

Framework for the ethics of research with human subjects



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Disclaimer



- **These views are mine and do not necessarily represent those of the Department of Bioethics, Clinical Center, National Institutes of Health, or the Department of Health and Human Services.**
- **I have no conflicts of interest to declare**

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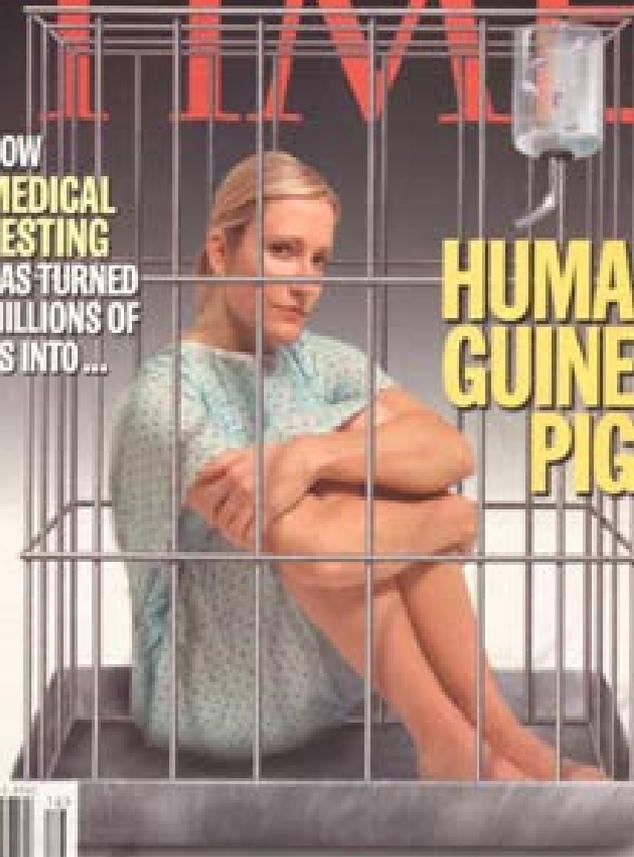
Powell's Mission Impossible



TIME

HOW
MEDICAL
TESTING
HAS TURNED
MILLIONS OF
US INTO ...

HUMAN
GUINEA
PIGS



www.time.com AOL Keyword: TIME

Ethics of clinical research



- The goal of clinical research is to generate useful knowledge about human health and illness
- Benefit to participants is *not* the purpose of research (although it does occur)
- People are the *means* to developing useful knowledge; and are thus at risk of exploitation

Ethics of clinical research



- Should we do research involving human subjects?
- If yes, how should it be done?

Ethics of Clinical Research: should we do it?



- Societal health benefits of medical research are compelling- therapies, diagnostic and preventive strategies and improvement in quality of life
- Clinicians do not know how to safely and effectively treat, prevent, or diagnose diseases or promote health without evidence
- Other important benefits, e.g. economic,

AAMC 2011. <https://www.aamc.org/download/265994/data/tripp-umbach-research.pdf>

If we should do research, how should it be done ethically?

The New York Times



New Drugs Stir Debate on Rules of Clinical Trials

By AMY HARMON, September 18, 2010

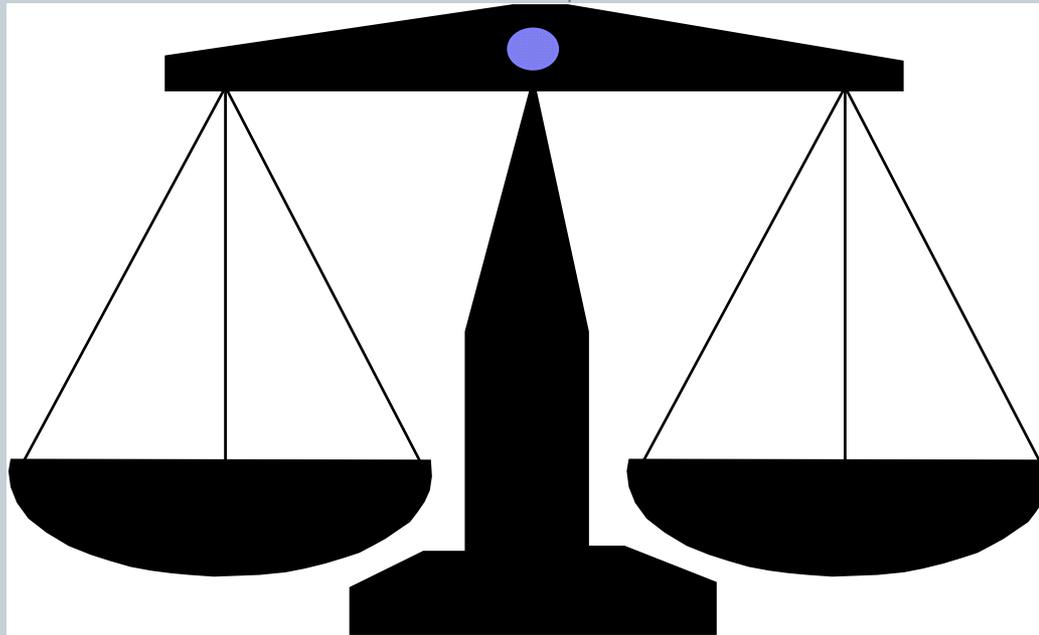
“Defenders of controlled trials say they are crucial in determining whether a drug really does extend life more than competing treatments. Without the hard proof the trials can provide, doctors are left to prescribe unsubstantiated hope — and an overstretched health care system is left to pay for it. ...

“... critics ...argue that the new science behind the drugs has eclipsed the old rules and ethics - of testing them...in some cases, drugs under development... may be so much more effective than their predecessors that putting half the potential beneficiaries into a control group, and delaying access to the drug to thousands of other patients, causes needless suffering.”

Ethics of clinical research

- **Benefits to society and future patients**

- **Protect rights and welfare of research participants**



Ethics of Clinical Research: how should we do it?



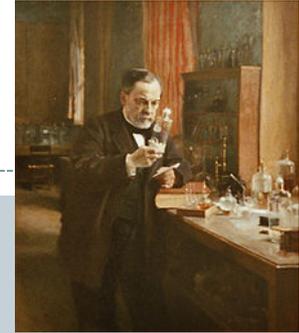
- **Ethical requirements in clinical research:**
 - Promote the responsible conduct of useful clinical research and progress in understanding and intervening in human health and illness
 - Minimize the possibility of exploitation and harm
 - Ensure that the rights and welfare of subjects are respected while they contribute to the generation of knowledge
 - Help to maintain public trust

Ethics of Clinical Research: Lessons From History



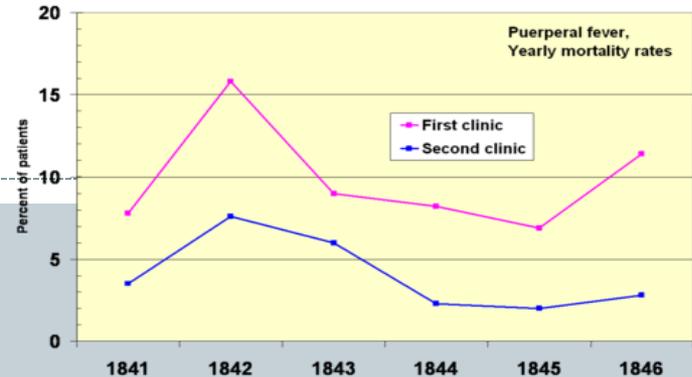
- *Few rules. Physicians experimenting to benefit individuals*
- “Utilitarian era” emphasis on benefit to society, inclusion of vulnerable groups
- Examination of the scope and limitations
- Rules and Regulations. Protection of human subjects
- Participation in research as a benefit

History



- **Louis Pasteur and Joseph Meister**
- **Joseph severely bitten by rabid dog. Brought to Pasteur in hopes of preventing the disease.**
- **Pasteur - not a medical doctor and had never successfully used the vaccine on a human.**
- **Pasteur thought the boy would die from rabies**
- **Joseph did not get rabies and Pasteur was hailed as a hero**

History



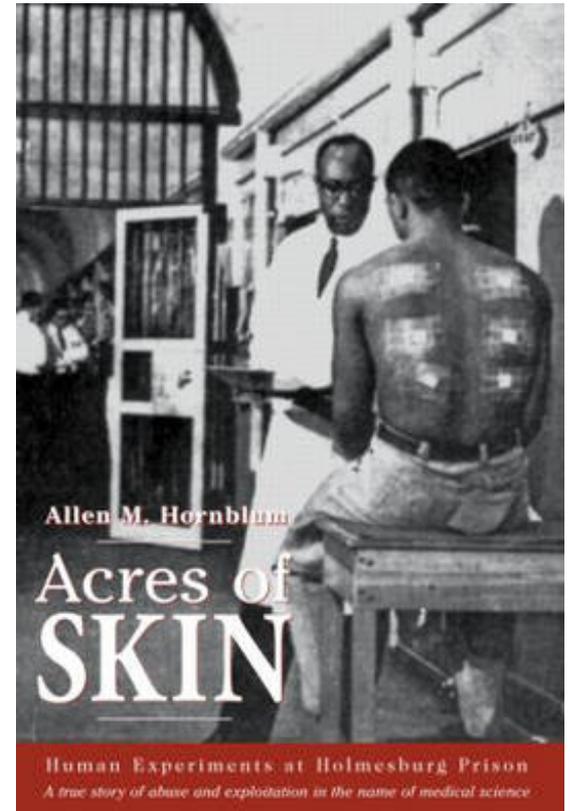
- Ignaz Semmelweis
- First noticed a difference in the rates of puerperal fever and death between 2 clinics.
- By careful examination of variables and data collection, concluded that the difference was the type of practitioner (obstetricians versus midwives) (1841-1846)
- Later, he showed that using chlorinated lime to sterilize obstetricians' hands significantly reduced the rate of puerperal fever. (1847)

Ethics of Clinical Research: Lessons From History



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Utilitarian: Research with vulnerable populations



“ETHICALLY IMPOSSIBLE”
STD Research in Guatemala
from 1946 to 1948



Salk polio vaccine trials



1954

- Almost 2 million children in the US
- Salk inactivated polio vaccine vs. placebo vs. no vaccine
- 80-90% effective against paralytic polio

Ethics of Clinical Research: Lessons From History



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Examination of scope and limitations



- **Henry Beecher (NEJM 1966)**
- **22 examples, including:**
 - Withholding antibiotics from men with rheumatic fever,
 - Injecting live cancer cells into nursing home patients (Jewish Chronic Disease Hospital),
 - Transplanting melanoma from daughter to mother, who died about a year later.





The New York Times

Syphilis Victims in U.S. Study Went Untreated for 40 Years

By JEAN HELLER
The Associated Press

WASHINGTON, July 25—For 40 years the United States Public Health Service has conducted a study in which human beings with syphilis, who were induced to serve as guinea pigs, have gone without medical treatment for the disease and a few have died of its late effects, even though an effective therapy was eventually discovered.

The study was conducted to determine from autopsies what the disease does to the human body.

Officials of the health service who initiated the experiment have long since retired. Current officials, who say they

have serious doubts about the morality of the study, also say that it is too late to treat the syphilis in any surviving participants.

Doctors in the service say they are now rendering whatever other medical services they can give to the survivors while the study of the disease's effects continues.

Dr. Merlin K. DuVal, Assistant Secretary of Health, Education and Welfare for Health and Scientific Affairs, expressed shock on learning of the study. He said that he was making an immediate investigation.

The experiment, called the Tuskegee Study, began in 1932 with about 600 black men,

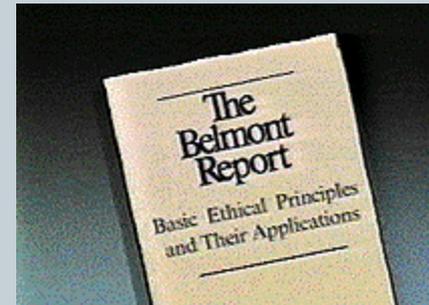
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Protection of human subjects

- **National Research Act (1974) establishes the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research**
- **Ethical principles underlying the conduct of research:**
 - Respect for persons
 - Beneficence
 - Justice
- **Boundaries between Practice and Research**



U.S. National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, The Belmont Report 1979

Protection of Human Subjects



- **International codes and guidelines**
- **U.S. Regulations**
- **Laws and regulations from other jurisdictions**
- **Institutional policies and guidelines**

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Influence of AIDS activism



Explicit recognition of benefit of
research with children

Codes and Guidelines



- Nuremberg Code (1949)
- Declaration of Helsinki (1964- multiple revisions-2013)
- The Belmont Report (1979)
- CIOMS/WHO International Guidelines (1993, 2002)
- ICH/GCP-International Conference on Harmonization- Good Clinical Practice (1996)

Codes and Guidelines



- **Authority?**
- **Universal?**
- **Absolute or subject to revision and interpretation?**

U.S. Regulations



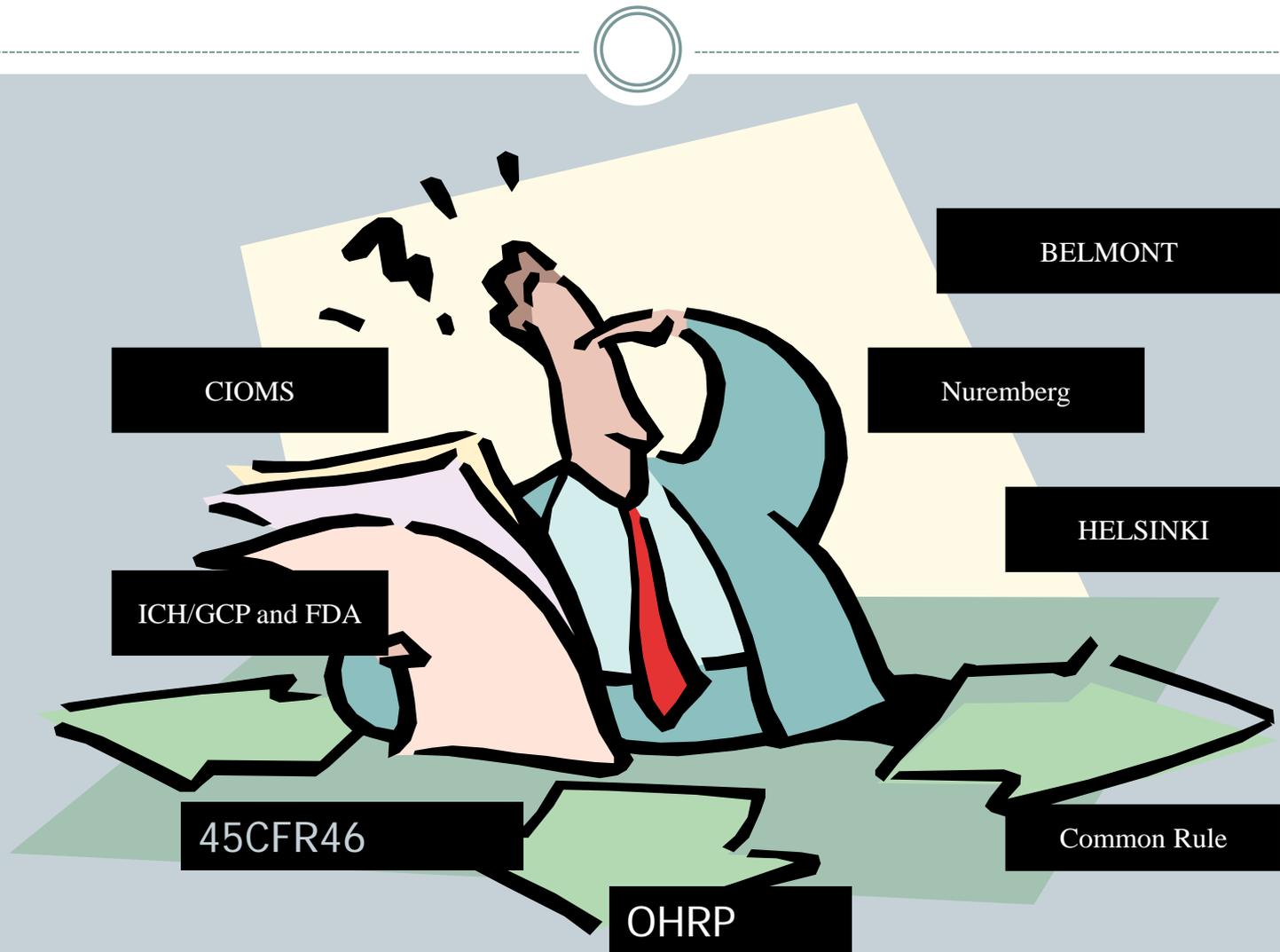
- The Common Rule (US 45CFR.46)
- 45CFR.46 Subparts B, C, D
- FDA regulations (US 21CFR50, 56, and others)

U.S. Regulations



- **Office of Human Research Protections (OHRP)**
<http://www.hhs.gov/ohrp>
- **Federal Wide Assurance (FWA)**
- **Intramural Office of Human Subjects Research**
<http://ohsr.od.nih.gov/>

Confusion reigns...



Guidance and regulations



- **Guidance developed in response to historical events**
- **Some divergent recommendations**
- **Differences in interpretation**
- **Need for a systematic, coherent, universally applicable framework**

Ethical framework: 8 principles



- Collaborative partnership
- Valuable scientific question
- Valid scientific methodology
- Fair subject selection
- Favorable risk-benefit
- Independent review
- Informed consent
- Respect for enrolled subjects

Emanuel E, Wendler D, Grady C. What makes clinical research ethical? *J Am Med Assoc.* 2000; 283(20):2701-11

Emanuel E, Wendler D, Killen J, Grady C. *J Infect. Diseases* 2004; 189:930-7.

Collaborative Partnership



- Ethical clinical research should be a collaborative partnership with the relevant partners, e.g.
 - Collaboration in planning, conducting and overseeing research, and integrating research results into the health system
 - Respect for contributions of partners
 - Collaboration with existing systems of health care

Collaborative Partnership



- Collaborative partnership can be facilitated by planning and working with:
 - Policy makers and health systems
 - Community advisory boards
 - Patient advocates on scientific advisory boards
 - Advocates for research funding
 - Collaborating investigators
 - Practicing clinicians
 - Etc.

Collaborative partnership, egs.

- **NIH Council of Councils**
- **NIH Council of Public Representatives**
- **CABs**
- **Advocacy groups**
- **Patient Advisory Group**



Valuable Scientific Question



Ethical clinical research should answer a valuable question, i.e., one that will generate new knowledge or understanding about human health or illness, i.e. a socially, clinically, or scientifically useful question



Valuable Scientific Question



- **Valuable to whom?**
 - Participants
 - Community in which participants live?
 - Some other group
 - Society, future people etc?
- **In whose view?**
- **How is value to be judged?**

Value: case examples

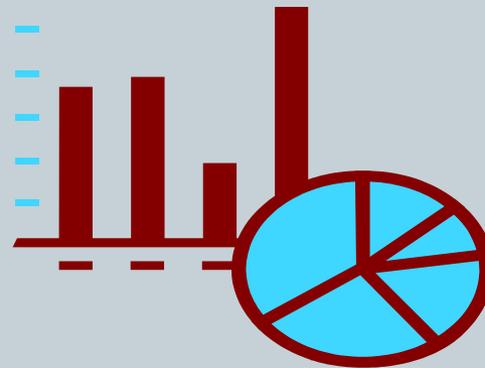


- **B. Freedman** (IRB 1987)
- **HIV vaccine** (Science magazine 2004)
- **Malaria testing in pregnant women** (Lavery et al. 2007)

Valid Scientific Methodology



- Ethical clinical research should be designed in a methodologically rigorous manner (design, methods, statistical power and methods, etc.) that will yield valid, reliable, generalizable, and interpretable data, and that is feasible



Scientific validity example



- **Choice of endpoints**
 - e.g. ischemic or hemolytic stroke
- **Choice of design**
 - Randomized double blinded control
 - Noninferiority or superiority
- **Choice of procedures**
 - Measures of outcome, length of follow- up
- **Statistical methods**
 - Power, methods, level of significance
- **Feasibility**



CONTROL GROUP



OUT OF CONTROL GROUP.



Fair subject selection



- Scientific objectives should guide inclusion criteria, recruitment strategies, and selection (not privilege or easy availability or vulnerability)
- Minimize harms and fairly distribute harms and benefits
- No exclusion without justification



Research as burden or benefit?



Research
as 'burden'

Subjects
need
protection



Research
as 'benefit'

Subjects
need
access

Fair subject selection: what is the appropriate population?



- Is it preferable to test an early potentially risky therapy in healthy affected adults who can consent but have mild disease or in severely ill infants who are otherwise likely to die as infants?
- Protecting vulnerable participants

Favorable risk-benefit



- Are risks to subjects necessary and minimized?
- Are risks justified by benefit to individual subjects and/or the importance of the knowledge to society?
- Are benefits maximized?

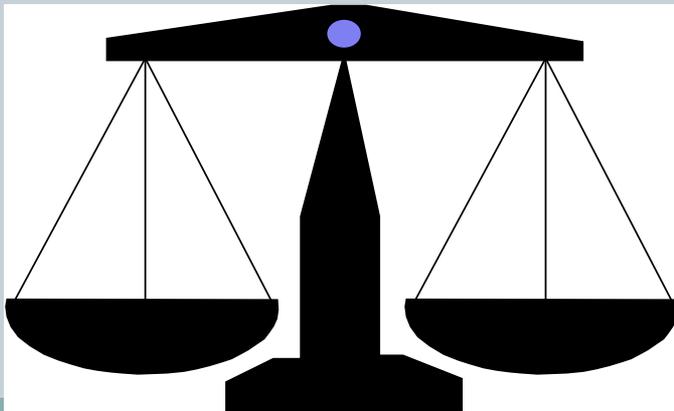
Non-maleficence and Beneficence

Benefits and Risks in Research



[I]nterests other than those of the subject may on some occasions be sufficient by themselves to justify the risks involved in the research, so long as the subjects' rights have been protected.

The Belmont Report



Challenges



- **Identifying risks- which ones count?**
- **Minimizing, limiting risks**
- **Direct vs. indirect benefits**

Clinical research and clinical practice



Different Goals

Different Methods

Different justification for risk to individuals



Independent review



- To ensure ethical requirements have been fulfilled
- To check investigator biases and conflicts
- To assure the public that research is not exploiting individuals or groups

Criteria for IRB Review

(45CFR.46.111 and 21CFR56.111)



- Risks ... are minimized.
- Risks are justified by anticipated benefits, if any, to the subjects or the importance of the knowledge to be gained
- Subjects will be selected and treated fairly
- Informed consent is adequate

Informed Consent



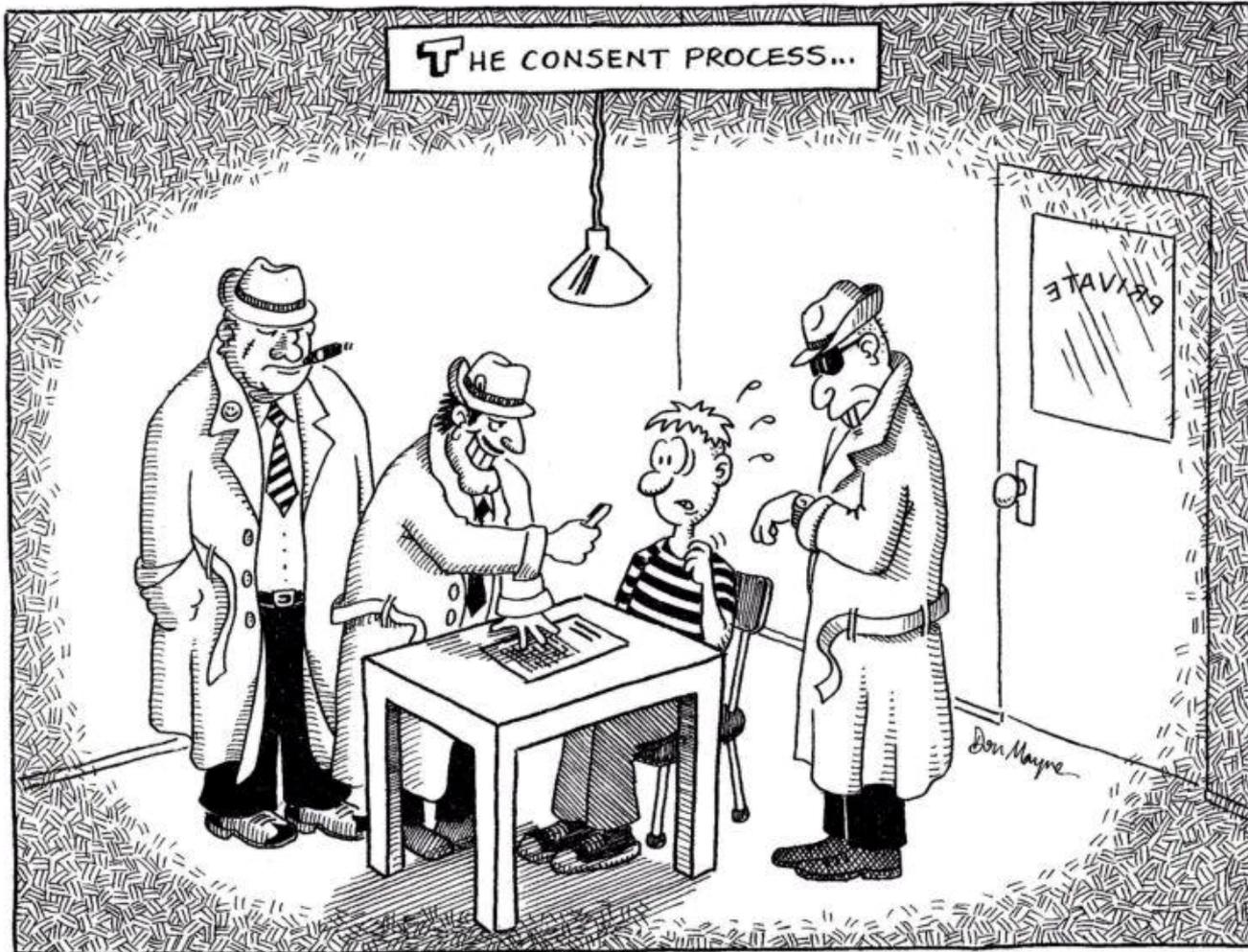
- Informed consent ensures that individuals have the opportunity to decide whether they want to participate in research or continue participation and whether it is compatible with their goals, values and interests

Respect for persons

Informed consent



- Disclosure of information
- Understanding
- Voluntary decision making
- Authorization



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Respect for enrolled subjects



- **Ethical research requires continued respect for the rights and welfare of participants throughout research, including:**
 - Protecting confidentiality
 - Monitoring welfare
 - Recognizing right to withdraw
 - Providing new information
 - Informing participants of findings
 - Planning for after the trial

Framework- What makes clinical research ethical?

Collaborative partnership

Valuable scientific question

Valid scientific methodology

Fair subject selection

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Independent review

Informed consent

Respect for enrolled subjects

Systematic and sequential

Necessary

- Procedural requirements may be waived

Universal

- Adapted and implemented according to context

Requires balancing, specification

Ethical framework: 8 principles



Conflicts occur between the principles.

e.g.,

- **Enhancing scientific validity may increase risks.**
- **What seems necessary to respect enrolled subjects or obtain informed consent may compromise scientific validity.**

Ethical framework: 8 principles



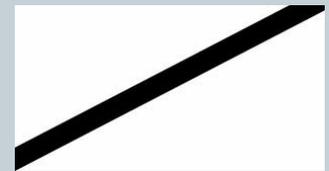
In order to apply the principles, reconcile conflicts and make informed judgments about ethical research, need:

- **Educated and informed investigators and research teams**
- **Educated IRBs with diverse members including investigators, statisticians, ethicists, and lay people.**

Changing Landscape



- Learning Health Care
- Research about usual care
- Quality improvement
- Comparative effectiveness research
- Research using clinical databases or clinical samples
- Genomic data and sharing



Preserving the balance

