

Edwin C. Ruamero, Jr., RPh, MPH

Asst. Prof., University of the Philippines, College of Pharmacy

Member secretary, UP Manila Research Ethics Board

QA Division Head, NIH National Clinical Trials & Translation Center

EDWIN C. RUAMERO, JR., RPH, MPH



- * Asst. Prof, University of the Philippines Manila College of Pharmacy
- Member-Secretary, University of the Philippines Manila Research Ethics Board (UPMREB) Panel 2
- Division Head for Quality Assurance, NIH-National Clinical Trials & Translation Center
- Member, Association of Clinical Research Professionals

Introduction

- □ Post-approval review include assessment of protocol non-compliance/deviations (NCs/PDs).
- ICH-GCP and WHO clearly defined the roles and responsibilities of the investigator/institution, sponsor & ethics committees in the reporting, management, and recommending actions on NCs/PDs.
- □Very few published studies looked at protocol non-compliance monitoring, while none for EC assessment

Compliance

adherence to the trial-related requirements, GCP requirements

(ICH GCP E6(R3))

Protocol non-compliance/ deviation

any change, divergence, or departure from the study design or procedures defined in the protocol

(US DHHS, FDA, Guidance for industry E3 Q&A(R1)

Important protocol deviations

those that impact rights, safety, and well-being of trial participants, and reliability of results

(ICH GCP E6(R3))

OBJECTIVES

METHODOLOGY

RESULTS

CONCLUSION

Review the protocol noncompliance/deviations

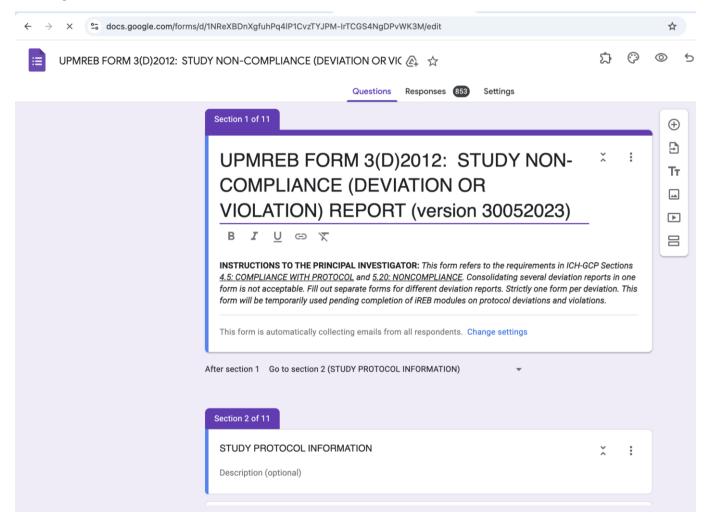
- Categorize deviations
- Identify patterns
- Identify gaps in reporting
- Identify gaps in assessment

Retrospective review of NC/PD database



METHODOLOGY

RESULTS



OBJECTIVES

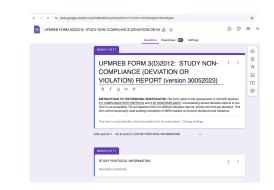
METHODOLOGY

RESULTS

CONCLUSION

UPMREB Form 3D Sections:

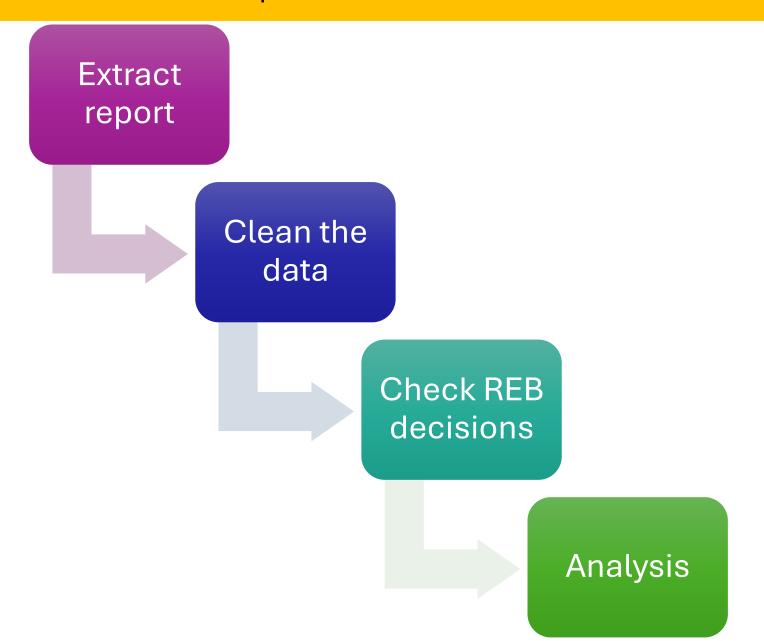
- Protocol Info
- Investigator, Sponsor details
- Deviation attribution (Subject, PI, Sponsor)
- Description of the NC/PD
- PI/sponsor assessment (minor/major; impact on safety/data)
- CAPA
- Submission details
- REB Assessment (impact on data quality or patient safety)



OBJECTIVES

METHODOLOGY

RESULTS

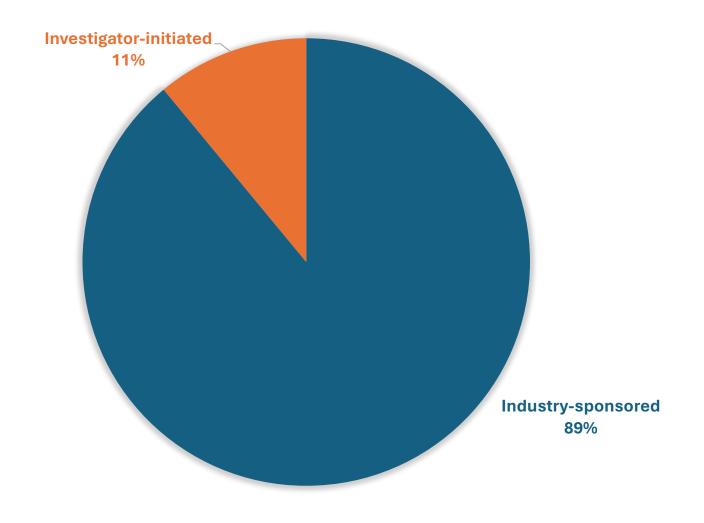


TYPE OF STUDIES

OBJECTIVES

METHODOLOGY

RESULTS



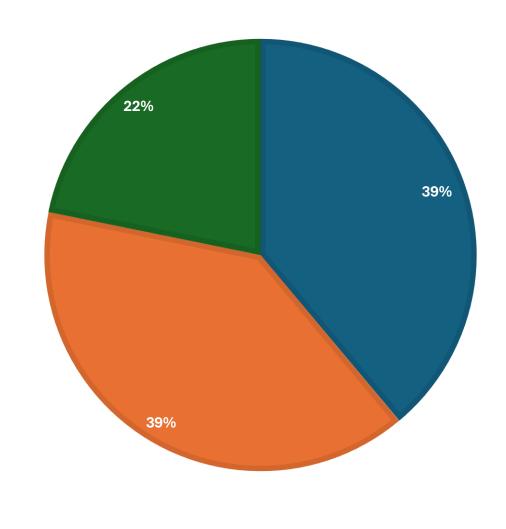
NC/PD ATTRIBUTED TO:

OBJECTIVES

METHODOLOGY

RESULTS

CONCLUSION



Subject

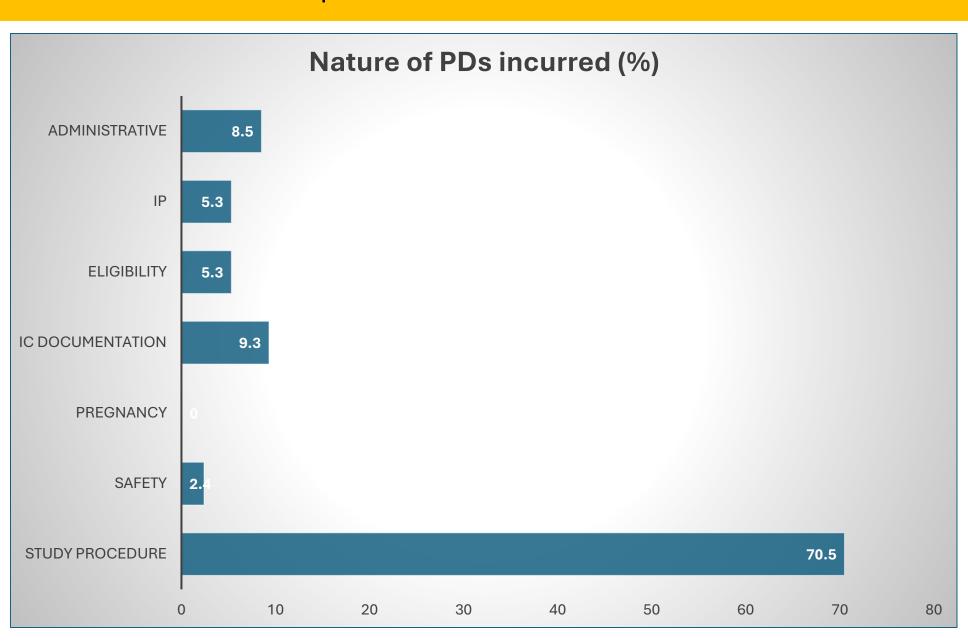
Investigator

Other research staff

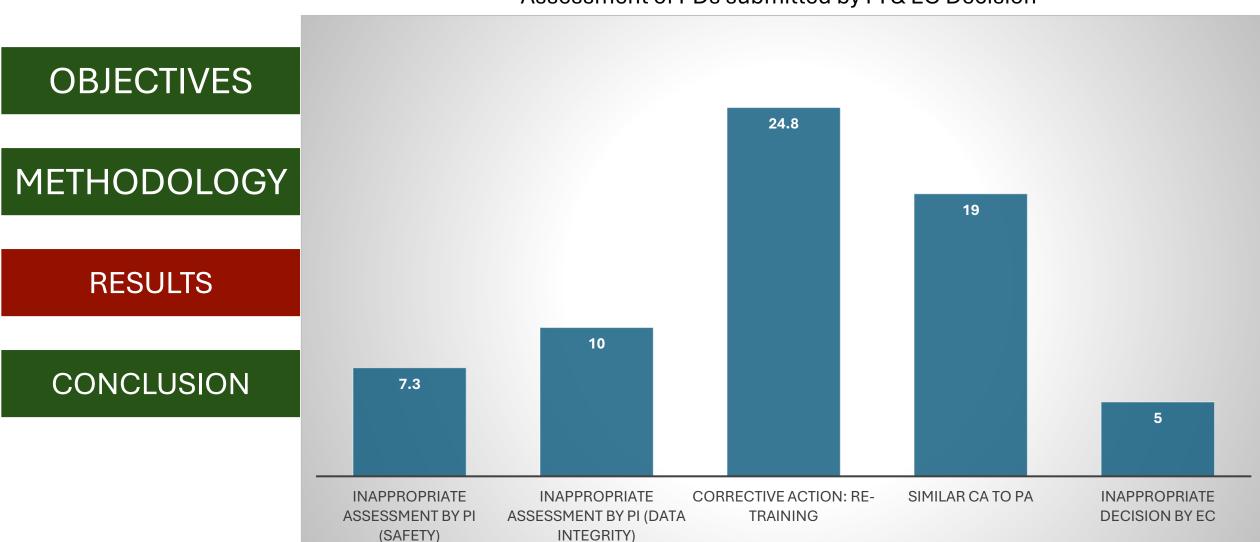
OBJECTIVES

METHODOLOGY

RESULTS



Assessment of PDs submitted by PI & EC Decision



OBJECTIVES

METHODOLOGY

RESULTS

CONCLUSION

Deviation:

Plasma sample for ctDNA/MRD and blood-borne biomarkers was not collected at Week 1 Day 1

PI Assessment: No impact on credibility of data

REB Decision: No further action

OBJECTIVES

Deviation:

Vital signs was obtained before the ICF was signed.

METHODOLOGY

Corrective Action: All site staff to synchronize their time

RESULTS

Preventive Action: The site staff confirmed in the source document that the vital signs measurement was done after the ICF was signed.

OBJECTIVES

METHODOLOGY

RESULTS

CONCLUSION

Deviation:

Subject 3*****'s Covid 19 vaccine history included mRNA vaccine. However, the subject still proceeded with the enrolment last 23 Dec 2022 and received 2nd dose of vaccine last 24 Jan 2023.

PI Assessment: No impact on credibility of data

CA/PA: Reminded all sub-investigators to review and checked the inclusion-exclusion criteria in adherence to the latest approved protocol prior to enrollment of the subject

OBJECTIVES

Deviation:

ECG was performed on Day 1 instead of performing ECG during the screening

METHODOLOGY

RESULTS

Corrective Action: retraining of study personnel

CONCLUSION

Preventive Action: retraining of study personnel

OBJECTIVES

METHODOLOGY

RESULTS

CONCLUSION

Deviation:

- a. ECG was performed on Day 1 instead of performing ECG during the screening
- b. ECG was ordered but was not performed

Corrective Action: retraining of study personnel

Preventive Action: retraining of study personnel

OBJECTIVES

METHODOLOGY

RESULTS

- Protocol non-compliance/deviations are often committed by the site (PI, other research staff).
- Most of the deviations are related to the study procedures.
- There is room for improvement in terms of reporting and analyzing the PDs submitted by the PI as well as the assessment by the Ethics Committee.
- As part of quality assurance in reviews, regular analysis of assessment and decisions on PDs by the EC should be done.
- Regular training of both the researcher and EC members on PD management is needed.

REFERENCES

- Gajbhiye, S. V., Jalgaonkar, S. V., Dabba, S. G., Surve, S., & Lad, M. S. (2020). Assessing completion reports for compliance with institutional ethics committee-approved protocols: An observational study. Indian Journal of Medical Ethics, (2), 119-123.
- International Conference on Harmonisation, Guideline for Good Clinical Practice E6(R3). (2023). https://database.ich.org/sites/default/files/ICH_E6%28R3%29_DraftGuideline_2023_0519.pdf Accessed 13Nov2024.
- Jalgaonkar, S. V., Bhide, S. S., Tripathi, R. K., Shetty, Y. C., Marathe, P. A., Katkar, J., & Thatte, U. M. (2016). An Audit of Protocol Deviations Submitted to an Institutional Ethics Committee of a Tertiary Care Hospital. PloS one, 11(1), e0146334. https://doi.org/10.1371/journal.pone.0146334
- Ochieng, J., Ecuru, J., Nakwagala, F. et al. Research site monitoring for compliance with ethics regulatory standards: review of experience from Uganda. BMC Med Ethics 14, 23 (2013). https://doi.org/10.1186/1472-6939-14-23
- World Health Organization. (2005). Handbook for Good Clinical Research Practice: Guidance for Implementation. https://iris.who.int/bitstream/handle/10665/43392/924159392X_eng.pdf Accessed 13Nov2024.
- University of the Philippines Research Ethics Board. (2023). UPMREB SOP 003/06-0-2012 Post Approval Review. https://reb.upm.edu.ph/sites/default/files/documents/SOP-III%20version%2030052023.pdf Accessed 13Nov2024.