Protecting people who participate in research

CITI Training Study Guide

Unanticipated Problems and Reporting Requirements

Reporting Requirements

- IRBs must have procedures to ensure prompt reporting to the IRB of ALL adverse or unanticipated problems for research subjects.
- Unanticipated problem = a subject’s response to the study that is unexpected.
- Adverse event = when a subject is harmed.
- An adverse unanticipated problem is one that may increase risks for other subjects, and must be reported to OHRP (DHHS/Office of Human Research Protection).

Reporting Requirements

In other words...

- An adverse unanticipated problem is new information that:
  - is inconsistent with the risk information provided to the IRB, including severity, magnitude, frequency or specificity;
  - indicates that other subjects may be at increased risk of harm (physical, psychological, economic or social); and
  - is or may be related to participation in the research.
Reporting Requirements

Unanticipated problem examples:
- Subject experiences an adverse event that was caused by the study drug and was previously unknown [Note: “adverse event” = harm]
- Sponsor reports to the investigator that the drug under study has a new risk
- A behavioral researcher’s survey questions trigger an intensely negative psychological reaction for some subjects that was not foreseen
- FDA orders a device being used to deliver a drug in a research study to be withdrawn due to a manufacturing defect

Examples of problems that do NOT require reporting to OHRP (but should be reported to the IRB) either because they are not unanticipated or do not show increased risk of harm or are unrelated to the research protocol:
- Subject experiences an adverse event caused by the study drug that was previously known
- Subject experiences claustrophobia in an MRI machine – protocol described such a reaction as one of the risks in the research
- A subject in an observational study involving lifestyle choices of obese individuals dies during the research due to a heart attack

Reporting Requirements – FDA

Unanticipated Adverse Device Effects:
- Any serious adverse effect on health or safety associated with a device if such problems were not previously identified.
- An investigator must report an adverse effect to the research sponsor and the IRB no later than 10 working days after becoming aware of the effect.
- The sponsor must evaluate the effect and report its evaluation to FDA and the reviewing IRBs and participating investigators within 10 working days after the sponsor receives notice of the effect.
Reporting Requirements

Researchers should report any of the following to the IRB:

- Information that indicates a change to the risks or potential benefits of the research
- Changes to the research plan made to eliminate an apparent immediate hazard to a subject
- Complaints from subjects that indicate risks to subjects or others
- Unanticipated adverse device effects
- Events that are unexpected and possibly related to the research procedures
- Unexpected breaches of confidentiality

How to Report Unanticipated Problems

- Each IRB develops procedures for prompt reporting by researchers and makes determinations about risk to subjects or others.
- Procedures should require from researchers:
  - A complete description of the problem in lay language
  - An explanation of why the circumstance may be an unanticipated problem involving risk
  - Suggested changes to the research
  - Suggested changes to the information disclosed in the consent process

How the IRB Acts on Unanticipated Problems

- The IRB chair or administrator must promptly report any adverse unanticipated problems to OHRP (DHHS/Office of Human Research Protection).
- The report should be submitted within a month of the IRB receiving the report from the researcher.
- The report to OHRP should include actions the institution is taking to address the problem (e.g., revise the protocol, suspend subject enrollment, terminate the research, revise the informed consent document, inform enrolled subjects, increase monitoring of subjects, etc.).