

National Research Ethics Committee

NREC-CT A

21st July 2021

Attendance

Name	Role
Prof Alistair Nichol	Chairperson, NREC CT-A
Dr Heike Felzmann	Deputy Chairperson, NREC-CT A
Prof Mark Sherlock	Committee Member, NREC-CT A
Prof Catherine Hayes	Committee Member, NREC-CT A
Prof Tina Hickey	Committee Member, NREC-CT A
Prof David Brayden	Committee Member, NREC-CT A
Dr Dervla Kelly	Committee Member, NREC-CT A
Dr Darren Dahly	Committee Member, NREC-CT A
Ms Muireann O'Briain	Committee Member, NREC-CT A
Prof Mary Donnelly	Committee Member, NREC-CT A
Dr Jimmy Devins	Committee Member, NREC-CT A
Mr Gerard Daly	Committee Member, NREC-CT A
Prof. John Wells	Committee Member, NREC-CT A
Prof Patrick Dillon	Committee Member, NREC-CT A
Dr Geraldine Foley	Committee Member, NREC-CT A
Ms Aileen Sheehy*	Programme Manager, National Office for RECs
Dr Jane Bryant*	Project Officer, National Office for RECs
Dr Jennifer Ralph James	Head, National Office for RECs

*Drafted minutes

Apologies: Ms Ann Twomey, Dr John O'Loughlin

Quorum for decisions: Yes

Agenda

- Welcome & Apologies
- Application 21-NREC-CT-038-NCP
- Application 21-NREC-CT-020
- Application 21-NREC-CT-021
- Application 21-NREC-CT-022
- Application 21-NREC-CT-023
- AOB

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- The Chair welcomed the NREC-CT A.
 - Dr Jimmy Devins declared a conflict of interest for Application 21-NREC-CT-021 and recused himself from the meeting during the assessment of the application.
 - The minutes from the previous NREC-CT A meeting on 16th June 2021 were approved.

Applications

21-NREC-CT-038-NCP

Principal Investigator: Prof. Patrick Morris

Study title: Phase III postneoadjuvant study evaluating Sacituzumab Govitecan, an Antibody Drug Conjugate in primary HER2-negative breast cancer patients with high relapse risk after standard neoadjuvant treatment – SASCIA

Lead institution: Beaumont Hospital, Dublin 9

- NREC-CT comments:
 - The NREC-CT A noted that the clinical trial application represents a Phase III randomised study, comparing Sacituzumab Govitecan to the standard of care in the treatment of primary HER2-negative breast cancer patients.

- The NREC-CT A noted that this study is being reviewed as part of the Clinical Trial Regulation National Collaboration Project, a jointly run project between the HPRA and the National Office in preparation for the Clinical Trials Regulation..
 - The NREC-CT A noted that while this is a well prepared application, there remains areas requiring clarity.
 - The NREC-CT A is not in a position to return a final ethics opinion based on the information and documentation received thus far. In this regard, the Committee requires additional information to inform its deliberations.
- NREC-CT Decision:
- Request for Further Information
- Further Information Requested:
- The NREC-CT A requested that a plain English executive summary of the salient points of the study is included at the beginning of the Participant Information Leaflet (PIL).
 - The NREC-CT noted that the care of some participants will be transferred from their own oncologist to the study doctor, and requested that this is adequately elucidated in the participant materials.
 - The NREC-CT requested that the applicant provides additional information on the facilities available at the site to support this study.
 - The NREC-CT A requested that out-of-pocket expenses are covered for participants travelling to the facility.
 - The NREC-CT A noted that participants should determine if participation impacts the terms and conditions of their private health insurance, and requested that this is clearly elucidated in the PIL. The NREC-CT A also requested that the trial staff liaise with private health insurance providers in making this determination.

21-NREC-CT-020

Principal Investigator: Prof. Orla Hardiman

- Study title: A multicenter, randomized, double-blind, placebo-controlled study to investigate the efficacy and safety of FAB122 in patients with Amyotrophic Lateral Sclerosis. ADORE (ALS Deceleration with ORal Edaravone) study
 - Lead institution: Beaumont Hospital, Dublin 9
- NREC-CT comments:
- The NREC-CT A noted that the clinical trial application represents a double- blind placebo-controlled study, comparing standard of care to the combination of standard of care and oral administration of FAB122, in the treatment of ALS.

- The NREC-CT A noted that while this is a well prepared application, with a clear and comprehensive PIL. However, there remains areas in the application which require further clarity.
- The NREC-CT A is not in a position to return a final ethics opinion based on the information and documentation received thus far. In this regard, the Committee requires additional information to inform its deliberations.
 - NREC-CT Decision:
 - Request for Further Information
 - Further Information Requested:
 - The NREC-CT A requested further information to ensure that the trial is adequately blinded and a more comprehensive justification for the 2:1 allocation.
 - The NREC-CT A requested further information on how the stratification of participants will be managed at the Irish site.
 - The NREC-CT A requested further information on access to the 'standard of care' for participants, in particular the access to Riluzole as part of standard care while participating in the study.
 - The NREC-CT A considered that a lumbar puncture as an optional procedure for participants for future research purposes, is invasive and requested justification as to why it is required.
 - The NREC-CT A requested clarity on whether female partners of male participants should not become pregnant during the study, and if so, clarity on whether partners are required to co-sign consent forms.
 - The NREC-CT A requested that the PIL is updated to provide participants with further information in monitoring of adverse events and participant safety.
 - The NREC-CT A requested that the term 'devastating' is removed from the participant materials in its description of ALS.
 - The NREC-CT A requested that the healthcare cost and ECAS questionnaires associated with the study are adequately explained in the PIL.
 - The NREC-CT A requested further information on how participants will be reimbursed for travel and refreshments, whether a maximum amount will be set for expenses, and that this should be further elucidated in the PIL.
 - The NREC-CT A requested that the applicant provides additional information on the facilities available at the site to support this study.
 - The NREC-CT A noted that several studies related to ALS are taking place concurrently at the one Irish site, and requested further information on how it will be determined which participants will participate in each of the trials, and assurances that the site has sufficient capacity to run these trials in parallel in a similar participant cohort.

21-NREC-CT-021

Principal Investigator: Prof. Douglas Veale

- Study title: A Phase 3, Randomized, Double-blind, Placebo-controlled Study to Evaluate the Efficacy and Safety of Deucravacitinib in Participants with Active Psoriatic Arthritis who are Naïve to Biologic Disease-modifying Anti-rheumatic Drugs
- Lead institution: St Vincent's University Hospital, Dublin 4

- NREC-CT Comments:
 - The NREC-CT A noted that this application represents a placebo-controlled study to evaluate the use of Deucravacitinib in the treatment of patients with psoriatic arthritis.
 - The NREC-CT A noted that the application was comprehensive and contained a high level of monitoring for participants.
 - The NREC-CT A is not in a position to return a final ethics opinion based on the information and documentation received thus far. In this regard, the Committee requires additional information to inform its deliberations.

- NREC-CT Decision:
 - Request for Further Information

- Additional Information Required:
 - The NREC-CT A requested further justification for the duration of the study time of 52 weeks.
 - The NREC-CT A requested that the participant information sheet include a clearer statement of the numbers of participants who have been exposed to multiple doses of deucravacitinib over periods longer than 30 weeks.
 - Noting that participants should not become pregnant while participating in this study, the NREC-CT A requested that a brief information sheet for partners directly advising them on the need to avoid pregnancy is provided.
 - The NREC-CT A requested justification for the randomisation period of 16 weeks.
 - The NREC-CT A requested further clarity and justification for the sharing of identifiable information with the private company, Omnitrace.
 - The NREC-CT A requested that a brief plain English executive summary of the salient points of the study is included at the beginning of the PIL. The Committee also requested that any exploratory tests should be made optional to participants, and that this should be clearly explained in the PIL and consent forms using layered consent.
 - The NREC-CT A requested justification on why the exclusion criterion covering participants with learning difficulties and mental illness is in place.
 - The NREC-CT A requested further information on how capacity will be assessed and whether any potential supports are in place for those lacking decision-making capacity.

- The NREC-CT A requested further information on how participants will be reimbursed for travel and refreshments, whether a maximum amount will be set for expenses, and that this information should be further elucidated in the PIL.
- Noting that samples may not be destroyed if it impacts the study, the NREC-CT A requested further information on who makes that decision.

21-NREC-CT-022

Principal Investigator: Prof. Orla Hardiman

Study title: A phase III, randomized, double-blind, placebo-controlled, multicenter trial to evaluate the safety and efficacy of AMX0035 versus placebo for 48-week treatment of adult patients with Amyotrophic Lateral Sclerosis (ALS).

Lead institution: Beaumont Hospital, Dublin 9

- **NREC-CT Comments:**

- The NREC-CT A noted that the clinical trial application represents a phase III placebo-controlled study investigating the use of the medicinal product AMX0035 for treatment of ALS in participants diagnosed within the previous 24 months.
- The NREC-CT A is not in a position to return a final ethics opinion based on the information and documentation received thus far. In this regard, the Committee requires additional information to inform its deliberations.

- **NREC-CT Decision:**

- Request for Further Information

- **Additional Information Required:**

- The NREC-CT A requested further information on access to the 'standard of care' for participants, in particular access to Riluzole, while participating in the study.
- The NREC-CT A sought reassurance that the significant level of assessment proposed will be adequately communicated to potential participants as part of the recruitment procedures.
- Noting that questionnaires include sensitive topics such as suicide, the NREC-CT A requested further information how these sensitive questions will be communicated and handled by the study team.
- The NREC-CT A requested that participant materials are adequately adapted to remove mention of organisations that lie in other jurisdictions e.g., NHS.
- The NREC-CT A recommended the research team outline in the Protocol and PIL, how they plan to share the results of the study with the participants.
- The NREC-CT A requested justification for the exclusion criterion of persons not fluent in English.

- The NREC-CT A requested further information on who will have access to biological samples as part of the trial.
- The NREC-CT A requested clarity on how long biological samples will be retained for.
- The NREC-CT A requested that data storage and data transfer are adequately elucidated in both patient and caregiver PIL and consent forms and that language around 'data ownership' is adapted to state that the Sponsor has responsibility over the data rather than 'owns' the data. The Committee also requested clarity on whether the Sponsor can confirm that data handled outside of the EEA will be handled in line with GDPR legislation.
- The NREC-CT A regarded further information on how participants will be reimbursed for travel and refreshments, whether a maximum amount will be set for expenses, and that this information should be further explained in the PIL.
- The NREC-CT A noted that several studies related to ALS are taking place concurrently at the one Irish site, and requested further information on how it will be determined which participants will participate in each of the trials. The Committee also requested assurances that the site has sufficient capacity to run these trials in parallel in a similar participant cohort.

21-NREC-CT-023

Principal Investigator: Prof. Janice Walshe

Study title: TRIO045/LidERA: A phase III, randomized, open-label, multicenter study evaluating the efficacy and safety of adjuvant giredestrant compared with physician's choice of adjuvant endocrine monotherapy in patients with estrogen receptor-positive, HER2-negative, early breast cancer.

Lead institution: St Vincent's University Hospital, Dublin 4

- NREC-CT Comments:

- The NREC-CT A noted that the clinical trial application represents a phase III open-label study evaluating the efficacy and safety of adjuvant giredestrant, compared to the standard of care for treatment of HER2-negative breast cancer.
- The NREC-CT A noted that while the Patient Information Leaflet (PIL) was long, there was an excellent attempt to provide a summary of the document.
- The NREC-CT A is not in a position to return a final ethics opinion based on the information and documentation received thus far. In this regard, the Committee requires additional information to inform its deliberations.

- NREC-CT Decision:

- Request for Further Information

- Additional Information Required:

- The NREC-CT A requested further information on the number of 28 day drug administration cycles that will be included as part of the trial.
- The NREC-CT A requested clarity regarding the follow-up schedules and the documentation to be updated accordingly.
- The NREC-CT A requested that a plain English executive summary of the salient points of the study is included at the beginning of the PIL.
- The NREC-CT A requested that the purpose of taking the drug should be explained in the PIL.
- The NREC-CT A considered the approach regarding potential injury outlined in the PIL as inadequate, as the study doctor may have a perceived conflict when negotiating with Roche on behalf of the participant. The NREC-CT A requested that this section is amended to ensure the participant is adequately protected.
- The NREC-CT A requested further information on how capacity will be assessed and whether any potential supports are in place for those lacking decision-making capacity.
- The NREC-CT A requested further information on the data security measures in place at each site.
- The NREC-CT A requested further information on whether the data will be transferred outside of Europe, and that this information should be clearly elucidated in the PIL and the consent form.
- The NREC-CT A requested confirmation from the Sponsor that any data transferred outside of the EEA will be handled in line with GDPR.
- The NREC-CT A requested further information on the criteria for and how biological samples will be disposed of.
- The NREC-CT A requested clarity on the retention period for genetic information, and that this retention period is captured in the PIL.

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- AOB:
 - The NREC-CT A discussed the format of the assessment materials as part of the Clinical Trials Regulations National Collaboration Project (CTR-NCP).
 - Clarification was sought by the Committee regarding the timing and format of uploaded documents for review.
 - The Chair closed the meeting.