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| **Committee:** | Northern A Health and Disability Ethics Committee |
| **Meeting date:** | 19th April 2022 |
| **Zoom details:** | https://mohnz.zoom.us/j/96507589841 |

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| **Time** | **Review Reference** | **Project Title** | **Coordinating Investigator** | | **Assigned Lead Reviewers** |
| 12.30pm- 12.55pm | 2022 FULL 12267 | Open-label long-term trial of efgartigimod PH20 SC for the treatment of Primary Immune Thrombocytopenia in adults (ARGX-113-2005) | Dr Rajeev Rajagopal | Ms Jade Scott & Ms Catherine Garvey | |
| 12:55pm- 1:20pm | 2022 FULL 12190 | Whānau-focused, nurse-led familial echo screening in ARF/RHD | Dr Rachel Webb | | Dr Leonie Walker (Primary Reviewer), Ms Jade Scott (Primary Reviewer) |
| 1.20pm- 1.45pm | 2022 FULL 12545 | BP43963: A Study of RO7247669 in Participants with Melanoma | Dr Rajiv Kumar | | Associate Prof Mira Harrison-Woolrych & Mr Jonathan Darby |
| ***1:45pm -2:00pm*** | ***Break*** | ***Break 15 minutes*** |  | |  |
| 2.00pm– 2.25pm | 2022 FULL 11103 | the WAVE study | Professor Timothy Buckenham | | Dr Andrea Forde & Ms Catherine Garvey |
| 2.25pm-2.50pm | 2022 FULL 11479 | Oxygen Wound Therapy Feasibility Study | Dr Geoff Bold | | Dr Sotera Catapang & Leonie Walker |

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| **Member Name** | **Member Category** | **Appointed** | **Term Expires** | **Apologies?** |
| Mrs Helen Walker | Lay (consumer/community perspectives) | 22/05/2020 | 22/05/2023 | Present |
| Mrs Catherine Garvey | Lay (the law) | 11/08/2021 | 11/08/2024 | Apologies |
| Dr Sotera Catapang | Non-lay (observational studies) | 11/02/2020 | 11/02/2023 | Present |
| Mr Jonathan Darby | Lay (the law/ ethical reasoning) | 13/08/2021 | 13/08/2024 | Present |
| Ms Jade Scott | Non-Lay (Intervention Studies) | 15/08/2021 | 15/08/2024 | Present |
| Dr Leonie Walker | Lay (ethical/moral reasoning) | 13/08/2021 | 16/08/2024 | Present |
| Dr Andrea Forde | Non-lay (intervention studies) | 18/12/2021 | 18/12/2024 | Present |
| Assoc Prof Mira Harrison-Woolrych | Non-Lay (Intervention/Observational Studies) | 13/08/2021 | 12/08/2022 | Present |
| Dr Kate Parker | Non-lay (observational studies) | 11/11/2015 | 11/02/2023 | Apologies |

## Welcome

The Chair opened the meeting at 12:00 pm and welcomed Committee members, noting that apologies had been received from Ms Catherine Garvey and Dr Kate Parker.

The Chair noted that it would be necessary to co-opt members of other HDECs in accordance with the Standard Operating Procedures. Ms Helen Walker and Assoc Prof Mira Harrison-Woolrych confirmed their eligibility and were co-opted by the Chair as members of the Committee for the duration of the meeting.

The Chair noted that the meeting was quorate.

The Committee noted and agreed the agenda for the meeting.

## Confirmation of previous minutes

The minutes of the meeting of 15 March 2022 were confirmed online.

## New applications

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| **1** | **Ethics ref:** | **2022 FULL 12267** |
|  | Title: | Open-label long-term trial of efgartigimod PH20 SC for the treatment of Primary Immune Thrombocytopenia in adults (ARGX-113-2005) |
|  | Principal Investigator: | Dr Rajeev Rajagopal |
|  | Sponsor: | ICON Clinical Research (New Zealand) Ltd |
|  | Clock Start Date: | 7 April 2022 |

Dr Rajeev Rajagopal and Mrs Jen Coetzee were present via videoconference for discussion of this application.

Potential conflicts of interest

The Chair asked members to declare any potential conflicts of interest related to this application.

No potential conflicts of interest related to this application were declared by any member.

Summary of resolved ethical issues

The main ethical issues considered by the Committee and addressed by the Researcher are as follows.

1. The Committee clarified that there would be flexibility around leaving home whilst on the study but that this would be discussed with the sponsor.
2. The Committee clarified that there would be training at the site for participants to administer the drug as well as the provision of the instructional video.

Summary of outstanding ethical issues

The main ethical issues considered by the Committee and which require addressing by the Researcher are as follows.

1. The Committee suggests removing mention of the Covid-19 alert levels as these are obsolete and replacing with “government Covid-19 management strategies”.
2. The Committee requested clarification on the management of data in the event of remote monitoring. This will need to be secure and as currently stated there is no satisfactory response to the upload and management of access to the data stated to be stored for up to 15 years.
3. The Committee requested the researcher become familiar with [Chapter 15 of the NEAC standards](https://neac.health.govt.nz/national-ethical-standards/part-two/15-biobanks/) as there is biobanking involved in the study FUR.

The Committee requested the following changes to the Main Participant Information Sheet and Consent Form (PIS/CF):

1. Please amend the statement around caregiver legal age to only specify that the caregiver must be over 16 rather than referring to legal age.
2. Please specify what contact may occur and in what circumstances this will be done when reaching out to participants.
3. Please specify if the participants would have any flexibility around the statement “the participant is not allowed to transport the study drug” and if this would mean the participant could not go anywhere whilst on the medication as is currently stated in the Home Guide.
4. In the event of remote monitoring please specify the way in which this would be conducted and how the data would be managed.
5. Please replace “You must not father a child during the study” with "As the risks to the unborn are unknown, contraception must be used during intercourse.” As the current statement could be ambiguous.

The Committee requested the following changes to the Caregiver Participant Information Sheet and Consent Form (PIS/CF):

1. Please specify what contact may occur and in what circumstances this will be done when reaching out to participants.
2. Please specify that the research nurse will be training the parent, and this would be delegated by the investigator.
3. Please specify if the participants would have any flexibility around the statement “the participant is not allowed to transport the study drug” and if this would mean the participant could not go anywhere whilst on the medication as is currently stated in the Home Guide.

The Committee requested the following changes to the Data and Tissue Management Plan (DTMP):

1. The PIS limits the use of leftover samples for future research to research relating to the study drug and the condition (primary immune thrombocytopaenia). However, section 8.5 of the DTMP refers to research unrelated to the purposes of the study; please ensure consistency.

**Decision**

This application was *provisionally approved* by consensus, subject to the following information being received:

1. Please address all outstanding ethical issues, providing the information requested by the Committee.
2. Please update the participant information sheet and consent form, taking into account feedback provided by the Committee. *(National Ethical Standards for Health and Disability Research and Quality Improvement, para 7.15 – 7.17).*
3. Please update the study protocol, taking into account the feedback provided by the Committee. (National Ethical Standards for Health and Disability Research and Quality Improvement, para 9.7).

After receipt of the information requested by the Committee, a final decision on the application will be made by Ms Catherine Garvey and Ms Jade Scott.

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| **2** | **Ethics ref:** | **2022 FULL 12190** |
|  | Title: | Whānau-focused, nurse-led familial echo screening in ARF/RHD |
|  | Principal Investigator: | Dr Rachel Webb |
|  | Sponsor: |  |
|  | Clock Start Date: | 7 April 2022 |

Dr Adam Dennison and Dr Rachel Webb were present via videoconference for discussion of this application.

Potential conflicts of interest

The Chair asked members to declare any potential conflicts of interest related to this application.

No potential conflicts of interest related to this application were declared by any member.

Summary of resolved ethical issues

The main ethical issues considered by the Committee and addressed by the Researcher are as follows.

1. The Committee clarified that the nurses would be trained as part of the study alongside the qualitative arm of the study.
2. The Committee clarified that the young-peoples competency to consent would be assessed by the members of the investigatory team and the nurses involved in the study.
3. The Committee clarified that members of the qualitative study would also be invited to the hui.
4. The Committee clarified that there would be translated versions of the documents provided to prevent language barriers.
5. The Committee clarified that there would be assessment of the competency of the nurses in their training in Echocardiogram screening (ECHO).

Summary of outstanding ethical issues

The main ethical issues considered by the Committee and which require addressing by the Researcher are as follows.

1. The Committee requires a PIS/CF for the nurses administering and participating in the study. This will need to include that their training is part of the study.
2. The Committee requests that the Future Unspecified Research be specified to detail whether there will be reuse of existing data or if there will be contact and further data collected. This can be approximate information but there needs to be some parameters included.
3. The Committee requests clarity around if the qualitative data will be sent overseas and if so, this should be stated in all participant facing documentation. If information is to be sent overseas, please include a statement acknowledging the risk this poses.
4. The Committee requests a review for consistency around the use of macrons in language across all forms.
5. The Committee requests that Part 1 of the study has a PIS/CF for the caregivers and adolescents that can provide their own consent.
6. The Committee requests that assent forms for 5–10-year-olds be provided as they should be able to be given the choice to not participate. These should also be made available for those without competency to consent.
7. Please provide parent caregiver consent forms for siblings who cannot consent and assent forms for 5–10-year-olds and the 11–16-year-olds in Part 2 of the project.
8. The Committee requests clarification of how the study would progress in the event that there is a sibling or member of the whānau unit unwilling to participate and if this would affect the participation of that whānau as a whole.
9. The Committee queried how the mental health impact of finding several cases of RHD in a family would be dealt with. The researcher explained that there would be a full paediatric evaluation and counselling sessions to address this. The Committee requests that all participant information address this in more depth.
10. The Committee requests independent peer review be provided.

The Committee requested the following changes to the Assent Form:

1. Please include a statement analogous to “A parent or caregiver may accompany you while you are being screened” to give reassurance to children undergoing the ECHO.
2. Please add page numbers.

The Committee requested the following changes to the Main Participant Information Sheet and Consent Form (PIS/CF):

1. Please ensure that there is detail as to the informing of incidental findings in siblings.
2. Please add page numbers.
3. Please expand more on the handling of legal disclosure of issues such as abuse if this or other sensitive issues are uncovered.

The Committee requested the following changes to the Protocol:

1. Please include a clear outline of the age groups that will be included in the study.

**Decision**

This application was *provisionally approved* by consensus, subject to the following information being received:

1. Please address all outstanding ethical issues, providing the information requested by the Committee.
2. Please update the participant information sheet and consent form, taking into account feedback provided by the Committee. *(National Ethical Standards for Health and Disability Research and Quality Improvement, para 7.15 – 7.17).*
3. Please update the study protocol, taking into account the feedback provided by the Committee. (National Ethical Standards for Health and Disability Research and Quality Improvement, para 9.7).

After receipt of the information requested by the Committee, a final decision on the application will be made by Ms Jade Scott and Dr Leonie Walker.

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| **3** | **Ethics ref:** | **2022 FULL 12545** |
|  | Title: | BP43963: A Study of RO7247669 in Participants with Melanoma |
|  | Principal Investigator: | Dr Rajiv Kumar |
|  | Sponsor: | F. Hoffmann-La Roche Limited |
|  | Clock Start Date: | 7 April 2022 |

Dr Rajiv Kumar, Ms Courtney Rowse and Ms Julia Osullivan were present via videoconference for discussion of this application.

Potential conflicts of interest

The Chair asked members to declare any potential conflicts of interest related to this application.

No potential conflicts of interest related to this application were declared by any member.

Summary of resolved ethical issues

The main ethical issues considered by the Committee and addressed by the Researcher are as follows.

1. The Committee clarified that the standard of care and recruitment would be done via the District Health Board (DHB) to minimise coercion.
2. The Committee clarified that the participants would be walked through the forms and protocol on site and that the participants would be given up to a week to decide.
3. The Committee clarified that reimbursement would be given for transport and parking or any other costs that would be associated with the study.
4. The Committee clarified the reasoning for the exclusion of those with auto-immune diseases given immunotherapy can put those people at increased risk.
5. The Committee clarified that pregnant women and breastfeeding women would be excluded as there is no data concerning the teratogenicity of the study drug.

Summary of outstanding ethical issues

The main ethical issues considered by the Committee and which require addressing by the Researcher are as follows.

1. The Committee queried the safety data size available to the researchers and request further information on adverse effects and tolerance that would then need to be added to the information sheets.
2. The Committee commented on the mandatory genetic testing and queried as to why this was the case as the study was not a genetic study and as such this should be part of an optional further study with an optional consenting process. Please clarify this process with the sponsor as if this is not a directly related genetic element and should therefore be optional.
3. The Committee queried the availability of the study drug after the study had finished and if this would be provided in the event of a positive result.
4. The Committee noted that the responsibility of informing a general practitioner (GP) should lie with the research team and as such should be removed from the patient information sheet.

The Committee requested the following changes to the Main Participant Information Sheet and Consent Form (PIS/CF):

1. Please include some specific idea of the reimbursement protocol for patients.
2. Please specify if the study drug would be available after the study in the event of a positive response to the medication.
3. Please only refer to the study drug after the first time as “the study drug” and not with the full name as it is not very approachable.
4. Please bold the statement highlighting that the study drug is not approved by Medsafe and is an experimental drug.
5. Please include previous trial numbers and any adverse events that have occurred previously and their frequencies if available.
6. Please consider using a smaller footer.
7. Pease specify the exclusion of mentally unwell individuals as this is too restrictive. The Committee suggests including a statement to clarify that this exclusion is on the grounds of “an inability/unwillingness to comply with the study requirements”.
8. Please include a full list of notifiable diseases and that these may be automatically flagged.

The Committee requested the following changes to the Sub-study Participant Information Sheet and Consent Form (PIS/CF):

1. Please ensure that contact details for withdrawal from the study are provided.

**Decision**

This application was *provisionally approved* by consensus, subject to the following information being received:

1. Please address all outstanding ethical issues, providing the information requested by the Committee.
2. Please update the participant information sheet and consent form, taking into account feedback provided by the Committee. *(National Ethical Standards for Health and Disability Research and Quality Improvement, para 7.15 – 7.17).*
3. Please update the study protocol, taking into account the feedback provided by the Committee. (National Ethical Standards for Health and Disability Research and Quality Improvement, para 9.7).

After receipt of the information requested by the Committee, a final decision on the application will be made by Dr Andrea Forde and Mr Jonathan Darby.

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| **4** | **Ethics ref:** | **2022 FULL 11103** |
|  | Title: | the WAVE study |
|  | Principal Investigator: | Professor Tim Buckenham |
|  | Sponsor: | Merit Medical System Inc |
|  | Clock Start Date: | 7 April 2022 |

No one from the research team was present via videoconference for discussion of this application.

Potential conflicts of interest

The Chair asked members to declare any potential conflicts of interest related to this application.

No potential conflicts of interest related to this application were declared by any member.

Summary of outstanding ethical issues

The main ethical issues considered by the Committee and which require addressing by the Researcher are as follows.

1. The Committee noted that the protocol stated that it was approved by the ethics committee, however it is not the place for HDECs to confirm the validity of the science of the study and therefore this statement is incorrect. Please remove this statement from all places it appears in both the Protocol and the PISs.
2. The Committee noted that the indemnity for the stent was not sufficient as the insurance should be for the life of the device and not only a year. The certificate itself needs to be reviewed as there seems to be issues with the indemnity and further insurance may need to be extended. The policy as it stands is not sufficient. *National Ethical Standards* para *17.1-17.6*
3. The Committee noted that there is no mention of serious adverse events that could result in the removal of the device, or the likelihood of any of these potential events in any documentation provided. The Committee requests that this be provided so that the participants may make informed decisions. *National Ethical Standards* para *7.15*
4. The Committee requested what reimbursement exists for the study as the only reimbursement mentioned was for the follow-up portion of the study. More detail needs to be provided and an approximate amount listed in the PISs. *National Ethical Standards* para *7.15*
5. The Committee noted there was mention of tissue samples to be collected during the study in the protocol and other participant facing information but not in the application. Please amend this and if necessary, please specify when and where the tissue will be taken, stored, for how long and for what purpose. *National Ethical Standards* para *7.15*
6. The Committee queried the implications of the device failing and request more information as to the practicalities of this and the plans around potential failure. Please provide the documentation from the EMA provisional approval.
7. The Committee noted there was no ethical reasoning for the exclusion of pregnant women, please specify.
8. The Committee request specificity of the impact of the study in terms of inclusion of Māori and Pasifika and what incidence is in these populations as well as how this will be collected in the terms of the ethnicity data groupings. Parallel to this, given the higher impact in Pasifika populations please consider obtaining Pasifika consultation. *National Ethical Standards* para *3.10*
9. The Committee request a statement on the culturally specific impact of the study and potential for Whakamā for Māori in the study. *National Ethical Standards* para *3.1*
10. The Committee requires an answer to C16 in the application in terms of ethnicity data and its collection. This field was left blank, please amend this. *National Ethical Standards* para *9.10 & 9.20*
11. The Committee requests for clarification that there would be opportunity for face-to-face discussion when consenting and recruiting participants.
12. The Committee noted for E8 in the application the “Sponsor Withdrawal” cannot be based solely in the commercial interests of the Sponsor.
13. The Committee requests clarification as to if the investigators are trained on the stent use by the Sponsor and if there is intention for a sponsor representative to be present or on video call during device insertion.
14. The Committee requests clarification as to how this intervention will not impact other patient resources in the District Health Boards.
15. The Committee queried the validity of the peer review given there was no signature or date on the overseas one and the local peer review was conducted by someone potentially close to the study. *National Ethical Standards* para *9.25-9.32 & 9.3*
16. The Committee noted that the answer to B21.1 in the application was not adequate, please specify how conflicts of interest will be managed. *National Ethical Standards* para *11.23*

The Committee requested the following changes to the Participant Information Sheet and Consent Form (PIS/CF):

1. Please amend the list of risks to be more lay friendly. *National Ethical Standards* para *7.19*
2. Please amend the statement on pregnancy and the potential for long term-effects considering that the device is a stent and there appears to be no cause for effect on a child in the event of the device being used.
3. Please specify if the $100 reimbursement for the follow-up is a one-off cost and if this would be enough.
4. Please ensure that it is made clear that participants may withdraw orally as well as in writing. *National Ethical Standards* para *7.15*
5. Please consider the use of diagrams of the study device to better describe the procedure as well as a table of assessments and visits in order to made what is required of participants clearer. *National Ethical Standards* para *7.15 & 7.19*
6. Please ensure it is clear to participants that are randomised to standard of care know they are followed up for two years. *National Ethical Standards* para *7.15*
7. Please include a statement informing participants that their data will be sent overseas. *National Ethical Standards* para *7.15*
8. Please remove the reference to Industry Guidelines/Medicines New Zealand as this does not pertain to devices.
9. Please remove the tick box question for informing of the general practitioner. This should be mandatory and not reliant on the participant. *National Ethical Standards* para *7.15*
10. Please clarify the statement “your doctor will implant the new device” as it is unclear if this refers to the study doctor. *National Ethical Standards* para *7.15*

**Decision**

This application was *declined* by consensus, as the Committee did not consider that the study would meet the ethical standards referenced above.

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| **5** | **Ethics ref:** | **2022 FULL 11479** |
|  | Title: | Oxygen Wound Therapy Feasibility Study |
|  | Principal Investigator: | Dr Geoff Bold |
|  | Sponsor: | Fisher & Paykel Healthcare |
|  | Clock Start Date: | 7 April 2022 |

Dr Geoff Bold, Mrs Jo Krysa, Dr Dexter Cheung, Mr Emil Schmidt, and Mr Stephen McPhee were present via videoconference for discussion of this application.

Potential conflicts of interest

The Chair asked members to declare any potential conflicts of interest related to this application.

No potential conflicts of interest related to this application were declared by any member.

Summary of resolved ethical issues

The main ethical issues considered by the Committee and addressed by the Researcher are as follows.

1. The Committee recommended softening the statement around the IP and legal sanctions should there be any questions asked about the device. Please consider removing legal IP clauses from future applications if the intent is just to stop posting of images of the device to social media.
2. The Committee clarified that there is no standard of care for chronic wounds, and this has informed the care that participants will receive in the event of the device not being successful.
3. The Committee clarified that there was an exclusion of pregnant people due to the dye used to view the perfusion of the wound having some unknown effect in pregnant and breastfeeding people.

Summary of outstanding ethical issues

The main ethical issues considered by the Committee and which require addressing by the Researcher are as follows.

1. The Committee requested that any inference of an adult age group should be amended to be 16 and up as in New Zealand this is correct.
2. The Committee requested more clarity on how the participants will be allocated between phase A and Phase B be included in the protocol.
3. The Committee recommended age stratification (to split/divide) based on the difference in healing process between young and elderly participants which might affect the efficacy end point of the study.

The Committee requested the following changes to the Participant Information Sheet and Consent Form (PIS/CF):

1. Please consider using a grading scale for the questionnaire on ease of use of the device and situations in which this ease could be impacted. For example, a 0-5 scale.
2. Please review for lay language e.g., “topical”.
3. Please specify how long the oxygen bottle supply last for.
4. Please amend the statement on HDEC approval to state Northern A is the approving committee.

**Decision**

This application was *provisionally approved* by consensus, subject to the following information being received:

1. Please address all outstanding ethical issues, providing the information requested by the Committee.
2. Please update the participant information sheet and consent form, taking into account feedback provided by the Committee. *(National Ethical Standards for Health and Disability Research and Quality Improvement, para 7.15 – 7.17).*
3. Please update the study protocol, taking into account the feedback provided by the Committee. (National Ethical Standards for Health and Disability Research and Quality Improvement, para 9.7).

After receipt of the information requested by the Committee, a final decision on the application will be made by Dr Sotera Catapang and Dr Leonie Walker.

## General business

1. The Chair reminded the Committee of the date and time of its next scheduled meeting:

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| **Meeting date:** | 17th May 2022 |
| **Zoom details:** | To be determined |

1. **Review of Last Minutes**

The minutes of the previous meeting were deferred for online review after the meeting to be signed by the Chair and Co-ordinator as a true record.

1. **Matters Arising**
2. **Other business**
3. **Other business for information**
4. **Any other business**

The meeting closed at 3:20pm.