National Research Ethics Committee

NREC-CT B Meeting

19 October 2022

Attendance

Name	Role
Prof. John Faul	Chairperson, NREC-CT B
Ms Serena Bennett	Committee Member, NREC-CT B
Mr Philip Berman	Committee Member, NREC-CT B
Dr Enda Dooley	Committee Member, NREC-CT B
Dr Lorna Fanning	Committee Member, NREC-CT B
Dr John Hayden	Committee Member, NREC-CT B
Dr Mary McDonnell Naughton	Committee Member, NREC-CT B
Dr Eimear McGlinchey	Committee Member, NREC-CT B
Mr Gavin Lawler,	Committee Member, NREC-CT B
Ms Paula Prendeville	Committee Member, NREC-CT B
Prof. Colm O'Donnell	Committee Member, NREC-CT B
Ms Mandy Daly	Committee Member, NREC-CT B
Ms Caoimhe Gleeson	Committee Member, NREC-CT B
Prof Andrew Green	Committee Member, NREC-CT B
Ms Susan Kelly	Committee Member, NREC-CT B
Ms Deirdre MacLoughlin	Committee Member, NREC-CT B
Dr Christina Skourou	Committee Member, NREC-CT B
Dr Jane Bryant*	Project Officer, National Office for RECs
Ms Rachel McDermott	Programme Administrator, National Office for RECs
Dr Susan Quinn	Programme Officer, National Office for RECs

*Drafted minutes

Apologies: Dr Cliona McGovern, Dr Mark Robinson, Prof David Smith, Prof. Abhay Pandit, Prof. Seamus O'Reilly, Dr Jean Saunders

Quorum for decisions: Yes

Agenda

- Welcome & Apologies
- 22-NREC-CT-157
- 22-NREC-CT-158
- 22-NREC-CT-159
- 22-NREC-CT-160
- 22-NREC-CT-161
- AOB

- The Chair welcomed the NREC-CT B.
  - The minutes from the previous NREC-CT B meeting on 21 September were approved.
  - The NREC Business Report was discussed and noted.

Applications

22-NREC-CT-157

Principal Investigator: Dr John Richard Kelly

Study title: A randomized, double-blind, placebo-controlled, Phase 2b trial with an open-label extension to determine the safety and efficacy of GH001 in patients with treatment-resistant depression

EudraCT: 2022-000574-26

Lead institution: Tallaght Adult Mental Health Services

- **NREC-CT comments:**

- The NREC-CT B 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 noted that while the PISCF is well written, it is long and contains some technical language. The NREC-CT recommended a summary PISCF to accompany the main PISCF.
- The NREC-CT noted that section 13 referred to in Data Protection should refer to section 12.
- The NREC-CT requested further detail is provided to the participant regarding the novel way in which the IMP acts.
- The NREC-CT notes that a participant may need to stop taking other antidepressant medication during the trial and requested further detail on how the participant's referring clinician be informed of same (Main PISCF, page 9).
- The NREC-CT noted that medical care for participants once the trial has finished will be discussed and requested further detail on how the participant's referring doctor or mental health professional is informed of same, or involved in this discussion (Main PISCF, page 11).
- The NREC-CT requested further detail on how the recruitment poster will be used, as it is stated that this study will not recruit by advertisement.
- The NREC-CT requested confirmation that the site's management has signed off on the study's use of the facilities.
- The NREC-CT noted that participants will need to spend up to 6 hours on site for a visit and requested a commitment to providing participants with refreshments and food. The statement that the participant 'may be offered a small snack' was not deemed to be sufficient. Additionally, the NREC-CT requested that a participant should be allowed to bring a companion for these visits, and that this companion should also be eligible for reimbursement.
- The NREC-CT noted that the insurance certificate is valid from March 2023, and that the proposed start date of the study is in February 2023. The NREC-CT requested confirmation that the insurance certificate will cover the full duration of the study.

22-NREC-CT-158

Principal Investigator: Prof Michael P. Keane

Study title: A double blind, randomized, placebo-controlled trial evaluating the efficacy and safety of BI 1015550 over at least 52 weeks in patients with Idiopathic Pulmonary Fibrosis (IPF)

EudraCT: 2022-001091-34

Lead institution: St Vincent's University Hospital

- **NREC-CT comments:**

- The NREC-CT B 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 noted that a suicide assessment interview (C-SSRS) will be performed at pre-screening and during the trial, and requested further information on why this is required, and that this information is added to the PISCF. The NREC-CT requested this concept and associated questionnaires is introduced with appropriate context and support in the PISCF (e.g. p3/30, p6/30, no context provided)
- The NREC-CT noted that if a participant experiences suicidal thoughts or behaviours, their participation in the study will end. The NREC-CT requested further information on what supports will be made available to participants if this situation should arise.
- The NREC-CT noted that recruitment materials are in development, and requested that these are submitted once complete, with information on how these materials will be used (Application Form, section D.4).
- The NREC-CT requested further information on recruitment arrangements for the study.
- The NREC-CT requested confirmation that participants will be given adequate time to decide on their participation in the trial, and suggested at least 24 hours after receiving the PISCF.
- The NREC-CT welcomed that translators will be available if required, and would like clarity on whether supports will be available for participants with visual impairment or literacy issues as relevant.
- The NREC-CT requested clarification on who would provide home visits, their training and the escalation pathway if issues of concern were noted at a home visit.
- The NREC-CT noted that while the PISCF is comprehensive, it is lengthy and suggests that it would benefit from summary diagrams in the document where possible. The NREC commented that the inclusion of the statement: 'After reading and discussing the information you should know' was very helpful.

- The NREC-CT noted the inclusion of a summary PISCF is helpful but recommended the risks should be included in the summary, rather than referral to the main PISCF.
- The NREC-CT noted that certain foods and drinks should be avoided, and requested further information on the reasons for this (PISCF page 8).
- The NREC-CT requested DLCO is defined (p3/30), and the double reference to asking about feelings is reduced to a single reference (p3/30)
- The NREC-CT requested for p12/30 & p13/30 where a description is included for blood to be collected, a description of how much is also included –rather than referring to an appendix.
- The NREC-CT requested for p21/30, where it indicates that if the participant is suicidal the doctor will tell you what to do, and requested that more information is provided to the participant on how to handle this situation.
- The NREC-CT noted that the participation in the biobanking study is voluntary, however the following statement is stated in the main PISCF (page 13); "*if you do not want genetic testing to be done on your samples, you cannot participate in this trial*". The NREC-CT requested clarity on this point.
- The NREC-CT requested that information on who to call if a participant is experiencing side effects should be made clearer in the PISCF (main PISCF, pages 8/9).
- The NREC-CT requested justification for broad access of data sharing (Main PISCF, page 24), and requested that this section references compliance with GDPR and the Health Research Regulations on same.
- The NREC-CT requested clarity on the following statement, in regards to the purposes other than health research; *"I understand that I can withdraw my consent to the processing of personal data for health research purposes at any time, but that BI may continue to process my data for purposes other than health research where is it has a legal basis for doing so*" (Main PISCF, page 29).
- The NREC-CT requested that layered consent format, or inclusion of a box for initials for each bullet point is used for all PISCF documents, in line with best practice.
- The NREC-CT noted that broad consent is sought for future biological research, which is not in line with the Health Research Regulations. The NREC-CT suggested that a consent to be contacted for future biological research is added to this document (Biobanking PISCF).

22-NREC-CT-159

Principal Investigator: Prof Michael P. Keane

Study title: A double blind, randomized, placebo-controlled trial evaluating the efficacy and safety of BI 1015550 over at least 52 weeks in patients with Progressive Fibrosing Interstitial Lung Diseases (PF-ILDs)

EudraCT: 2022-001134-11

Lead institution: St Vincent's University Hospital

- **NREC-CT comments:**

- The NREC-CT B 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 noted that a suicide assessment interview (C-SSRS) will be performed at pre-screening and during the trial, and requested further information on why this is required, and that this information is added to the PISCF. The NREC-CT requested this concept and associated questionnaires is introduced with appropriate context and support in the PISCF (e.g. p3/30, p6/30 , no context provided) Page 2
- The NREC-CT noted that if a participant experiences suicidal thoughts or behaviours, their participation in the study will end. The NREC-CT requested further information on what supports will be made available to participants if this situation should arise.
- The NREC-CT noted that recruitment materials are in development, and requested that these are submitted once complete, with information on how these materials will be used (Application Form, section D.4).
- The NREC-CT requested further information on recruitment arrangements for the study ahead of introduction of recruitment materials.
- The NREC-CT requested confirmation that participants will be given adequate time to decide on their participation in the trial and suggested at least 24 hours after receiving the PISCF.
- The NREC-CT welcomed that translators will be available if required, and would like clarity on whether other accessibility supports will also be available for participants if needed.
- The NREC-CT requested clarification on who would provide home visits, their training and the escalation pathway if issues of concern were noted at a home visit.
- The NREC-CT noted that while the PISCF is comprehensive, it is lengthy and suggests that it would benefit from summary diagrams in the document where possible. The NREC commented that the inclusion of the statement: ‘After reading and discussing the information you should know’ was very helpful.
- The NREC-CT noted the inclusion of a summary PISCF was helpful but recommended the risks should be included in the summary, rather than referral to the main PISCF.
- The NREC-CT noted that certain foods and drinks should be avoided, and requested further information on the reasons for this be provided to the participant (PISCF page 8).

- The NREC-CT recommended that information in the Appendices should be added to the main body of the PISCF for ease of access, including the amount of blood to be taken (Main PISCF p.12), and the side effects (Main PSCF p.8)
- The NREC-CT requested DLCO is defined (p3/30), and the double reference to asking about feelings is reduce to a single reference (p3/30)
- The NREC-CT requested for p12/30 & p13/30 where a description is included for blood to be collected, a description of how much is also included –rather than referring to an appendix.
- The NREC-CT requested for p21/30, where it indicates that if the participant is suicidal the doctor will tell you what to do, please provide more information to the participant on how to handle this situation.
- The NREC-CT noted that the participation in the biobanking study is voluntary, however the following statement is stated in the main PISCF (page 13); “if you do not want genetic testing to be done on your samples, you cannot participate in this trial”. The NREC-CT requested clarity on this point.
- The NREC-CT requested that information on who to call if a participant is experiencing side effects should be made clearer in the PISCF (main PISCF, pages 8/9).
- The NREC-CT requested justification for broad access of data sharing (Main PISCF, page 24), and requested that this section references compliance with GDPR and the Health Research Regulations on same.
- The NREC-CT requested clarity on the following statement, in regards to the purposes other than health research; “I understand that I can withdraw my consent to the processing of personal data for health research purposes at any time, but that BI may continue to process my data for purposes other than health research where is it has a legal basis for doing so” (Main PISCF, page 29).
- The NREC-CT requested that a layered consent format, or inclusion of a box for initials for each bullet point is used for all PISCF documents, in line with best practice
- The NREC-CT noted that broad consent is sought for future biological research, which is not in line with the Health Research Regulations. The NREC-CT suggested that a consent to be contacted for future biological research is added to this document (Biobanking PISCF).
- The NREC-CT queried whether there is provision for reimbursement for a participant’s companion.
- The NREC-CT noted the absence of evidence of GCP training or previous trials experience on the PI Curriculum Vitae and requested information is provided on these omissions.

22-NREC-CT-160

Principal Investigator: Prof. Carel LeRoux

Study title: Efficacy and safety of cagrilintide s.c. 2.4mg in combination with semaglutide s.c. 2.4mg (CagriSema s.c. 2.4mg/2.4mg) once-weekly in participants with overweight or obesity and type 2 diabetes

EudraCT: 2021-005121-24

Lead institution: Conway Institute, UCD

- **NREC-CT comments**:

- The NREC-CT B 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 noted that if a participant withdraws from the study, that they may request destruction of their samples. The NREC-CT requested clarity on additional steps that a participant needs to take after withdrawal, for destruction of their samples (Protocol page 48.)
- The NREC-CT noted that a participant must be referred to a mental health practitioner in documented circumstances and that if this referral is refused, the PI will determine if it the Participant can continue in study. The NREC requested clarity as to whether the PI is qualified to determine if it is safe for a participant to continue in the study (Protocol page 54).
- The NREC-CT noted that treatment will be withheld while participating in the trial, and requested that any risks associated with this are clearly detailed (NREC Application Form page 8).
- The NREC-CT requested detail on the expected number of participants in each site (NREC Application Form page 15).
- The NREC-CT noted that the application form states “all site staff performing pre-screening are employees of the hospital and are eligible for access to medical records”. The NREC-CT requested that this be changed to authorised staff members only, in line with the inclusion criteria in the Protocol (NREC Application Form page 15).
- The NREC-CT requested further detail and context on the sentence ‘A participant may continue in the study off IMP’, found in the Application Form (page 17).
- The NREC-CT noted that a potential participant can be approached by the PI, and requested that any dialogue would include an individual who is responsible for the participant’s care, such as their GP or other healthcare professional (Application Form page 22)

- The NREC-CT noted that one day is given to a potential participant to give a decision on their enrolment, and request that this is amended to allow adequate or ample time for a decision to be made (Application Form page 22).
- The NREC-CT noted that a Participant Information Guide can be given to participants to aid in the consent process, and requested confirmation that this guide will be given to potential participants (Application Form, page 23).
- The NREC-CT noted that there are no specific measures for non-English speaking persons, and requested details on how such potential participants will be accommodated (Application Form page 23).
- The NREC-CT requested clarity on identification of a parent as a legal representative for a participant, if all participants are adults (Application Form page 23).
- The NREC-CT noted that an app will be used to record data on dosing, diary and questionnaires, and requested what supports will be in place to ensure accessibility for participants.
- The NREC-CT noted that online participant meetings will be run to support participant retention, and requested further clarity on how participant confidentiality will be maintained.
- The NREC-CT noted a reference to tests and checks to the 'body in general' and participants are required to 'take off some of your clothes' and requested clarity on what this entails (Main ICF page 6).
- The NREC-CT noted that a breast check will be performed at two visits and requested further details are provided to participants on the reason for this (Main ICF page 6).
- The NREC-CT noted that blurry vision can be caused by the eye exam, and requested that participants are recommended to bring someone with them for this test (Main ICF page 11).
- The NREC-CT noted that reference to children is made in the section 'What if something goes wrong' and requested removal of this, as no children will be enrolled in this trial (Main ICF page 13).
- The NREC-CT requested that reference to an impartial witness for consenting on behalf of the participant is removed, as this is not valid under Irish law (All PISCF, consent section).
- The NREC-CT noted that relatives' information will be collected the participants and noted that there is no specific consent sought for this, and that participants cannot consent to this on their behalf (Main PISCF, page 14).
- The NREC-CT noted that consent will be requested to share information about 'my health related to my partner's pregnancy', and requests clarity on what information this refers to (Male Partner ICF page 7).
- The NREC-CT noted that consent is sought for using samples for tests that are as yet unknown, which is not permitted under the Health Research Regulations. The NREC-CT recommended that consent is sought to contact participants for future use of samples, once the research in question is known (Future Research ICF page 3).

- The NREC-CT noted that whole genomic sequencing is proposed as part of the future research, and requested that explicit consent is sought for this analysis (Future Research ICF page 12).
- The NREC-CT noted that participants will not be informed of any results from future genetic analyses, and requested a rationale for this beyond the timing of the tests as several years after the samples are obtained (Future Research ICF page 7).
- The NREC-CT noted that data from extra blood samples will be used to learn more about how the medicine works, and requested that participants are informed in more detail about how their data will be used (Future Research ICF page 9).
- The NREC-CT noted that eye examinations will be performed before and during the trial, and requested the following detail in the Site-Specific Assessment (SSA) forms;
    - This examination will be performed on site in St Vincent's University Hospital and Connolly Hospital sites, but further detail is required on who will perform these examinations;
    - Galway University Hospital SSA does not mention either the facilities or persons who will perform this examination;
    - The Mater Misericordiae University Hospital and St James' Hospital SSA detail that these examinations will be outsourced, however further details are required.
- The NREC-CT noted that the link for the HSE listed in the DPIA is incorrect.
- The NREC-CT requested clarity on whether all data processing agreements are in place, as Section B of the DPIA lists only the consent forms.
- The NREC-CT requested further information on how the data obtained is encrypted.
- The NREC-CT noted that the answer to section D.2 of the DPIA should be 'N/A', given the answer to D1 is that the privacy notice will not be given to participants at the time of data collection.
- The NREC-CT requested justification for why participants' data may not be accessed/amended across all data stores, as detailed in section E.3 of the DPIA.
- The NREC-CT requested justification for the 'yes' answer for section H.4 of the DPIA, as some samples collected are for future biological research, and which may not be specifically for the purposes of the research study.
- The NREC-CT noted that Dr Crotty has no previous interventional clinical trial experience, and requested further information on whether supports will be available to Dr Crotty if required

22-NREC-CT-161

Principal Investigator: Dr Katherine O'Reilly

Study title: A Phase 2b, Randomized, Double-blind, Placebo-controlled, Repeat-dose, Multicenter Trial to Evaluate the Efficacy, Safety, and Tolerability of HZN-825 in Sujects with Idiopathic Pulmonary Fibrosis

- **NREC-CT comments:**

- The NREC-CT B 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 noted that the ages of inclusion for the study are 18-80 and requested justification for an upper age limit.
- The NREC-CT noted that the full trial amount in section G.3 NREC Application Form has not been filled in and requested this is completed.
- The NREC-CT noted that retention of data is listed as 15 years after the end of the study and requested confirmation that this should not be 25 years in line with GDPR.
- The NREC-CT requested that the details of the Irish DPO be added to the PISCF.
- The NREC-CT noted that participants will be provided with branded items designed with the study logo, and requests that the logo be omitted from these items to avoid the participants' condition being shown publicly.
- The NREC-CT noted that the participant brochure contains some content and imagery that may be persuasive, such as the phrase 'living for the moments that take your breath away' and requested that these are amended.

– AOB