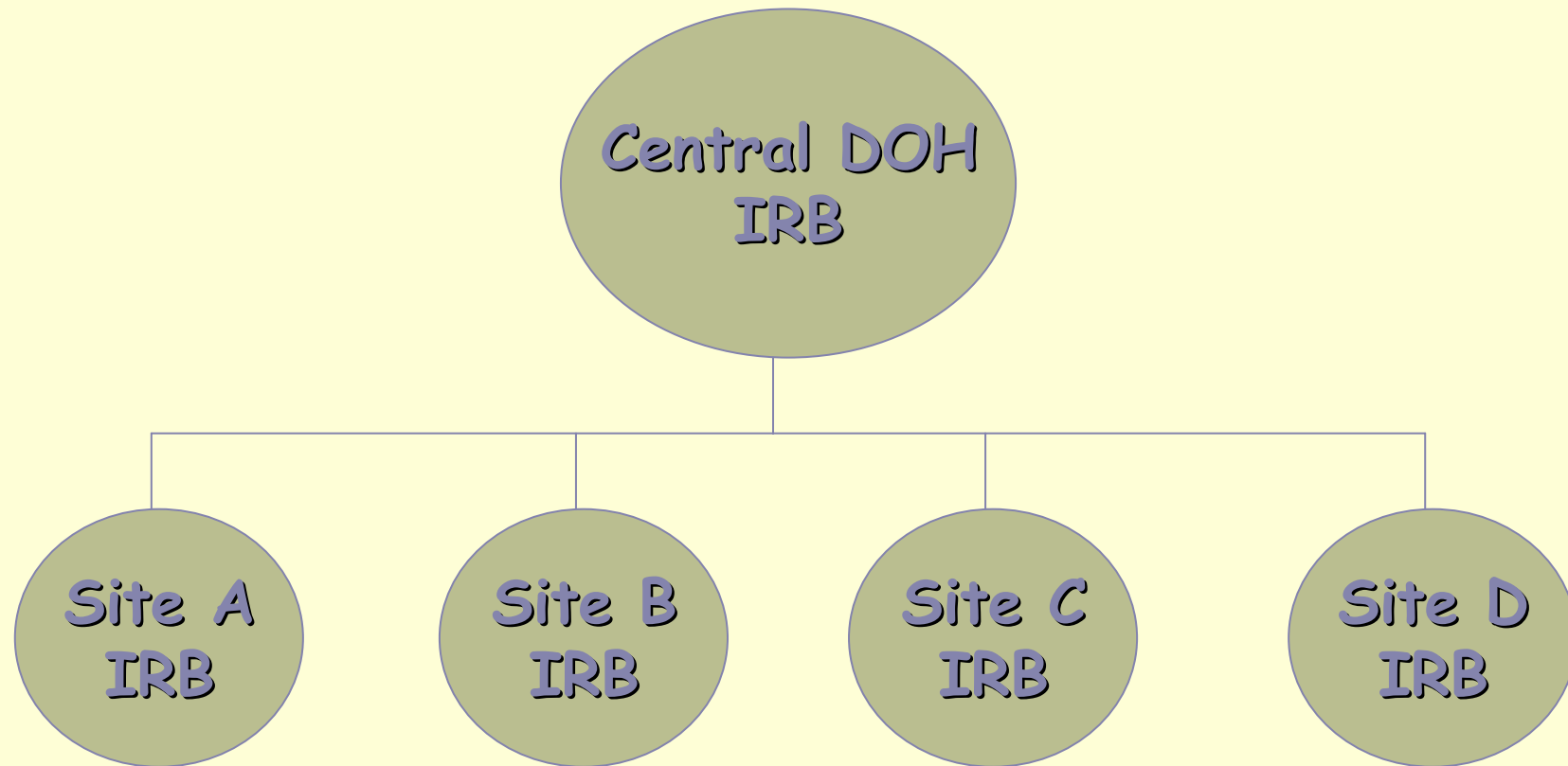
- An independent body (review board or committee, institutional, regional, national, or supranational)
 - Constituted of medical professionals and non-medical members
 - Responsible for ensuring protection of rights, safety and well being of human subjects
 - Provide public assurance
 - Review, approve protocol, investigators, facilities, ICF
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Independent Review

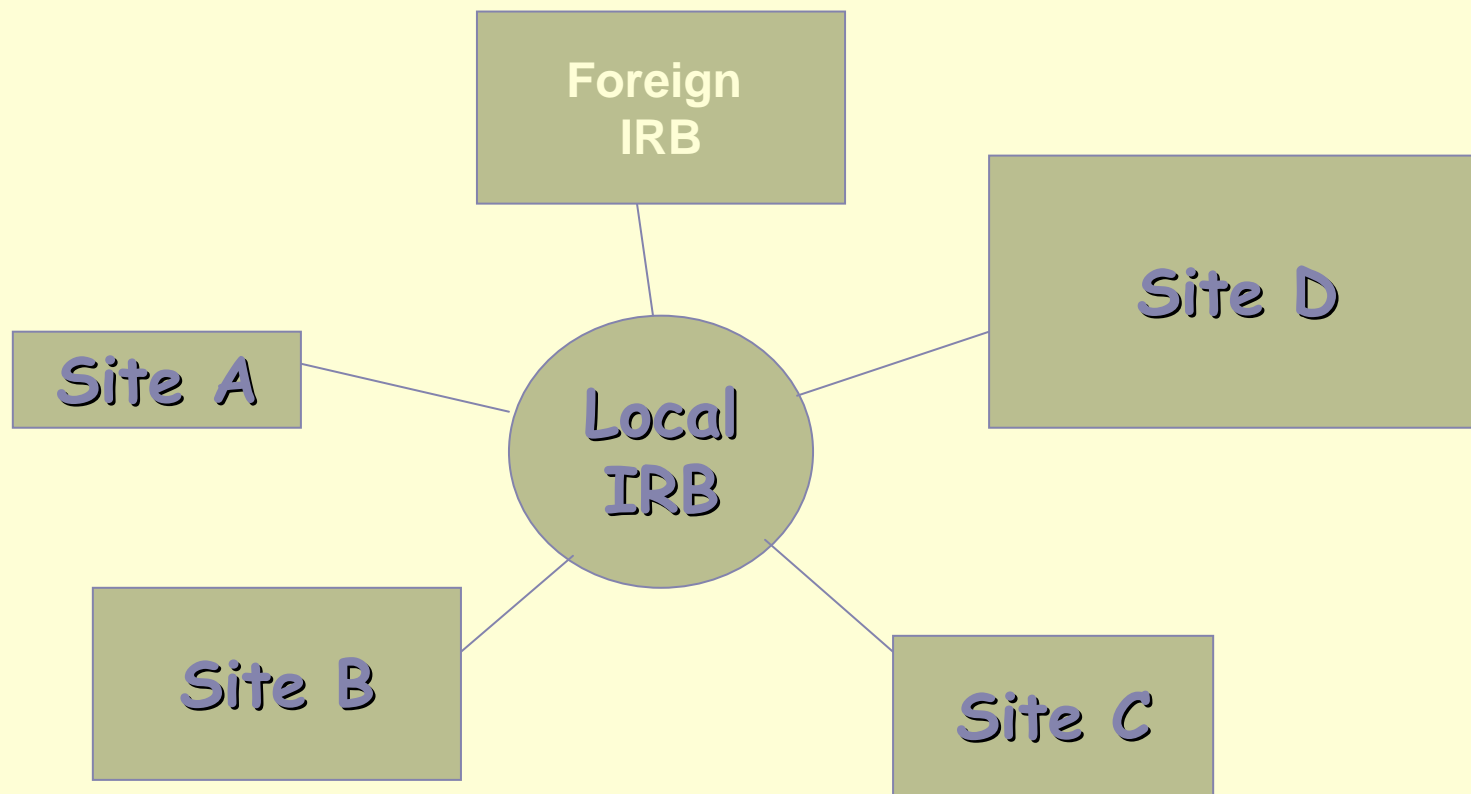
- Address conflicts of interests (COI)
 - Individuals not affiliated with the research should review, approve, amend and terminate it.
 - Review committee should be made up of competent and properly trained people.
 - Review committee should be multidisciplinary.
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IRB Review Model

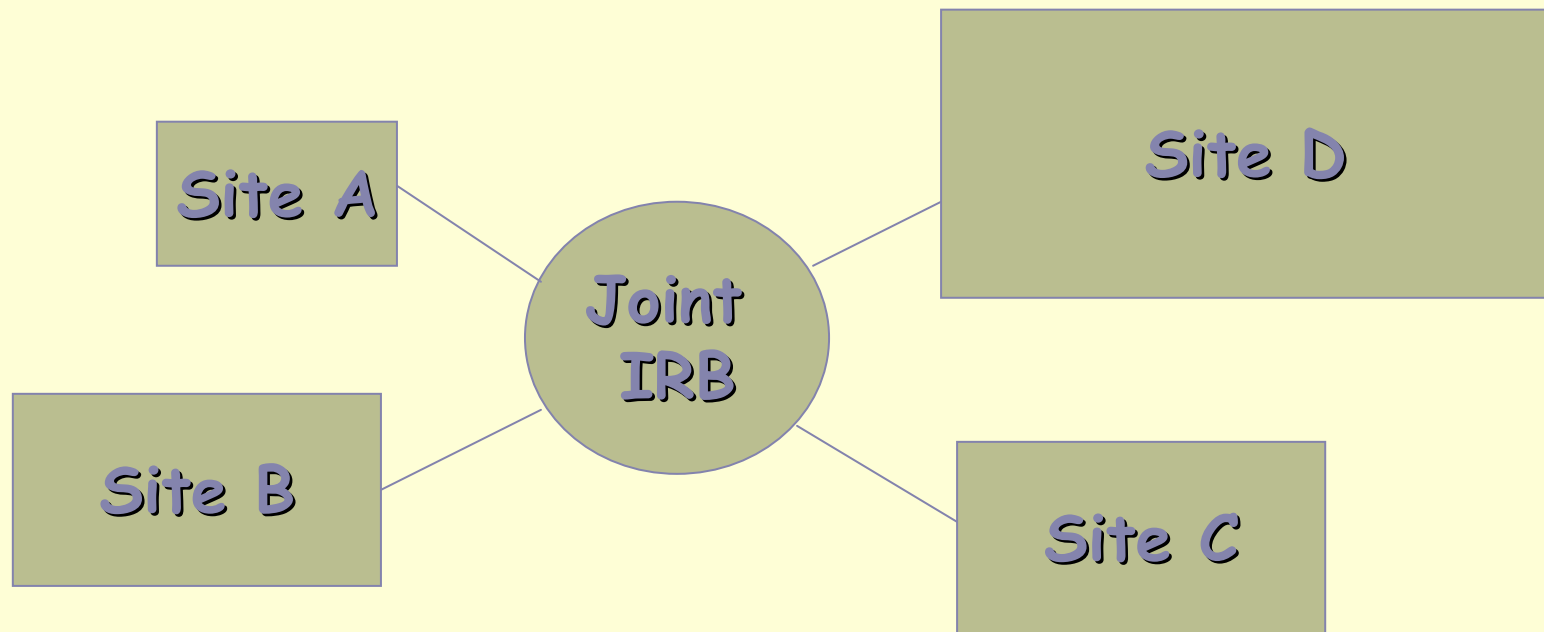


Source: NBAC 2001

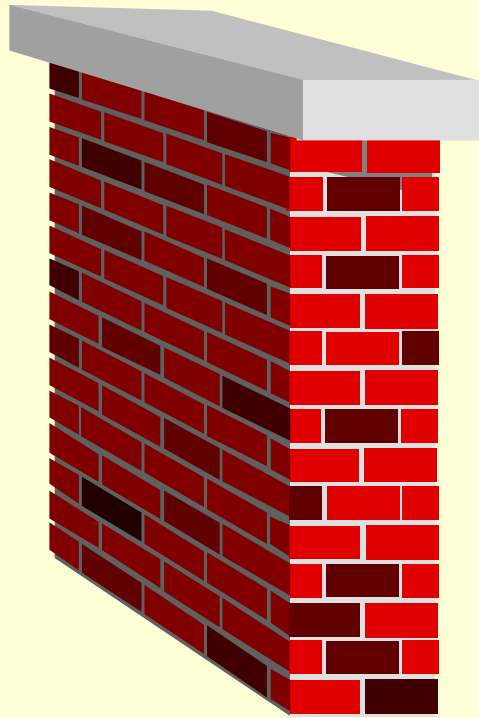
Accept the Review of Another IRB Model



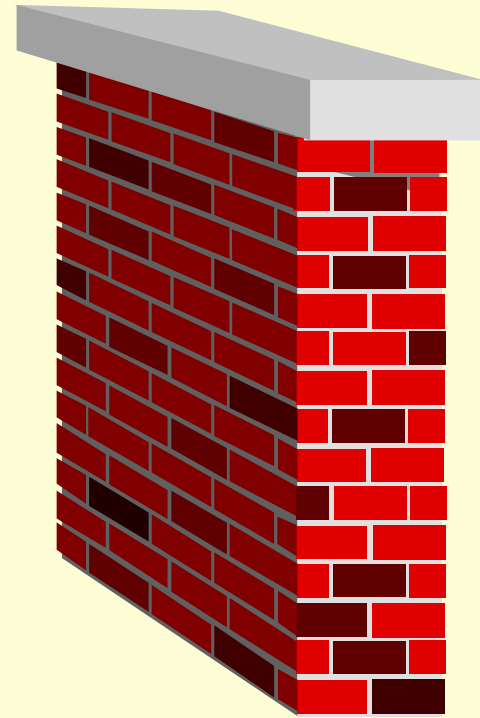
Joint IRB Model



Two Pillars on Human Subject Protection




Independent review



Informed consent




A. Defining Scope of IRB/IEC Authority

- Management and balancing of the inherent conflict between the scientific and therapeutic/humanitarian mission of institutions
 - Not an all-purpose mechanism to prevent wrongdoing (malpractice) in hospitals and research institutions (fraud).
 - May not cover public health surveillance that helps spread of disease where authority has been given to public health officials
 - May not cover ethics issues among institution's constituencies.
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Responsibilities of IRB/IEC

- **Safeguard the rights, safety, and well-being of all trial subjects**
 - **Review documents**
 - Protocol/ amendments
 - Informed consent forms (ICF)
 - Subject recruitment procedures (advertisement)
 - Patient information sheet
 - Investigator's Brochure
 - Payments for subjects
 - Investigator's cv
 - Others
 - **Review protocols within a reasonable time**
 - **Document its views in writing**
 - **Identify documents reviewed with dates**
 - **Conduct continuing review**
 - **Implement IC requirements**
 - Request additional information
 - LAR
 - Regulatory requirements (emergency research)
 - Amount and method of payment
 - Documentation and written information
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IRB/IEC Composition, Functions and Operations

- Reasonable number of members with necessary qualifications and experience (at least 5, 1 non scientific, 1 non affiliated, independent of the investigator and sponsor)
 - Review and evaluate the science, medical aspects, and ethics of the trial
 - Maintain list of members and qualifications
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IRB/IEC Composition, Functions and Operations

- Perform functions according to written procedures and maintain records
 - Decide during announced meetings with required quorum;
 - only members may vote
 - Investigators may provide information but not participate
 - Non members with expertise may be invited
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IRB/IEC Procedures

- Establish, document in writing and follow its procedures
 - Determine composition and source of authority
 - Schedule, notify members and conduct meetings
 - Conduct initial and continuing review.
 - Determine frequency of continuing review.
 - Provide expedited review mechanism for minor changes.
 - Specify that no subject may be enrolled and no deviation prior to approval.
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IRB/IEC Procedures

- Specify that investigator promptly report protocol changes or deviations, increased risks to subjects, ADRs (serious and unexpected), new information related to subject safety
 - Promptly notify in writing the investigator/institution about its decisions, reasons for its decisions, and procedures for appeal.
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IRB/IEC Records

- Maintain all relevant records at least 3 years after completion of the trial
 - SOPs
 - Membership files
 - Submitted documents (protocol related files)
 - Minutes
 - Correspondence
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IRB/IEC Records

- Make them available to regulatory authorities
 - Make available its SOPs and membership lists to investigators, sponsors and regulatory authorities
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Current Global Challenges


- Need to address growing public mistrust
 - Need to develop new drugs and interventions to address pandemics and emerging health problems
 - Need to harmonize IRB requirements in different parts of the world (developed and developing countries)
 - Need to develop ethical review systems that involve research stakeholders (regulatory authorities, industry, academe, patient groups)
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Public Perception of Research






Local Challenges in Research

- Need to develop affordable and culturally relevant interventions
 - Need to develop evidence based interventions
 - Need to regulate commercialization
 - Need to develop local research capacity
 - Need for capacity building of IRBs/IECs to deal with various types of protocols, of various origins with a wide range of objectives and methodologies
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Situation in Asia

- Research is becoming a priority
 - Need for evidence based decision making
 - Need to develop interventions to address health problems
 - Advent of globalization
 - Asia as good material for clinical trials
 - Growing number of collaborative researches
 - Involvement of industry, GOs, NGOs and international funding agencies in health research
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Non Compliance by IRBs

- No written procedures
- Inadequate composition and poor attendance
- Meetings by emails (not face to face)
- Expedited review procedures not defined
- Timelines for submission of ADRs and SAEs not specified

*Widler and Johansen "Non Compliance Issues in GCP Audits,"
Shanghai Presentation 2005*





Non Compliance to Review Requirements

- Documents reviewed and/or approved not identified by version, date, etc. (ICH-GCP 3.1.2)
- “Written information” given to patients not adequately reviewed and approved
- Payments and compensation to patients not reviewed and approved
- Qualifications of PI and CV not reviewed


*Widler and Johansen “Non Compliance Issues in GCP Audits,”
Shanghai Presentation 2005*





Common Weaknesses of Asian IRBs


based on FERCAP survey findings

- Weak lay participation in IRB deliberations (board observation)
 - Incomplete SOPs and inadequate SOP compliance (document review)
 - Poor documentation and archiving procedures (document review)
 - Incomplete review of ethical issues (document review and board observation)
 - Inclusion/ exclusion criteria
 - Vulnerability
 - Risk benefit assessment
 - Complete information in consent form
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Common Weaknesses of Asian IRBs

based on FERCAP survey findings

- Incomplete review of study design
(document review and board observation)
 - Inadequate documentation of IRB
procedures (document review)
 - Incomplete minutes, incomplete protocol files
 - Inadequate implementation of post review
procedures (SAE reporting, progress and
end of study reports)
 - Unclear expedited review procedures
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Capacity building of IRBs/IECs

- IRB/IEC need to be developed to fulfill its GCP mandate
 - Need to cultivate an ethical infrastructure/system in health research
 - Sponsors, institutions, funding agencies need to contribute to training and capacity building of IRB/IEC (not only investigators) to fulfill its GCP mandate
 - Regulatory authorities should ensure GCP stakeholder performance of its respective role
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SIDCER Recognition Program

Objectives

- To facilitate and support procedures to assist the IRB towards **QUALITY** and **TRANSPARENCY** in ethical review
 - To conduct an independent evaluation of the IRB and provide feedback on its practices and overall performance
 - To ensure its compliance to international, national and local standards
 - To determine the availability of IRB written Standard Operating Procedures (SOP) and its adherence to its procedures
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