

National Research Ethics Committee

NREC-CT Meeting

8th October 2025

Attendance

Name	Role
Prof David Brayden	Chairperson, NREC-CT D
Prof David Smith	Deputy Chairperson, NREC-CT D
Dr Christina Skourou	Deputy Chairperson, NREC-CT D
Prof Andrew Green	Committee Member, NREC-CT D
Prof Cathal Walsh	Committee Member, NREC-CT D
Prof Deirdre Murray	Committee Member, NREC-CT D
Dr Geraldine O'Dea	Committee Member, NREC-CT D
Prof Lina Zgaga	Committee Member, NREC-CT D
Mr Gerry Daly	Committee Member, NREC-CT D
Ms Deirdre McLoughlin	Committee Member, NREC-CT D
Ms Chanel Watson	Committee Member, NREC-CT D
Ms Aileen Sheehy	Programme Manager, National Office for RECs
Dr Laura Mackey	Programme Officer, National Office for RECs
Dr Jane Bryant	Programme Officer, National Office for RECs
Dr Susan Quinn	Programme Manager, National Office for RECs
Ms Patricia Kenny*	Project Officer, National Office for RECs

Apologies: Mary McDonnell Naughton, Jeff Moore, Geraldine O'Sullivan Coyne

Quorum for decisions: Yes

Agenda

- Welcome & Apologies
- 2025-523088-39-00
- 2023-506817-23-01 SM-1
- 2023-504899-25-00 SM-10
- 2024-515698-85-00 SM-4
- AOB

-
- The Chair welcomed the NREC-CT D.
 - The minutes from the previous NREC-CT D meeting on 10th September 2025 were approved.
 - The NREC Business Report was discussed and noted.
-

Applications

2025-523088-39-00

Institutions: Mater Misericordiae University Hospital

Study title: A First-In-Human, Phase 1, Open-Label, Multicenter Study of ZW251, a Novel Glypican-3 Targeting Antibody-Drug Conjugate, in Participants with Advanced Solid Tumors, Including Hepatocellular Carcinoma

Dossiers Submitted: Part I & II

- **NREC-CT Decision:**

- Request for Further Information

- **Additional Information Required RFI**

Part II Considerations

1. Compliance with use of biological samples

- The NREC-CT notes that Section 4.1 Compliance with use of Biological Samples future use of data/samples *“How this disease and similar diseases work”* and *“The effect of the study drug and/or other drugs on the body”* is not described in line with regulations / best practice. The Committee requests that this be updated as required under the Health Research Regulations (Data Protection Act 2018 (Section 36(2) (Health Research) Regulations 2018) to be confined to the specified disease, related diseases or drug under study in this trial. Consent can only be obtained where future use of samples and data is defined such that participants are fully informed and/or that an option is provided to enable participants to consent to be contacted in the future about other research studies. The Committee also requests that the Main ICF be updated to align.

2. Subject information and informed consent form

Standard Consideration:

- Where applicable, the Sponsor is requested to submit any Part 2 documentation requiring revision following the outcome of the Part 1 Assessment. Should an additional Request for Information (RFI) be required, please contact the National Office at clinicaltrials@nrec.ie. The request should include a concise summary of the Part 1 consideration(s) that necessitated the update to the Part 2 documentation.
- All documentation submitted in response to a Request for Information (RFI) must be provided in a format that is both accessible and searchable, such as Microsoft Word or original (non-scanned) PDF files. Please note that scanned documents, including those processed using Optical Character Recognition (OCR), are not acceptable, as they cannot be optimised for compatibility with assistive technologies.
- The NREC-CT requests that pg. 21 Main ICF be updated to move consent optional components to a separate page with separate participant information section and

signatures section, so it is distinct from the main consent to participate in the research.

- The NREC-CT requests that pg 15 Main ICF be updated to replace “*under the care of your GP*” with “*under the care of your oncologist*” to be more accurate.
- "The NREC-CT noted that the ICF includes only brief references to the first-in-human nature of the study; on page 2, and in Section 5 on page 9, and requested that the “Key Study Information” on page 1 should explicitly state that this is a first-in-human study."
- The NREC-CT notes that analysis of tumour tissue - either from a new biopsy or existing FFPE tissues - is presented as optional in the consent form. However, the Committee noted that GPC3 expression needs to be demonstrated in tumour tissue as a prerequisite for enrolment. The Committee requests that Main ICF be revised to clearly distinguish between the two elements of tumour analysis: one as part of the pre-screening process, and another that is optional during the study. Additionally, the Committee requested that the Main ICF clarify that any consent obtained as part of the study will not replace those required as part of standard medical practice, such as consent taken immediately prior to a biopsy.
- The NREC-CT noted that the Pregnancy Data Collection ICF notes that the racial origin of the pregnant partner may be collected, but the purpose of collecting this data was not clearly explained. The Committee requested that the rationale for collecting this information be clarified within the ICF.
- The NREC-CT requests that pg. 14 of Main ICF be updated to clarify that accommodation costs will be covered and provide more detail on the process by which participants can claim reimbursement.
 - Participants should be fully informed about compensation arrangements, including the process and options for reimbursement, in the informed consent form.
 - Options for reimbursement of expenses should be clear, including optional use of reimbursement debit cards, etc.
- Language such as ‘you will be reimbursed’ rather than ‘you may be reimbursed’ is recommended for clarity.

2023-506817-23-01 SM-1

Institutions: University Hospital Galway, St James’s Hospital, Beacon Hospital, Mater Private Hospital, Cork University Hospital, Tallaght University Hospital, St Vincent’s University Hospital, University Hospital Limerick, Mater Misericordiae University Hospital, Beaumont Hospital

Study title: Intermittent Androgen deprivation Therapy in the era of AR pathway inhibitors; a phase 3 pragmatic randomized trial (DE-ESCALATE)

Dossiers Submitted: Part I & II

• NREC-CT Decision:

- Request for Further Information

- **Additional Information Required RFI**

Part II Considerations

1. Subject information and informed consent form

Standard Consideration:

- Where applicable, the Sponsor is requested to submit any Part 2 documentation requiring revision following the outcome of the Part 1 Assessment. Should an additional Request for Information (RFI) be required, please contact the National Office at clinicaltrials@nrec.ie. The request should include a concise summary of the Part 1 consideration(s) that necessitated the update to the Part 2 documentation.
- All documentation submitted in response to a Request for Information (RFI) must be provided in a format that is both accessible and searchable, such as Microsoft Word or original (non-scanned) PDF files. Please note that scanned documents, including those processed using Optical Character Recognition (OCR), are not acceptable, as they cannot be optimised for compatibility with assistive technologies.
- The NREC-CT notes the introduction of Material consent assessment questionnaires and requested clarification on the following
 - The intended purpose of the questionnaires
 - Whether the responses are anonymised
 - How the completion and submission of questionnaires will be handled to ensure anonymity.
 - How the results will be utilised, and any impact/supports for participants if required
- The NREC-CT requests that the following updates be made to Material consent assessment questionnaire Stage 1 consent (Enrolment) and to Material consent assessment questionnaire Stage 2 consent (Experimental Arm):
 - Pg. 1 box A5: “*According to me...*” be updated to “*I understand that...*”
 - Pg. 2, box A9: “*In the frame of the clinical trial...*” be updated to “*As part of the clinical trial process...*”
 - Pg. 2, box A11: The NREC-CT requested clarity on the intent of the statement “*I was aware that I will have to remain in the clinical trial even if I decide someday that I want to withdraw*”. The Committee were unclear if the statement was intentionally incorrect to assess the participants’ understanding, or whether the statement needs to be revised. If the intention is to explain that participants can withdraw at any time, but that data and samples collected prior to withdrawal will remain part of the study, this should be clearly and accurately stated.

2023-504899-25-00 SM-10

Institutions: St Vincent’s University Hospital, Tallaght University Hospital

Study title: A Phase 3 Randomized, Open-label Study of MK-5684 Versus Alternative Abiraterone Acetate or Enzalutamide in Participants With Metastatic Castration-resistant Prostate Cancer (mCRPC) Previously Treated With Next-generation Hormonal Agent (NHA) and Taxanebased Chemotherapy

- **NREC-CT Decision:**
- Request for Further Information

- **Additional Information Required RFI**

Part II Considerations

1. Subject information and informed consent form

Standard Consideration:

- Where applicable, the Sponsor is requested to submit any Part 2 documentation requiring revision following the outcome of the Part 1 Assessment. Should an additional Request for Information (RFI) be required, please contact the National Office at clinicaltrials@nrec.ie. The request should include a concise summary of the Part 1 consideration(s) that necessitated the update to the Part 2 documentation.
- All documentation submitted in response to a Request for Information (RFI) must be provided in a format that is both accessible and searchable, such as Microsoft Word or original (non-scanned) PDF files. Please note that scanned documents, including those processed using Optical Character Recognition (OCR), are not acceptable, as they cannot be optimised for compatibility with assistive technologies.
- The NREC-CT requests that Section 12 “What do I need to know about the trial drugs and side effects?” ICF Main Consent be updated to ensure lay terminology is used, as follows:
 - Pg 16 Common reference to “sleepiness postural” be updated to include a short lay explanation of same for clarity. It is unclear what the symptoms of this side effect are and how they can be distinguished from normal sleepiness.
 - Pg. 13 Very Common reference to “(oedema peripheral)” be updated to “(peripheral oedema)”
 - Pg 16 Common reference to “Skin that is lacking moisture” be removed and leave just Dry skin.
 - Pg. 17 Common reference to “Discomfort or pain experienced in the arms or legs (pain in extremity)”. Please consider deleting (pain in extremity) as it does not add anything to the participant’s understanding.
- The NREC-CT notes the wording on pg. 4 ICF Optional Limited Screening “*Your samples may be used to improve and develop tests to support clinical trials*” and comments that there is no qualifier in this paragraph regarding the subject of any clinical trials or the context in which assays may be performed. The Committee requests that this section be revised to clarify whether the use of samples refers specifically to research related to this trial or if they may be used more broadly in other research or assay development.
- The NREC-CT requests that pg. 24 ICF Main Consent reference to making a complaint to the Data Protection Commission be updated to provide the contact details for same.

2024-515698-85-00 SM-4

Institutions: Cork University Hospital, Beaumont Hospital, Mater Private Hospital, Beacon Hospital, St James's Hospital

Study title: A Randomized, Double-Blind, Phase 3 Trial of Adagrasib plus Pembrolizumab plus Chemotherapy vs. Placebo plus Pembrolizumab plus Chemotherapy in Participants with Previously Untreated, Locally Advanced or Metastatic Non-squamous Non-small Cell Lung Cancer with KRAS G12C Mutation (KRYSTAL-4)

Dossiers Submitted: Part I & II

- **NREC-CT Decision:**

- Favourable
-

- **AOB:**

- Grainne O’Gorman, new CEO HRB attended the meeting and introduced herself to the committee.
- Reminder of rolling EOI for committee members and asked to spread the EOI among their own networks and contacts.
- The committee were informed that Tina Hickey has stepped down from CT-D