Open Letter to Physicians in Clinical Research

Dear colleague,

There have been a number of recent changes in the public perception of how doctors conduct research using human subjects. This is due to the folly of a few who undertook studies without knowing the nature of the responsibilities they agreed to when they signed the Food and Drug Administration's (FDA) form 1572. There have even been those who betrayed the trust human subjects have in their doctors.

The perception that DOCTORS are not meeting the public's expectations has followed errors in judgement by both investigators and by the oversight committees - Institutional Review Boards (IRB) - they report to. These well-publicized errors have led to an increase in the number of FDA audits and an increase in the number of Investigators and IRB's at major teaching centers who have been publicly shut down or warned to straighten up their act.

So concerned are the regulatory bodies about the transgressions in ethics regarding clinical trials, including deaths of subjects, that they have a new Office of Human Research Protection (OHRP) equal in status to U.S. Department of Health and Human Services (HHS). The OHRP, along with HHS, the Food and Drug Administration (FDA), the National Institutes of Health (NIH), the Institute of Medicine (IOM), and the National Bio-Ethics Advisory Commission (NBAC) are changing the climate within which research using human subjects takes place. You should be aware of these changes and learn how to insure that you do not make a preventable error. The mission of all these groups is to improve human subject safety.

The official goal of the OHRP, for example, is "to ensure that all clinical investigators, research administrators, IRB members and IRB staff receive appropriate research bioethics training and human subjects research training."

Another example is that the NIH now requires "all key personnel" involved in the design or conduct of HIH funded research involving human subjects to *demonstrate that they have completed education* regarding the protection of human research subjects. How long before the FDA follows suit?

The NIH, requires a description of the education completed to be submitted prior to any award or grant for clinical research. To document that an Investigator has fulfilled this educational requirement they are asked to list educational activities in the protection of human research subjects completed in the last five years. Would you be able to document this type of learning if this requirement was extended beyond NIH funded research?

Physician investigators are certainly among those targeted by this mandate. Understanding good clinical practices (GCP) and the ethics of clinical research is a major part of the requirement which may be fulfilled in many ways at this point in time as there are no specific courses or reading materials prescribed.

This concern over human subject safety is noticeably expanding. The Inspector General of the HHS recently stated that those who are charged with protecting human subjects have made only "minimal progress". He was particularly critical of the lack of education criteria for

investigators and IRB members. Are you ready for what is coming in terms of a required knowledge of the concept of good clinical practices (GCP)?

In an editorial in the New England Journal of Medicine (NEJM), Donna Shalala, PhD, (former Secretary of HHS) made it clear that "... researchers and other personnel must have up-to-date training and a thorough knowledge of their responsibilities". She states, further, that "There can be no shortcuts when it comes to the protection of human subjects" and that "good clinical practices are neither esoteric nor frivolous." The solution is stated to be more and better training.

In virtually every list of recommendations, by every group or office put forward to remedy the problems that group sees is "Education of the Investigator". This can only be interpreted to mean that Physician clinical investigators had better take the initiative and really learn GCP or it will be mandated upon us.

I trust this will be taken as a gentle reminder that when we enter the arena of clinical research involving human subjects there are ethical and scientific responsibilities not unlike those that guide us in the care of our patients. Further, it is in our own best interest to become well acquainted with the regulations governing clinical research and the concept of "good clinical practices" (GCP) as they apply to research.

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