



Trans Tasman Radiation Oncology  
Group Limited  
ACN 132 672 292

## TROG POLICY AND PROCEDURES

# Ethical Principles for the Conduct of TROG Clinical Trials

**TPP E2**

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(Always refer to the TROG website to check for the current version of this policy)

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## 1. General Principles

The aim of this policy document is to ensure the protection of the rights, safety and well-being of trial participants. All research conducted under the auspices of TROG is performed in compliance with the principles detailed in the:

- Declaration of Helsinki: Ethical Principles for Medical Research Involving Human Subjects (last amended by the World Medical Association, 2004)<sup>1</sup>
- Note for Guidance on Good Clinical Practice (CPMP/ICH/135/95) annotated with TGA comments (Australia, July 2000)<sup>2</sup>,
- Interim Good Clinical Research Practice Guidelines (New Zealand, August 1998)<sup>3</sup>,
- National Statement on Ethical Conduct in Human Research, (Australia, 2007)<sup>4</sup> and
- Guidelines on Ethics in Health Research (NZ, 2005)<sup>5</sup>.

TROG investigators are also required to comply with all other Australian and New Zealand national requirements that are applicable to research involving human participants including all privacy legislations.

It is not the intention of this policy to repeat information from the above documents but to provide TROG investigators a summary of main areas covered in relation to the ethical conduct of clinical trials and to therefore assist them to easily locate further relevant more detailed information.

Specific templates and procedures have been implemented by TROG in order to ensure compliance to the above documents.

## 2. Guidelines – Ethics

### 2.1 Note for Guidance on Good Clinical Practice annotated with TGA comments (Australia)

The Note for Guidance on Good Clinical Practice is an internationally accepted standard for the designing, conducting, recording and reporting of clinical trials.

The Therapeutic Goods Administration (TGA) has adopted CPMP/ICH/135/95 in principle but has recognised that some elements are, by necessity, overridden by the National Statement and therefore not adopted and that others require explanation in terms of 'local regulatory requirements'.

Section not adopted:

Section 3: Institutional Review Board/ Independent Ethics Committee

Sections requiring further explanation:

Section 4.8: Informed Consent of Trial Subjects

Section 5.5.11: Retention of Records by Sponsors of Clinical Trials

Section 5.17: Adverse Drug Reaction Reporting

## **2.2 National Statement on Ethical Conduct in Human Research (Australia)**

The National Statement is designed to clarify the responsibilities of institutions and researchers for the ethical design, conduct and dissemination of results of human research; and review bodies in the ethical review of research.

The values set out in Section 1: Values and principles of ethical conduct – respect for human beings, research merit and integrity, justice and beneficence – help to shape the relationship between the researcher and research participants as one of trust, mutual responsibility and ethical equality. For this reason, the term research ‘participant’ is used rather than ‘subject’.

Other sections of particular relevance to TROG researchers include Chapter 2.2: General Requirements for Consent, Chapter 3.3: Interventions and Therapies, including Clinical and Non-clinical Trials, and Innovations (which also provides definitions of Phase I-IV clinical trials), Section 5.2: Responsibilities of Researchers, and Chapter 5.5: Monitoring Approved Research.

## **2.3 Interim Good Clinical Research Practice Guidelines (New Zealand)**

The New Zealand Guideline for Good Clinical Research Practice is based upon the EU, UK, Nordic, Australian, WHO and the Committee for Proprietary Medicinal Products (CPMP) Guidelines/Codes for Good Clinical Research Practice. The New Zealand guideline remains interim until the CPMP guideline, whilst finalised, is accepted as the de facto world standard.

This interim guideline establishes the principles of GCP in New Zealand for clinical trials of investigational products in humans. These principles are pertinent to all phases and types of clinical investigation in human participants, irrespective of who is conducting the trial. Compliance with the interim guideline is mandatory only for research conducted by the pharmaceutical industry intended for regulatory submission. However TROG has decided that all TROG clinical trials conducted in NZ will adhere to these guidelines also where relevant.

## **2.4 Guidelines on Ethics in Health Research (NZ)**

These guidelines cover the practical aspects of conducting clinical research in NZ including specific information on the recognition of the indigenous culture of Maori. The HRC Guidelines for Researchers on Health Research Involving Maori<sup>6</sup> should also be consulted.

## **3. Specific TROG Procedures**

The following procedures have been implemented as measures to ensure compliance.

### **3.1 Protocols**

TROG has developed a protocol template to ensure that all ethical and GCP requirements are covered. Refer to the TROG Policy and Procedure: TPP E3 Guidelines for the Development and Conduct of Clinical Trials.

All protocols should state that the trial will be conducted in compliance with the principles of the Declaration of Helsinki and ICH GCP guidelines.

The following statements must be included: "This Protocol, including the Participant information Sheet and Consent Form (PIC), must be approved by the TROG Scientific Committee (TSC) and the responsible HREC before enrolment of any patients into the trial. The Principal Investigator is responsible for ensuring that written Informed Consent is obtained from the patient before trial entry. The PI is responsible for informing the HREC of any Serious Adverse Events and/or amendments to the protocol as per local requirements."

### **3.2 Participant Information Sheet and Consent Form (PIC)**

TROG has developed a PIC template to ensure that all ethical and GCP requirements are covered. This template also includes a checklist of ICH GCP requirements to assist in the review of the PIC. Refer to the TROG Policy and Procedure: TPP E3 Guidelines for the Development and Conduct of Clinical Trials.

Any trial site specific changes (additions or deletions) must be approved by the Trial Coordinating Centre prior to submission to the responsible HREC for approval.

### **3.3 Informed Consent**

The following section must be included in the trial protocol:

“Before enrolment into a trial, each patient will be given a full explanation of the trial. Once this essential information has been provided to the patient and, the investigator has been assured that the patient understands the implications of participating in the trial, the patient will be asked to sign the consent form. By signing the consent form the patient is indicating that they understand the information that has been provided to them and that they are volunteering to participate in the trial.

For patients who are unable to provide their Informed Consent (e.g., mentally incompetent, or physically incapacitated and unable to sign), a parent or legal guardian must provide the Informed Consent on the behalf of the patient; however, if the patient is able to understand the nature, significance and extent of the risks associated with the Clinical Trial the patient’s consent should also be obtained in addition to the guardians.

If a potential trial participant is not fluent in English or is Deaf, a professional, accredited interpreter must be present during the Informed Consent process to ensure that the Informed Consent is valid and that the participant has understood the information provided to them.”

The TROG Central Operations Office QA team conducts audits of informed consent forms throughout the trial.

### **3.4 Human Research Ethics Committee**

The following section must be included in the trial protocol:

“The Principal Investigator at the Trial Site must submit the protocol, including the Participant Information and Consent Form to the responsible HREC. A copy of the HRECs’ written approval or advice must be forwarded to the TCC as soon as possible after it has been received by the Trial Site. The HREC approval/advice letter must include:

- a signature from the Chairperson of the HREC
- the date of HREC review
- the trial title
- the protocol number, date and version

- the name, date and version of all other trial related documents such as the Participant Information Sheet and Consent Form
- the length of Protocol approval (e.g. 12 months)
- the requirements for trial progress report submissions (i.e. annual).”

### **3.5 Adherence to Protocol**

The following section must be included in the trial protocol:

“Except for an emergency situation in which proper care for the protection, safety and well being of the trial participant requires that an alternative treatment be used, the trial shall be conducted exactly as described in the approved protocol. Any deviation from the protocol must be recorded and explained.’

### **3.6 Protocol Review by TROG**

All final draft protocols including the PIC are reviewed firstly by the TROG Central Operations Office (TCOO) and then the TROG Scientific Committee who gives final approval before any protocol can be submitted to an ethics committee.

Any protocol amendments must also follow the above procedure.

### **3.7 Safety Review by TROG**

The protection of research participants is also ensured by the adequate monitoring of treatment safety. TROG has implemented the following procedures.

The Trial Coordinating Centre is responsible for implementing and maintaining a database or manual log to record information from all SAEs received from Trial Sites.

The Trial Management Committee is responsible for:

- a) conducting a clinical review of all SAEs immediately after they have been reported
- b) In the event of a significant incidence of SAEs, giving consideration to amending the trial.
- c) Presenting SAE summary reports to the TROG Scientific Committee at least 6 monthly.

Refer to the TROG Policy and Procedure: TPP E4 Adverse Event Definitions, Scoring and Reporting for further information.

In addition, Data Monitoring Committees are established for all randomised phase II and III trials, and where TROG is the primary/lead trials group in the case of intergroup trials. Refer to the TROG Policy and Procedure: TPP E9 Data Monitoring Committee Guidelines for further information.

### **3.8 Agreements**

In order to ensure the ethical conduct of clinical trials, TROG has designed Clinical Trial Agreements (CTAs) which detail responsibilities and obligations of TROG and the other party i.e. Trial Site, Trial Coordinating Centre, Collaborating Groups . Each trial must finalise all required CTAs prior to the trial commencing accrual. Refer to the TROG Policy and Procedure: Trial Development Resources for further information.

## **4. Legislation and Guidelines - Privacy and Confidentiality**

Maintaining high standards of conduct with respect for the privacy of individuals and the confidentiality of information is essential for all personnel involved with the conduct of clinical research.

Collection, use, disclosure and storage of data associated with TROG clinical trials must be compliant with the Privacy Act 1998 (Aust) and associated Guidelines to the National Privacy Principles<sup>7</sup>, relevant Australian State and Territory legislation and the Privacy Act 1993 (NZ)<sup>8</sup>. Complete information on State and Territory privacy laws can be found at [http://www.privacy.gov.au/privacy\\_rights/laws/](http://www.privacy.gov.au/privacy_rights/laws/)

In addition to the above regulations and guidelines, principle 2.11 of ICH GCP states that the confidentiality of records that could identify subjects should be protected, respecting the privacy and confidentiality rules in accordance with the applicable regulatory requirements.

The NHMRC National Statement also outlines privacy and confidentiality issues, and covers additional areas, such as the use of human tissue samples (chapter 3.4) and human genetic research (chapter 3.5).

## 4.1 Specific TROG Procedures

The following section must be included in the trial protocol:

### “Confidentiality

All information regarding trial participants must be treated in strict confidence. Data, which identify any trial participant, must not be revealed to anyone not directly involved in the trial or the clinical care of that participant. An exception is where the trial participant has provided written consent for his/her records to be included in source document verification. In this instance, the records may be inspected by (a) a representative of TROG for the purposes of source document verification or quality audit as stipulated in the ICH GCP Guidelines, or (b) a representative of a government regulatory authority for the purposes of official inspection. Records must be made available for inspection on the understanding that all information relating to trial participants will be treated in strict professional confidence.”

The TROG PIC template covers all aspects of how the research participant’s personal and health information will be dealt with including data access, confidentiality and publication of results.

## 5. References

1. Declaration of Helsinki: Ethical Principles for Medical Research Involving Human Subjects (last amended by the World Medical Association, 2004). Available at <http://www.wma.net/e/policy/b3.htm>
2. Note for Guidance on Good Clinical Practice (CPMP/ICH/135/95) annotated with TGA comments, TGA, Australia, July 2000. Available at <http://www.tga.gov.au/docs/pdf/euguide/ich/ich13595.pdf>
3. Interim Good Clinical Research Practice Guidelines, Medsafe, New Zealand, August 1998. Available at <http://www.medsafe.govt.nz/regulatory/Guideline/medicines.asp>
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5. Guidelines on Ethics in Health Research, Health Research Council, NZ, 2005. Available at <http://www.hrc.govt.nz/assets/pdfs/publications/Ethics%20Guidelines%20July%202006.pdf>
6. Guidelines for Researchers on Health Research Involving Maori, Health Research Council, NZ, 2005). Available at <http://www.hrc.govt.nz/assets/pdfs/publications/MHGuidelines%202008%20FINAL.pdf>
7. Guidelines to the National Privacy Principles, Office of the Federal Privacy Commissioner, Australia, 2001. [http://www.privacy.gov.au/publications/nppgl\\_01.html](http://www.privacy.gov.au/publications/nppgl_01.html)
8. Privacy Act, NZ 1993. Available at: <http://www.privacy.org.nz/the-privacy-act-and-codes/>