

An illustration of a black funnel pouring various mechanical and scientific symbols into the head of a stylized orange person. The symbols include gears, wheels, arrows, a lightning bolt, a flame, and a faucet. The background is divided into three horizontal bands: light green at the top, orange in the middle, and light blue at the bottom.

Introduction to Clinical Research **Boot Camp 2021**

Research Staff

July 19-23
12:00-1:00pm PDT

ITHS | Institute of **Translational** Health Sciences
ACCELERATING RESEARCH. IMPROVING HEALTH.



An Ethical Framework for Clinical Research: Rethinking and Going Beyond Informed Consent

Learning objectives

In this session you will learn about eight ethical benchmarks for clinical research and practice applying them to real-life case examples, with a focus on the role of researcher-participant interactions.

By the end of this session you will be able to:

- Describe eight benchmarks for ethical clinical research.
- Discuss how empirical data illustrate challenges with informed consent.
- Describe the role of researcher-participant interactions in the ethical conduct of research.

Overview

- Beyond informed consent
- A framework for ethical clinical research
- Respect for participants in research interactions
- Case studies

Poll

Have you ever raised an ethical question about a study you were involved with? (Select all that apply)

- Yes, to a PI
- Yes, to a trusted colleague or friend
- No, never

Questions to think about (and put in the chat if you wish)

- Why did you raise the question? Or why didn't you?
- Did anything in particular make those conversations harder or easier?
- How do you see your role in identifying and resolving ethical issues?
- How has your role evolved over time? How do you see it continuing to evolve?

Team science → team ethics

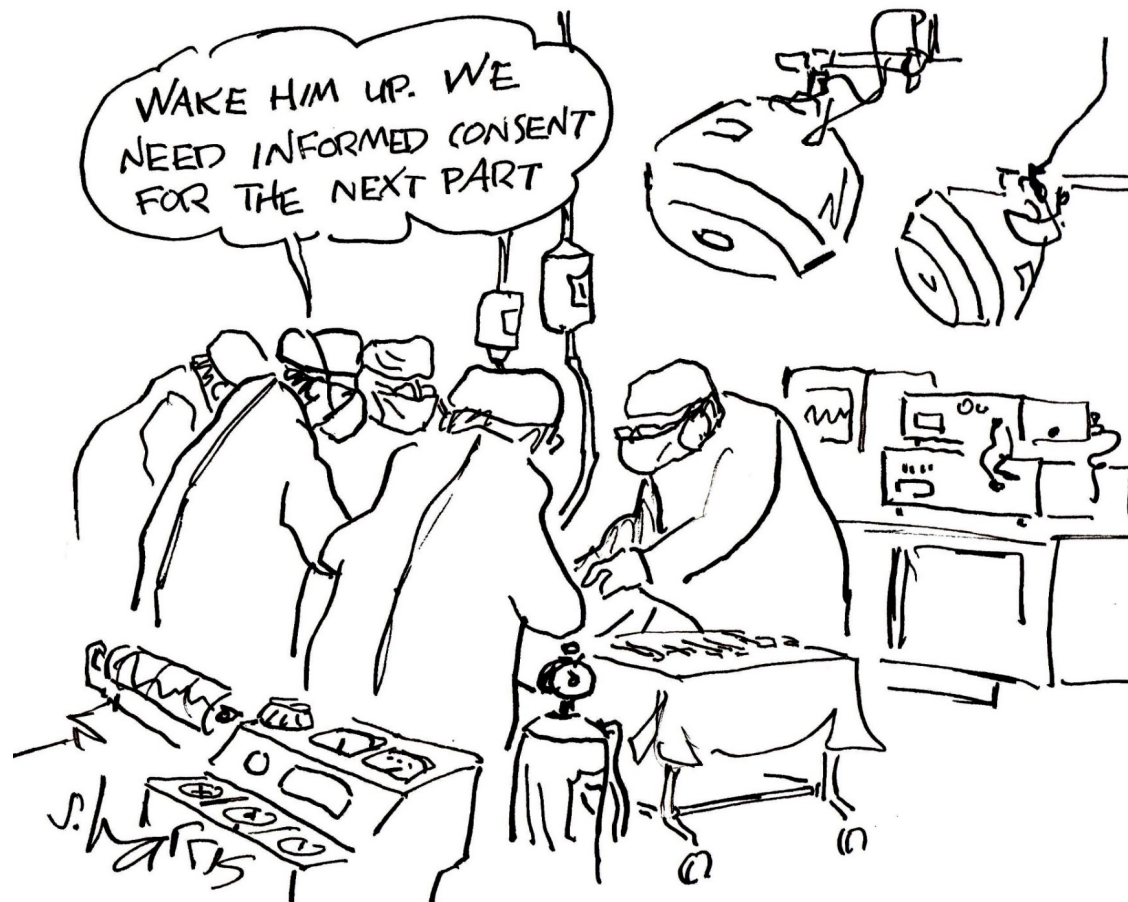
- All team members should be comfortable and empowered to raise ethical issues
- Ethical issues can arise at all stages of a study

Origins of research ethics guidelines

- Guidelines for ethical research are largely responsive to egregious research ethics violations
 - Nuremberg Trials → Nuremberg Code (1947)
 - *“The voluntary consent of the human subject is absolutely essential.”*
 - Nuremberg Code, 1st principle
 - US Public Health Service syphilis study at Tuskegee → Belmont Report (1979)

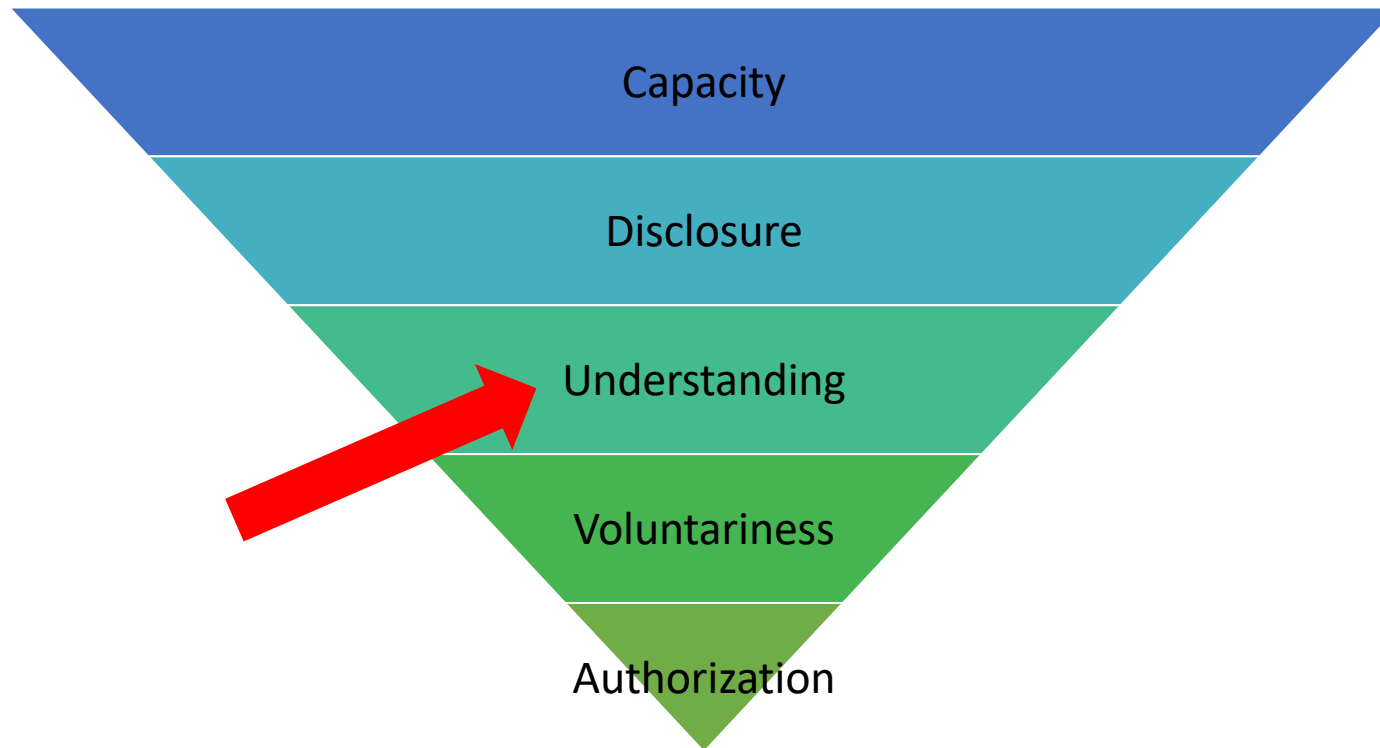
Research ethics today

- Not just about preventing egregious violations
 - Also offers guidance and tools to identify potential pitfalls, prevent unjustified or unnecessary harm, and improve equitable research practices
- Fleshes out responsibilities above the regulatory floor

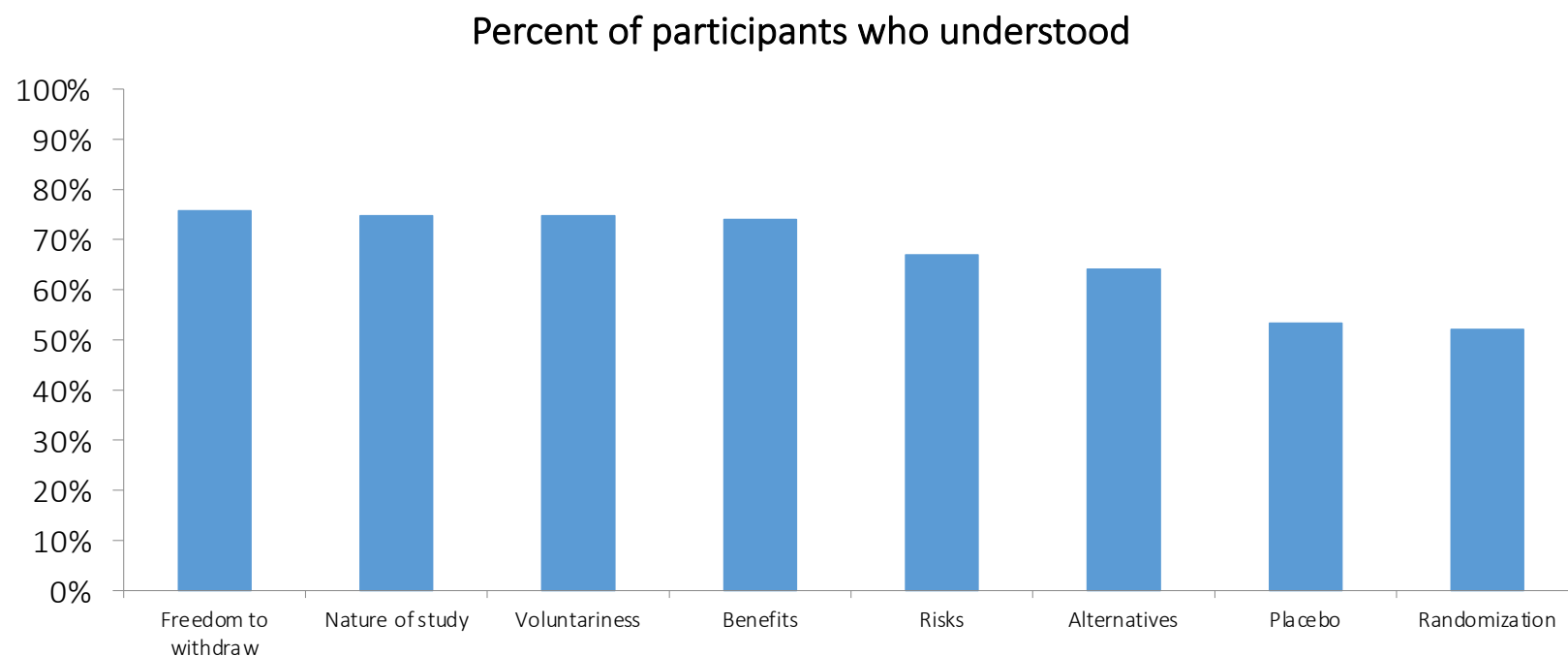


CartoonStock.com

Five elements of informed consent



Participant understanding of consent elements

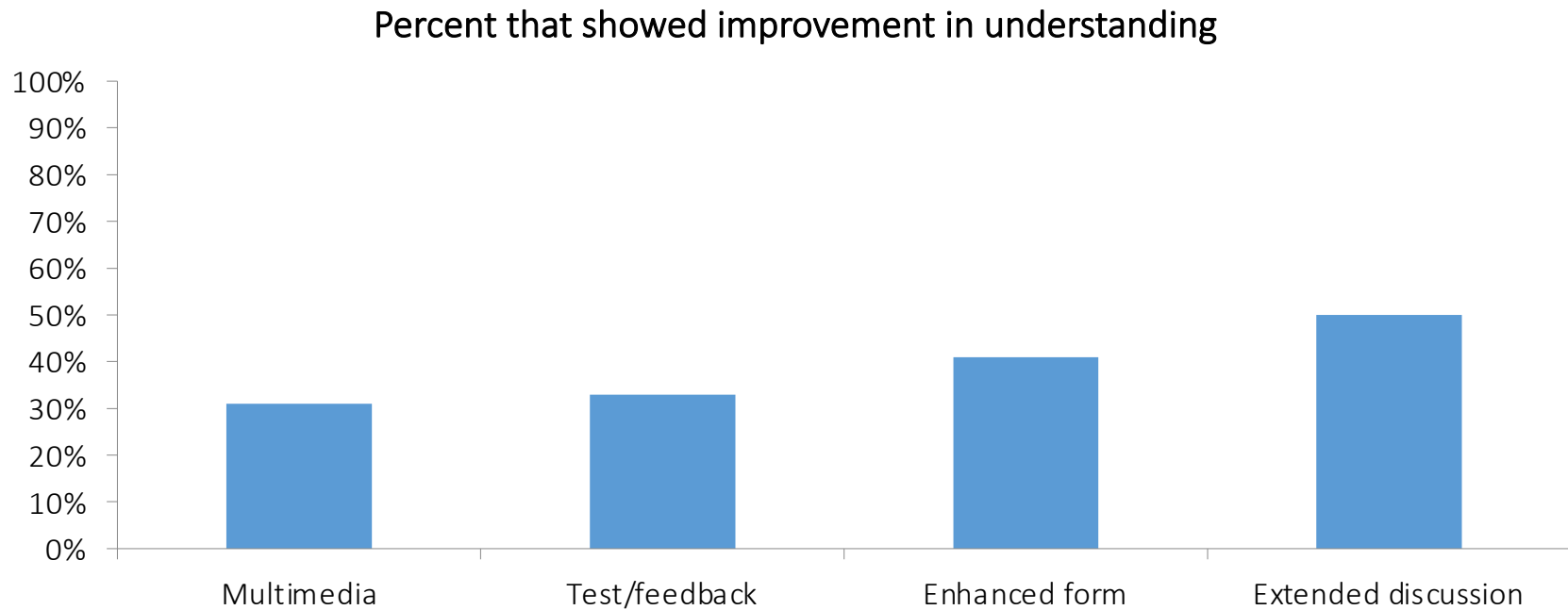


Nguyen TT et al. Participants' understanding of informed consent in clinical trials over three decades: systematic review and meta-analysis. *Bull WHO* 2015.

ITHS

Institute of Translational Health Sciences
ACCELERATING RESEARCH. IMPROVING HEALTH.

Interventions to improve understanding



Nishimura et al. Improving understanding in the research informed consent process: a systematic review of 54 interventions tested in randomized control trials. *BMC Med Ethics* 2013.

ITHS

Institute of Translational Health Sciences
ACCELERATING RESEARCH. IMPROVING HEALTH.

Informed consent is hard

- Understanding is limited and hard to improve
- Maybe we need to focus *earlier* in the process
 - People may decide whether to enroll before receiving consent form
(Kraft et al. JAMA Network Open 2020)
- Systematic, comprehensive look at overall study design can contextualize the role of informed consent

Eight benchmarks for ethical research

Collaborative
partnership

Social value

Scientific
validity

Fair participant
selection

Favorable
risk/benefit
ratio

Independent
review

Informed
consent

Respect for
participants and
communities

Emanuel et al. What makes clinical research ethical? *JAMA* 2000;283:2701-11; *JID* 2004;189:930-37.

ITHS

Institute of Translational Health Sciences
ACCELERATING RESEARCH. IMPROVING HEALTH.

Collaborative partnership

Does the research appropriately partner with the community (in research design, conduct, oversight, implementation, etc.)?

Promotes justice and avoids exploitation

Improves research quality:

- Transparency and buy-in
- Understanding community needs



Social value

Will the research lead to improvements in health or generalizable knowledge?

Limited social value includes:

- Unimportant questions
- Non-generalizable research
- Non-disseminated findings



Scientific validity

Is there a reasonable possibility the research will produce valid scientific results (e.g., enrollment, outcomes, power)?

Necessary to justify:

- Resources used
- Risks and burdens undertaken by participants

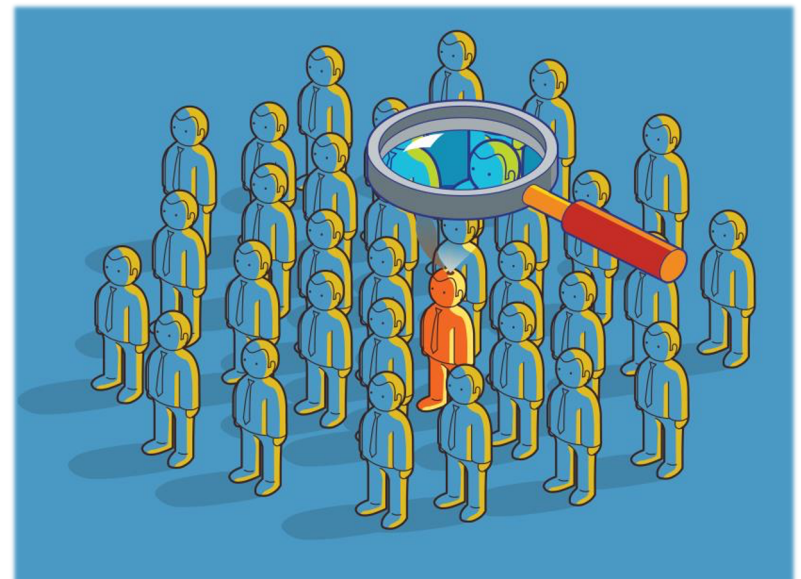


Fair participant selection

Are the study's scientific objectives, not vulnerability or privilege, guiding inclusion criteria and targeted populations?

Consider distribution of burdens and benefits of research:

- Burden → need protection
- Benefit → need access

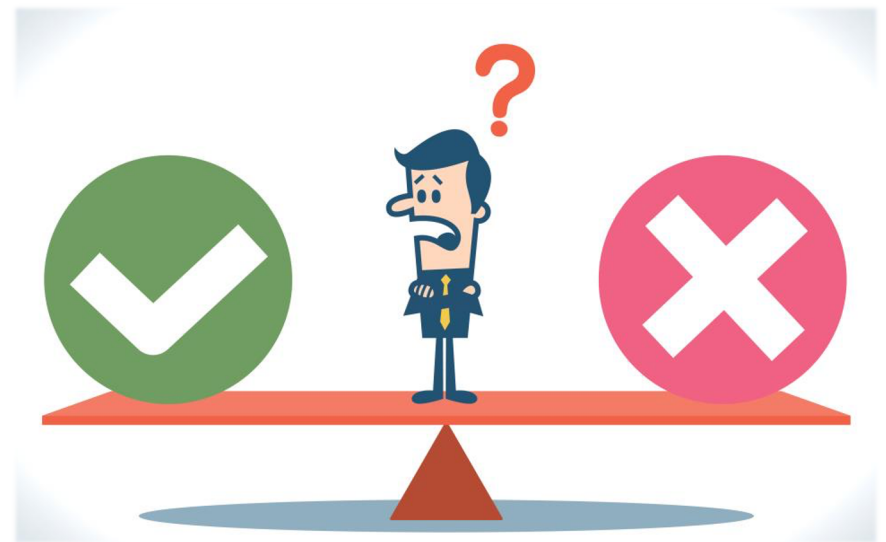


Favorable risk/benefit ratio

Does the research minimize risks and maximize benefits?

If benefits > risks to individual, proceed

If risks > benefits to individual, societal benefit must justify net risk



Independent review

Has the study been reviewed by an independent body?

Minimizes impact of potential conflicts of interest

Assures society that research is ethically appropriate



Informed consent

Has the participant made an informed decision about whether to take part?

Serves multiple functions: welfare, control, values concordance, transparency, trust

Some research can be ethical without all elements of consent (e.g., de-identified biospecimens, waiver of documentation)



Respect for participants and communities

Is the research team treating participants with respect throughout the study?

Obligations may include:

- Confidentiality
- Right to withdraw
- Compensation for injury
- Sharing results



What does respect mean to participants?

- Personal study team interactions
- Study communication processes
- Inclusion
- Consent and authorization

“For me, it comes down to how they treat me. They don't treat me like a patient. They don't treat me like a number. **They treat me like a person.**”

Kraft et al. *J Med Ethics* 2020

ITHS

Institute of Translational Health Sciences
ACCELERATING RESEARCH. IMPROVING HEALTH.

Conclusions

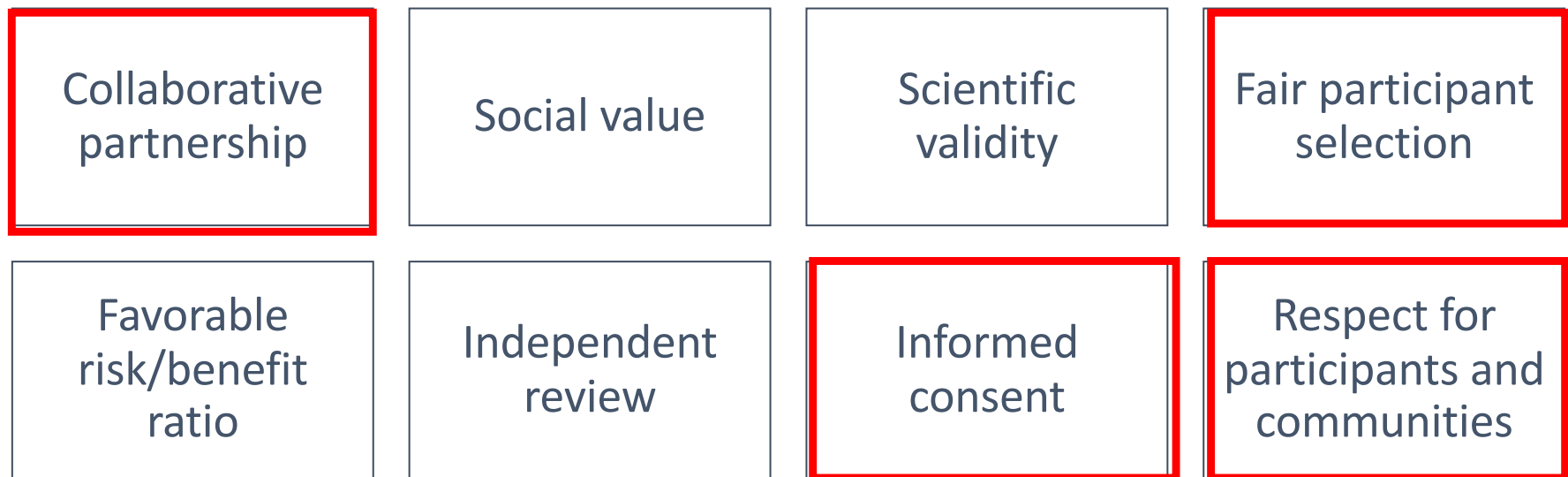
- “Traditional” informed consent and IRB review are important, but not sufficient – and imperfectly realized
- Eight benchmarks can help systematically identify issues that need attention – but balancing is often necessary
- Research staff have a critical role in embodying respect for persons

Case study

- You are a study coordinator recruiting and consenting parents via Zoom for a study about childhood vaccines.
- You are talking with a single mom who says she wants to join the study but is very distracted by multiple young children during the call and you aren't sure how much of the information she understood. She says her wifi is bad so she may not be able to connect later.
- You are not sure if you should consider her to have given informed consent, if you should try again later, or if you should mark her as unavailable on your list.

What benchmarks are at play?

What benchmarks are at play?



Emanuel et al. What makes clinical research ethical? *JAMA* 2000;283:2701-11; *JID* 2004;189:930-37.

Questions to discuss

- What ethical questions have you come across in your work?
- How do you think about showing respect for participants?
- What new or different challenges have come up during the pandemic?
- What examples of “team ethics” have you seen be effective?



