National Research Ethics Committee

NREC-CT A Meeting

11th of May 2022

Attendance

Name	Role
Prof. Alistair Nichol	Chairperson, NREC-CT A
Dr Heike Felzmann	Deputy Chairperson, NREC-CT A
Prof. Mary Donnelly	Deputy Chairperson, NREC-CT A
Prof. Tina Hickey	Committee Member, NREC-CT A
Dr Dervla Kelly	Committee Member, NREC-CT A
Prof. John Wells	Committee Member, NREC-CT A
Mr Gerard Daly	Committee Member, NREC-CT A
Dr Jimmy Devins	Committee Member, NREC-CT A
Prof. Catherine Hayes	Committee Member, NREC-CT A
Ms Muireann O'Briain	Committee Member, NREC-CT A
Prof. David Brayden	Committee Member, NREC-CT A
Prof. Patrick Dillon	Committee Member, NREC-CT A
Dr John O'Loughlin	Committee Member, NREC-CT A
Dr Darren Dahly	Committee Member, NREC-CT A
Prof. Gene Dempsey	Committee Member, NREC-CT A
Dr Emily Vereker	Acting Head, National Office for RECs
Ms Patricia Kenny	Project Officer, National Office for RECs
Dr Jane Bryant*	Project Officer, National Office for RECs
Dr Laura Mackey	Programme Officer, National Office for RECs
Dr Susan Quinn*	Programme Manager, National Office for RECs

*Drafted minutes

Apologies: Dr Geraldine Foley, Ms Ann Twomey

Quorum for decisions: Yes

Agenda

- Welcome & Apologies
- 22-NREC-CT-088
- 22-NREC-CT-090
- 22-NREC-CT-091
- 22-NREC-CT-092
- 22-NREC-CT-094
- AOB

- The Chair welcomed the NREC-CT A.
  - The minutes from the previous NREC-CT A meeting on 6th of April 2022 were approved.
  - The NREC Business Report was discussed and noted.

Applications

22-NREC-CT-088

Principal Investigator: Dr Stephen O'Connor

Study title: Multi-center, double-blind, randomized, placebo-controlled, parallel-group study to evaluate the efficacy and safety of self-administered subcutaneous selatogrel for prevention of all-cause death and treatment of acute myocardial infarction in subjects with a recent history of acute myocardial infarction

Lead institution: St James's Hospital

- NREC-CT comments:

- The NREC-CT A noted that this study represents a double-blind, randomised study to evaluate the use of platelet inhibition in the pre-hospital setting, for treatment of acute myocardial infarction in subjects with a recent history of acute myocardial infarction.

- The NREC-CT A commented that the patient facing documents were well written and that this was a well- presented submission.
- The NREC-CT A agreed that additional information was required to inform its deliberations before a final ethics position could be returned.

  - NREC-CT Decision:

- Request for Further Information

  - Further Information Requested:

- The Committee requested that the wording in the PIL related to experiencing a heart attack is corrected.
- The Committee noted the PIL states that participants are not permitted to take Selatogrel if they are taking 3 different types of blood thinner drugs together. The Committee requested that the applicants clarify that these patients are excluded from partaking in the trial, as this is listed as an exclusion criterion in the Protocol.
- The Committee requested that information regarding self-administration of the drug while travelling in Ireland and abroad is added to the PIL.
- The Committee requested clarification regarding reimbursement for lost earnings, which is referenced in the Application Form but not in the PIL. The Committee also requested that amounts should be changed to euro.
- The Committee requested clarification as to whether participants in the trial would be excluded from standard of care advice, for example self-administration of aspirin while awaiting first responders. If this is the case, the Committee requested that the applicants please provide a justification and provide further detail to participants.

22-NREC-CT-090

- Principal Investigator: Dr Desmond Michael Murphy

Study title: A randomized, double-blind, placebo controlled study assessing the long-term effect of dupilumab on prevention of lung function decline in patients with uncontrolled moderate to severe asthma

Lead institution: Cork University Hospital

  - NREC-CT comments:

- The NREC-CT A noted that this study represents randomised, double-blind, placebo-controlled study Phase III extension study, evaluating a cytokine blocking antibody treatment for prevention of lung function decline in patients with uncontrolled moderate to severe asthma.

- The NREC-CT A noted that the PIL was accompanied by a good short summary. The Committee also commented that the PI has extensive trial experience.
- The NREC-CT A agreed that additional information was required to inform its deliberations before a final ethics position could be returned.

  - NREC-CT Decision:

- Request for Further Information

  - Further Information Requested:

- The Committee noted that the Participant Information Leaflet (PIL) was long and complex and requested that it be restructured to improve accessibility and emphasis on the importance of the participants.
- The Committee requested that all materials are updated for Irish sites.
- The Committee requested that information be included in the PIL regarding the time required for withholding of asthma medications before the breathing test.
- The Committee requested the applicant add a clear statement early in the PIL and Summary PIL with a recommendation that female participants should avoid pregnancy throughout the 3-year study, explicitly stating the length of time.
- The Committee requested that participants should be directed to read the Appendices carefully before signing the consent section.
- The Committee requested that Patient Facing Materials use plain English to provide clarity to participants.
- The Committee requested information on the second investigator's clinical trials experience, if available.
- The Committee requested that a rationale is provided for the low number of Irish participants (6).
- The Committee requested that further clarity is provided regarding reimbursement of participants, including removal of the condition requiring completion of all questionnaires before payment, clarification on conditions to be fulfilled for receipt of this payment, that expenses be paid to participants yearly and that participants given clear information of how reimbursement for travel expenses will be managed. The Committee also requested clarification on what law is referenced where stated that "Out of pocket expenses will be reimbursed according to the applicable law."
- The Committee noted that the current insurance certificate is out of date and requests an up-to-date certificate is provided.

22-NREC-CT-091

Principal Investigator: Dr Patrick Mallon

Study title: A MULTINATIONAL, PHASE 2, RANDOMISED, ADAPTIVE PROTOCOL TO EVALUATE IMMUNOGENICITY AND REACTOGENICITY OF DIFFERENT COVID-19 VACCINES ADMINISTRATION IN OLDER ADULTS (≥75) ALREADY VACCINATED AGAINST SARS-COV-2 (EU-COVAT-1_AGED)

Lead institution: University College Dublin

- NREC-CT comments:

- The NREC-CT A noted that this application represents a phase II randomised study to evaluate the immunogenicity and reactogenicity of a fourth mRNA COVID-19 vaccine.
- The NREC-CT A commented this a was a well-written protocol, which was easy to follow.
- The NREC-CT A agreed that additional information was required to inform its deliberations before a final ethics position could be returned.

- NREC-CT Decision:

Request for Further Information

- Further Information Requested:

- The Committee requested that a plain English executive summary of the salient points of the study is included at the beginning of the PIL.
- The Committee suggested that the PIL would benefit from the addition of a graphic visual outlining the process of participation to aid accessibility and understanding.
- The Committee requested justification for the statement that the PIL will only be provided in English.
- The Committee requested clarity regarding biobanking of samples, and transfer across the network.
- Regarding side effects, the Committee requested further information is provided to participants on the next steps after contacting the trial site staff. Furthermore, the Committee requested ‘immediately’ is changed to ‘as soon as possible’ regarding reporting of any emergency treatment to the study physician.
- The Committee requested the phrasing regarding insurance is rewritten to ensure a more definitive undertaking that participants will be assisted by the investigator.
- The Committee requested the discrepancy between the Irish sample size listed in the submitted documents be corrected, in addition to other errors noted.
- The Committee requested clarification regarding the participant assigning ownership of their tissue, and how this fits in terms of Irish common law which typically refers to consent for use of samples.
- The Committee requested justification is provided regarding the wide consent requested for use of samples, when the consent period is for 5 years.

22-NREC-CT-092

Principal Investigator: Professor John Crown

Study title: A PHASE 3 TRIAL OF FIANLIMAB (REGN3767, ANTI-LAG3) + CEMIPLIMAB VERSUS PEMBROLIZUMAB IN PATIENTS WITH PREVIOUSLY UNTREATED UNRESECTABLE LOCALLY ADVANCED OR METASTATIC MELANOMA

Lead institution: St. Vincent's University Hospital

- NREC-CT comments:

- The NREC-CT A noted that this application represents a phase III study, comparing Fianlimab and Cemiplimab to Pembrolizumab in patients with melanoma.
- The NREC-CT A commented this while the PIL was long, it was comprehensive, and contained a useful summary.
- The NREC-CT A agreed that additional information was required to inform its deliberations before a final ethics position could be returned.

- NREC-CT Decision:

- Request for Further Information

- Further Information Requested:

- The Committee requested further information regarding reimbursement of participants, including the maximum amount reimbursable and how this is claimed. Additionally, details are requested as to whether expenses for parents of adolescents can be reimbursed.
- The Committee requested that the Parent information sheet is edited to inform parents that this is the first trial of Fianlimab in children/adolescents.
- The Committee requested that the adult Consent documentation should include an acknowledgement that the patient has been fully advised against getting pregnant and understands the importance of immediately informing her G.P. or gynaecologist.
- The Committee requested that “concomitant medications” listed as a procedure in the PIL, is rephrased.
- Regarding inclusion of adolescents in the trial, the Committee requested that a rationale is provided for use of the Fianlimab compound in an adolescent group, including the safety track record, any phase 1 or 2 studies in an adolescent group, and risk benefit analysis. The Committee also requested details of criteria for inclusion and selection of participant from the adolescent cohort, the anticipated number of Irish participants and whether adolescent participants have already been enrolled in other jurisdictions. Furthermore, the Committee requested details of supports available to adolescent participants and their parents/caregivers/family throughout the trials.

22-NREC-CT-094

Principal Investigator: Dr Susan O'Connell

Study title: A study comparing the effect and safety of once weekly dosing of somapacitan with daily Norditropin® as well as evaluating long-term safety of somapacitan in a basket study design in children with short stature either born small for gestational age or with Turner syndrome, Noonan syndrome, or idiopathic short stature

Lead institution: Children's Health Ireland at Crumlin

- NREC-CT comments:

- The NREC-CT A noted that this application evaluates dosing of growth hormone injections, delivered in a novel way, in children with short stature.
- The NREC-CT A commented that this was overall a good proposal and protocol, with a long but comprehensive PIL.
- The NREC-CT A agreed that additional information was required to inform its deliberations before a final ethics position could be returned.

- NREC-CT Decision:

- Request for Further Information

- Further Information Requested:

- The Committee suggested that there should be separate child and adolescent consent forms, as the level of detail surrounding pregnancy was deemed excessive information for parents of young children participating in this paediatric trial.
- The Committee deemed that the assent forms for ages 12-17 are too complex particularly around data handling and processing, and requests they are modified to ensure accessibility.
- The Committee requested correction of some errors in the Patient Materials, including typos in the REAL8 ICF documents, addition of 'parents or guardians' for inclusivity and references to 'your child's information' in the REAL8 child Assent forms. The Committee also requested the REAL8 Participant posters be amended to state "your travel expenses will be covered" rather than "may be covered".
- The Committee requested justification is provided for the statements in the DPIA document that requests for "right to be forgotten" and requests for "access/amendment/restriction to personal data" will not be permitted.
- The Committee noted the insurance certificate is out of date and requested that an up-to-date certificate is submitted.

- AOB:
  - An update was provided to the Committee regarding Dept. of Health engagement on Committee resources, including additional members with specific expertise to add to the capacity and knowledge of the current Committees.
  - The potential for in-person or hybrid meetings, including the possibility of an ‘away day’ was discussed and will be considered.