Subject: Procedure for Use of Investigational Drugs, Agents, and Biologics

Procedure:
This procedure outlines the review and approval process for use of investigational drugs, agents, and biologics in clinical research.

I. Investigator responsibilities.
A. The Investigator will provide all information regarding the use of investigational drugs, agents, and biologics as required in the IRB “Application for Human Research”. This will include the identification of the IND number. The IRB will accept the IND number pre-printed (NOT handwritten) in the Sponsor’s protocol as verification that the Sponsor has completed all appropriate necessary regulatory filing with the FDA for the use of this IND in the protocol under review. If the individual protocol does not have a pre-printed IND number included, the Sponsor is required to submit to the Investigator proof of application for an IND (for submission to the IRB), or notification from the FDA indicating the IND number assigned. A pending status noted in the IRB application is acceptable.

B. When the Investigator holds the IND for the investigational drug, agent, or biologic, a copy of the FDA Form 1571 is required as part of the IRB submission. The IND goes into effect 30 days after the FDA receives the application (FDA Form 1571) unless the Investigator is notified earlier.

C. When an IND is required, the Investigator will also complete the “Investigator statement” FDA form 1572 and submit it to the FDA.

D. The Investigator must provide justification for each of the conditions required for a drug, agent, or biologic to be exempt from the requirements of an IND (See HRPP Policy XI.B for details). The IRB Committee will determine if the justification warrants exemption from IND requirements.

E. The Investigator will obtain the drug, agent, or biologic from the supplier.
   1. The product(s) will be sent to the Investigational Drug Service, if they will be managing the storage, handling, and dispensing of the product(s); or
   2. The product(s) will be inventoried and managed by the Investigator and his/her staff as described in the IRB Application for Human Research (See HRPP Policy XI.A on the “Storage, Handling, and Dispensing of Investigational Drugs, Agents, or Biologics in Clinical Trials”).

F. The Investigator will complete the informed consent process, unless a waiver has been granted by the IRB.

G. The Investigator will maintain all study case report forms and drug dispensing records as required by the sponsor, Institution, and/or FDA.

H. The Investigator will notify the IRB of any amendments, serious adverse events or unanticipated problems to participants or others that may occur while conducting the research or follow-up.

I. The Investigator will assure that adverse events and unanticipated problems to participants or others are reported to the IRB via the VU “Report of Unanticipated Problems Involving Risk to Participants or Others” as soon as possible, but no later than 7 calendar days after the Investigator first learns of the event or problem (See HRPP Policy III.L).
J. The Investigator will complete and submit continuing reviews in accordance with IRB policy at the designated review intervals imposed by the IRB.

K. The Investigator will notify the FDA and IRB of closure or completion of the study and return all unused products per the sponsor’s instructions.

II. IRB Committee Responsibilities.

A. All initial requests for IRB approval of a study that includes the use of an investigational drug, agent, or biologic will be reviewed and approved by the full IRB Committee.

B. If the Investigator is requesting the drug, agent, or biologic be exempt from IND requirements, the IRB Committee must discuss the conditions for an exemption and determine if the Investigator’s justification meets the criteria for exemption from the IND requirements.

C. The assigned reviewers of the research protocol involving drugs, agents, or biologics will seek clarification from the IDS Pharmacy representative of any concerns that may affect the risk/benefit assessment. They may also request a literature review from the clinical librarian at the Eskind Biomedical Library.

D. Research vs. Therapy. Throughout IND trials, the distinction between therapy and research must be maintained. For example, a physician who participates in research by administering a new drug to consenting patients must assure that the patients understand and remember that the drug is experimental, and that its benefits for the condition under study are unproven. Furthermore, whereas the Principal Investigator’s primary allegiance is to the protocol, the physician’s allegiance is to the patient. Where an individual is both an Investigator and the participant’s treating physician, these two allegiances may conflict. The participant must recognize that the person with whom he or she is dealing may have such conflicting interests. The IRB should consider potential methods in which this conflict can be minimized and/or the need to inform the patient of the potential conflict.

E. Submission of amendments, serious adverse events or unanticipated problems to participants or others, and continuing reviews will be reviewed at the level for which the criteria are met.

III. Regulatory Compliance Analyst (RCA) Responsibilities.

A. The RCA will pre-review and request any necessary revisions for submitted documents for use of investigational drugs, agents, or biologics as outlined for new study submissions.

B. The RCA will verify that additional documents have been submitted by the Investigator as required such as supplemental information regarding the investigational drug, agent, or biologic supplied by the sponsor.

C. Once the pre-review revisions are received from the Investigator, the RCA will place the new study on the next available full Committee agenda assign reviewers (including the IDS Pharmacy representative) and assure appropriate materials are available. Reviewers are electronically notified once assigned.

D. If the Investigator is requesting the drug, agent, or biologic be exempt from IND requirements, the RCA must document the IRB Committee’s discussion and determination for the conditions required for an exemption from the IND requirements.

E. The RCA will assist reviewers in obtaining additional information that may be requested regarding the investigational drug, agent, or biologic from the Investigator or the IDS Pharmacy representative.

F. The RCA will process all requests for amendments, serious adverse events or unanticipated problems to participants or others, and continuing reviews per corresponding IRB policies and procedures.

G. The RCA will update and maintain current information in the HRPP database as applicable.
IV. Investigational Drug Services (IDS) Responsibilities.

A. The IDS Pharmacy representative will review all research studies involving drugs, agents, or biologics. The IDS Pharmacy representative will provide the following information to the assigned Committee:

1. Dosages as outlined in the sponsor’s protocol and IRB documents are congruent and within acceptable dosing limits;
2. The route of administration is acceptable;
3. The side effects are adequately listed and rate of occurrence accurate based on current literature;
4. Other clinical considerations are addressed by the Committee and in the informed consent document;
5. Reporting of any manufacturing, preparation, or storage concerns;
6. The Investigator’s process for handling, storing and dispensing if not using the IDS; and
7. Any information that may be pertinent to the risk/benefit assessment associated with the use of the drugs/agents or biologics as proposed in the research study.

B. The IDS Pharmacy representative will complete the “Pharmacy Reviewer’s Comment Form” for all investigational drugs, agents, or biologics noted in the research protocol.

C. The IDS Pharmacy representative will alert the primary or secondary reviewer of any potential safety concerns or issues needing clarification prior to the meetings.

D. The IDS Pharmacy representative may also request a literature review from the clinical librarian at the Eskind Biomedical Library.