



# **CRC CERTIFICATION PREPARATION COURSE**

## **SESSION 2B PROTOCOL AND AMENDMENTS**

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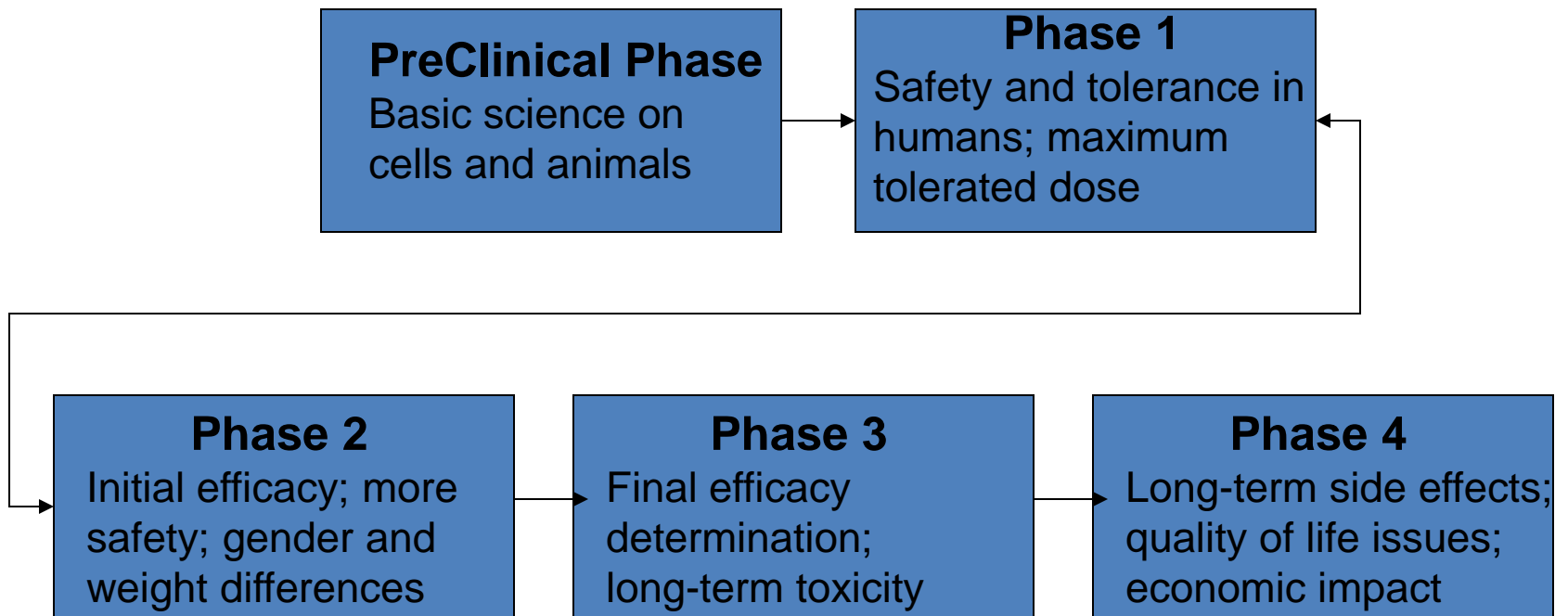
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# SESSION 2B

- Clinical Trial Phases
  - Drug Trials
  - Device Trials
- Study Design
- Purpose and Objectives of Protocol
- Inclusion / exclusion criteria
- Study procedures
- Statistical plan
- Amendments to the protocol
  - Regulatory notifications
  - IND / IDE amendments

# CLINICAL TRIAL PHASES - DRUGS



# CLINICAL TRIAL PHASES - DRUGS

## ○ Phase I

- First exposure in humans – small number exposed
- Usually conducted on healthy individuals
- Safety and tolerability are key goals
- MTD
- Bioavailability, PK studies

## ○ Phase II

- Conducted in disease-targeted individuals
- Safety assessment remains key goal
- Initial probe of efficacy
- Number of participants - up to several hundred

# CLINICAL TRIAL PHASES - DRUGS

## ○ Phase III

- Final confirmatory trial before FDA approval
- Larger sample size (several hundred to thousand)
- Randomized, double-blind design very common
- Safety and efficacy are key goals
- Close monitoring of side effects

## ○ Phase IV

- Occurs after FDA approval
- Evaluates general use in population with side effect



# STUDY DESIGN PARAMETERS

# CLINICAL TRIAL PROTOCOL CONTENTS

## ○ General Information

- Protocol title, protocol identifying number, and date. Any amendment(s) should also bear the amendment number(s) and date(s)
- Name and address of the sponsor and monitor (if other than the sponsor)
- Name and title of the person(s) authorized to sign the protocol and the protocol amendment(s) for the sponsor
- Name, title, address, and telephone number(s) of the sponsor's medical expert (or dentist when appropriate) for the trial
- Name and title of the investigator(s) who is (are) responsible for conducting the trial, and the address and telephone number(s) of the trial site(s)
- Name, title, address, and telephone number(s) of the qualified physician (or dentist, if applicable), who is responsible for all trial-site related medical (or dental) decisions (if other than investigator)
- Name(s) and address(es) of the clinical laboratory(ies) and other medical and/or technical department(s) and/or institutions involved in the trial



# CLINICAL TRIAL PROTOCOL CONTENTS

## ○ Background Information

- Name and description of the investigational product(s)
- A summary of findings from nonclinical studies that potentially have clinical significance and from clinical trials that are relevant to the trial
- Summary of the known and potential risks and benefits, if any, to human subjects
- Description of and justification for the route of administration, dosage, dosage regimen, and treatment period(s)
- Statement that the trial will be conducted in compliance with the protocol, GCP and the applicable regulatory requirement(s)
- Description of the population to be studied
- References to literature and data that are relevant to the trial, and that provide background for the trial

# PURPOSE / OBJECTIVES

- Trial Objectives and Purpose
  - A detailed description of the objectives and the purpose of the trial.

# TRIAL DESIGN

- Trial Design – scientific integrity depends substantially on the trial design
  - Primary endpoints and the secondary endpoints
  - Description of the type/design of trial to be conducted (e.g. double-blind, placebo-controlled, parallel design) and a schematic diagram of trial design, procedures and stages.
  - Description of the measures taken to minimize/avoid bias, including:
    - (a) Randomization.
    - (b) Blinding.
  - A description of the trial treatment(s) and the dosage and dosage regimen of the investigational product(s).

# CLINICAL TRIAL DESIGN

## ○ Trial Design

- Expected duration of subject participation, and a description of the sequence and duration of all trial periods, including follow-up, if any
- Description of the "stopping rules" or "discontinuation criteria" for individual subjects, parts of trial and entire trial
- Accountability procedures for the investigational product(s), including the placebo(s) and comparator(s), if any
- Maintenance of trial treatment randomization codes and procedures for breaking codes
- The identification of any data to be recorded directly on the CRFs (i.e. no prior written or electronic record of data), and to be considered to be source data

# INCLUSION / EXCLUSION

## ○ Subject Selection and Withdrawal

- Inclusion criteria
- Exclusion criteria
- Withdrawal criteria (i.e. terminating investigational product treatment/trial treatment) and procedures specifying:
  - (a) When and how to withdraw subjects from the trial/ investigational product treatment
  - (b) The type and timing of the data to be collected for withdrawn subjects
  - (c) Whether and how subjects are to be replaced
  - (d) The follow-up for subjects withdrawn from investigational product treatment/trial treatment

# TREATMENT AND PROCEDURES

- Treatment of Subjects
  - The treatment(s) to be administered
    - name(s) of all the product(s), dose(s), dosing schedule(s), route/mode(s) of administration, and treatment period(s), including the follow-up period(s) for subjects
  - Medication(s)/treatment(s) permitted (including rescue medication) and not permitted before and/or during the trial
  - Procedures for monitoring subject compliance
- Specific Study Procedures
  - Detailed by visit

# EFFICACY ASSESSMENTS

- Assessment of Efficacy
  - Specification of the efficacy parameters
  - Methods and timing for assessing, recording, and analyzing of efficacy parameters

# SAFETY ASSESSMENT

- Assessment of Safety
  - Specification of safety parameters
  - The methods and timing for assessing, recording, and analyzing safety parameters
  - Procedures for eliciting reports of and for recording and reporting adverse event and concomitant illnesses
  - The type and duration of the follow-up of subjects after adverse events



# STATISTICAL PLAN

## ○ Statistics

- Statistical methods to be employed, including timing of any planned interim analysis (ses)
- Number of subjects planned to be enrolled. In multi-center trials, the numbers of enrolled subjects projected for each trial site should be specified
- Reason for choice of sample size, including reflections on (or calculations of) the power of the trial and clinical justification
- The level of significance to be used

# STATISTICAL PLAN

## ○ Statistics

- Criteria for the termination of the trial
- Procedure for accounting for missing, unused, and spurious data
- Procedures for reporting any deviation(s) from the original statistical plan (described and justified in protocol and/or in the final report, as appropriate)
- The selection of subjects to be included in the analyses (e.g. all randomized subjects, all dosed subjects, all eligible subjects, evaluable subjects)

# SOURCE DOCUMENTS – DATA REVIEW

- Direct Access to Source Data/Documents
  - The sponsor should ensure that it is specified in the protocol or other written agreement that the investigator(s) / institution(s) will permit trial-related monitoring, audits, IRB/IEC review, and regulatory inspection(s), providing direct access to source data/documents

# ETHICAL CONSIDERATIONS

- Ethics

- Description of ethical considerations relating to the trial

# AMENDMENTS TO PROTOCOL

- All amendments, no matter how minor, require submission to regulatory authorities:
  - IRB must review and approve before proceeding
    - Should submit ASAP – no delay
  - Radiation safety if changes in radiation exposure
  - Pharmacy review if drug handling / storage is amended
- Types of amendments:
  - Sponsor changes (e.g., alterations in procedures, monitoring of participants, safety-related changes)
  - Local changes – e.g., staff changes

# AMENDMENTS

- IND Amendments
  - FDA Form 1571
  
- IDE Amendments