National Research Ethics Committee

NREC-CT A Meeting

07 September 2022

Attendance

Name	Role
Prof. Alistair Nichol	Chairperson, NREC-CT A
Prof. Mary Donnelly	Deputy Chairperson, NREC-CT A
Ms. Erica Bennett	Committee Member, NREC-CT A
Prof. Tina Hickey	Committee Member, NREC-CT A
Mr Gerard Daly	Committee Member, NREC-CT A
Ms Muireann O'Briain	Committee Member, NREC-CT A
Prof. David Brayden	Committee Member, NREC-CT A
Dr John O'Loughlin	Committee Member, NREC-CT A
Dr Darren Dahly	Committee Member, NREC-CT A
Prof. Austin Duffy	Committee Member, NREC-CT A
Mr Gerald Eastwood	Committee Member, NREC-CT A
Dr Geraldine Foley	Committee Member, NREC-CT A
Ms Evelyn O'Shea	Committee Member, NREC-CT A
Dr Emily Vereker	Head, National Office for RECs
Ms Patricia Kenny	Project Officer, National Office for RECs
Dr Jane Bryant	Project Officer, National Office for RECs
Dr Susan Quinn	Programme Officer, National Office for RECs
Dr Emma Heffernan*	Project Officer, National Office for RECs

*Drafted minutes

Apologies: Dr Heike Felzmann, Prof. Catherine Hayes, Prof. John Wells, Ms Ann Twomey, Prof. Donal Brennan, Dr Jimmy Devins, Dr John O'Loughlin, Dr Dervla Kelly, Prof. Patrick Dillon, Prof. Gene Dempsey

Quorum for decisions: Yes

Agenda

- Welcome & Apologies
- 22-NREC-CT-143
- 22-NREC-CT-144
- 2022-500332-11-00
- 2022-500266-10-00
- AOB

- The Chair welcomed the NREC-CT A.
  - The minutes from the previous NREC-CT A meeting on 13 July 2022 were approved.
  - The NREC Business Report was discussed and noted.

Applications

- **22-NREC-CT 143**

Principal Investigator: Prof Donal Brennan

Study title: A double-blind, randomized, placebo-controlled multicenter study to investigate efficacy and safety of elinzanetant for the treatment of vasomotor symptoms caused by adjuvant endocrine therapy, over 52 weeks in women with, or at high risk for developing hormone-receptor positive breast cancer

Lead Institution: The Mater Misericordiae Hospital

  - NREC-CT comments:
- The NREC-CT A commented that the submission was very thorough.
- 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 more information

- Additional Information Required

- The NREC-CT A noted in the inclusion of BDI-II - Beck Depression Inventory and requested the following details
    - Clarification as to the pathway of care and referral offered to participants displaying suicidal ideation as revealed in the questionnaire.
    - Confirmation that their GP / relevant health care provider will be informed of same
    - Confirmation that the PI will consider whether it is appropriate for individual participants displaying suicidal ideation to continue participating in the trial.
- The NREC-CT A requested clarification is provided as to what happens to participants whose cancer progresses while taking part in the trial and this is elucidated in the protocol and PIL.
- The NREC-CT A noted the inclusion of an 'Expecting parents' consent form which they considered to be an important document, and requested the following details:
    - Clarification as to when and to whom the form is distributed
    - Clarification as to the pathway of care and referral offered to expectant mothers in these circumstances
- The NREC-CT A requested that the PISCF references the Data Protection Act 2018 (Section 36(2)) (Health Research) Regulations 2018), to reassure participants that their data is being processed in line with Irish data protection law.
- The NREC-CT A noted mention of 'Oasis' in the promotional material, but not in the PISCF, and requested that the PISCF is amended to include an explanation of 'Oasis', to avoid any misunderstanding for Participants as to the meaning of the term.
- Pg 15 of the PISCF states 'Your data may also be used…to plan future studies'. The NREC-CT A requested that participants are given a more explicit account of the potential use of their data in future studies.
- The NREC-CT A had the following comments on the 'Feedback survey':
    - Clarification as to the aim of the survey and the data collected
    - C5: Please remove the request for provision of 'reason for withdrawal' as this is not ethical
    - C19: Please include an 'I do not know' option for this query
    - C20: Clarification as to how participants will be provided with these items, considering the survey results are anonymous (introduction to survey states that 'No identifying information will ever be shared with the study sponsor or the persons at the site/office you go to').
- The NREC-CT B notes the inclusion of the ePRO screenshot full deck document - and felt that this is a lengthy process which places an undue burden on participants undergoing treatment. Please detail how you will mitigate the burden on applicants in addressing these questions.

- The NREC-CT A noted that while there was evidence of communication with the DPO regarding the DPIA, it was not clear if the DPO had input into the DPIA and requested assurance that the DPO has had input into the DPIA.

22-NREC-CT-144

Principal Investigator: Dr Kathleen Gorman

Study title: A Phase 3, Randomized, Double-Blind, Placebo-Controlled, Fixed-Dose, Multicenter Study to Examine the Efficacy and Safety of ZX008 in Subjects with CDKL5 Deficiency Disorder Followed by an Open-Label Extension

Lead institution: Children's Health Ireland at Temple Street Hospital

- NREC-CT comments:

- The NREC-CT A commented that the application was very comprehensive.
- 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 more information

- Additional Information Required

- The NREC-CT A deemed that the adults PIL was overly long, too clinical and technical for adults with CDKL5 deficiency, who may have an intellectual disability or cognitive impairment. Please clarify whether this PIL will be in use, and if so, please revise to shorten and simplify, including more diagrams.
    - The NREC-CT A noted that the 12–15-year-old assent form is quite short and could be considered for adaptation and use as an executive summary for the adult PIL/ICF.
- The NREC-CT A deemed that there is a high participant burden in relation to the number of visits to Temple Street and requested that a clear estimate of the projected length of time of each visit, as well as the total time taken for all visits over the course of the study is included in the Parent PIL, in order for the parent to determine whether participation in the trial is feasible for their child.
    - The NREC-CT A requested that the projected time for device training is also included in the Parent PIL.
- The NREC-CT A noted in the inclusion of a self-harm assessment, and requested the following details:
    - Consent must be requested for use of the Quality of Life assessment forms
    - Acknowledgement in the PIL/ICF that completion of this assessment may cause distress, and clarification as to the pathway of care and referral offered to participants displaying suicidal ideation

    - Confirmation that the PI will consider whether it is appropriate for individual participants displaying suicidal ideation to continue participating in the trial.

- The NREC-CT A noted that the adult and parent / guardian PILs does not allow use of social media and requested assurance that children and teenagers taking part in the trial are not penalised for use of social media.
- The parent ICF contains mentions of a vasectomy, which the NREC-CT A deemed was inappropriate for inclusion in a form aimed at under 16s
- The NREC-CT noted that all PILs have a section of retention of biological samples for "genetic research". The NREC-CT A requested that clarity is provided in the PIS/ICF regarding genetic research. The genetic research requested must be restricted and defined, explained clearly to the participant, with explicit consent obtained for genetic testing requested in the ICF.
- The PISCF for age 6-11 and 12-15 does not contain any information on the retention of biological samples – please update to include and explain this information.
- The NREC-CT A noted that the GP letter rules out prescription of a number of treatments including SSRIs and antinausea medications. As the side effects of the IMP include these conditions, the NREC-CT A requested that the GP letter include advice to GPs as to how they can manage side effects in participants.
- The NREC-CT A requested that the PISCF references both EU GDPR regulations, and the Data Protection Act 2018 (Section 36(2)) (Health Research) Regulations 2018), to reassure participants that their data is being processed in line with Irish and EU data protection law.
- The NREC-CT A deemed that both investigators have excellent CVs and are experts in their fields, but their clinical trial experience is not provided. Please provide updated CVs containing this information

2022-500332-11-00

Principal Investigators: Prof Douglas Veale, Prof Trevor Duffy

Study title: A Phase II, randomised, placebo-controlled, double-blind, parallel group, efficacy and safety study of at least 48 weeks of oral BI 685509 treatment in adults with early progressive diffuse cutaneous systemic sclerosis

Institutions: St Vincent's Hospital, Connolly Hospital

- NREC-CT comments:

- 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 more information
    - Additional Information Required

- The NREC-CT requested the statement “BI may continue to process my personal data for purposes other than health research when it has a legal basis to do so” (p27 PIS/ICF) should be removed, and revised in line with the Data Protection Act 2018 (Section 36(2)) (Health Research) Regulations 2018), to reassure participants that their data is being processed in line with Irish and EU data protection law
- The NREC-CT noted that the consent being sought for future unknown uses of personal data and associated biological samples, and analysis of genetic information (Biobanking ICF, p2 “Purpose of sample collection for research”) is not explicit consent and is therefore not in compliance with the Health Research Regulations (2018). Explicit consent for processing personal data (informed consent that is recorded) is a mandatory safeguard set down in Irish law. Participants must be given further consent options regarding the future use of their personal data and biological samples, such as:
    - limiting future use to a more defined area of research
    - an option to consent to be recontacted for future unspecified studies
- The NREC-CT noted that the biobanking consent form does not provide any details on specific potential recipients of data and biological samples, or how participants can understand how their data and biological samples might be used. The NREC-CT request further information as to how the principle of transparency under GDPR will be applied
- The NREC-CT requested an explanation of the statement “especially if you make further genetic information available on the internet about yourself” (p5 Biobanking ICF), which is considered confusing for participants. This paragraph should be rewritten in a clear manner to ensure understanding
- The NREC-CT noted the low target participant number in Ireland (one patient in the active and one in the control group) and noted that further recruitment and participation is strongly encouraged by NREC where possible
- The NREC-CT requested confirmation that the option of palliative/comfort care (pg. 6 ICF) will be explained and discussed sensitively with participants.
- The NREC-CT requested rewording of the phrase “in most cases biopsy is a painless procedure” (p15 PIS/ICF), as this was considered misleading to participants
- The NREC-CT requested confirmation that participant GPs must be informed of their participation. If this is the case, the phrase “with your permission” should be removed as it is considered misleading.
- The NREC-CT recommended rephrasing and location of the wording on “the man must be vasectomized” (p7 PIS/ICF). It is considered by the NREC to be clearer to detail forms of contraception first, and then state if contraception is not to be used, then males must be vasectomized.
- The NREC-CT requested further clarification on the statement “samples may be used..” to address Health Authority questions”. It is not clear to the participant what this statement means, and it does not constitute informed consent.
- The NREC-CT note that the questionnaires may pose an emotional burden on participants. Information is requested to be provided to participants in the PIL/ICF on the pathway of referral and psychological support, which will be made available to participants who may require such support.

2022-500266-10-00

Principal Investigator: N/A Part 1 only

Study title: A double-blind, randomized, placebo-controlled multicenter study to investigate efficacy and safety of elinzanetant for the treatment of vasomotor symptoms caused by adjuvant endocrine therapy, over 52 weeks in women with, or at high risk for developing hormone-receptor positive breast cancer

Lead institution: N/A Part 1 only

- NREC-CT comments:

- 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 more information

- Additional Information Required

- The NREC-CT A suggested that an independent statistician is included on the Data Monitoring Committee

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- AOB:

The Chair closed the meeting.