



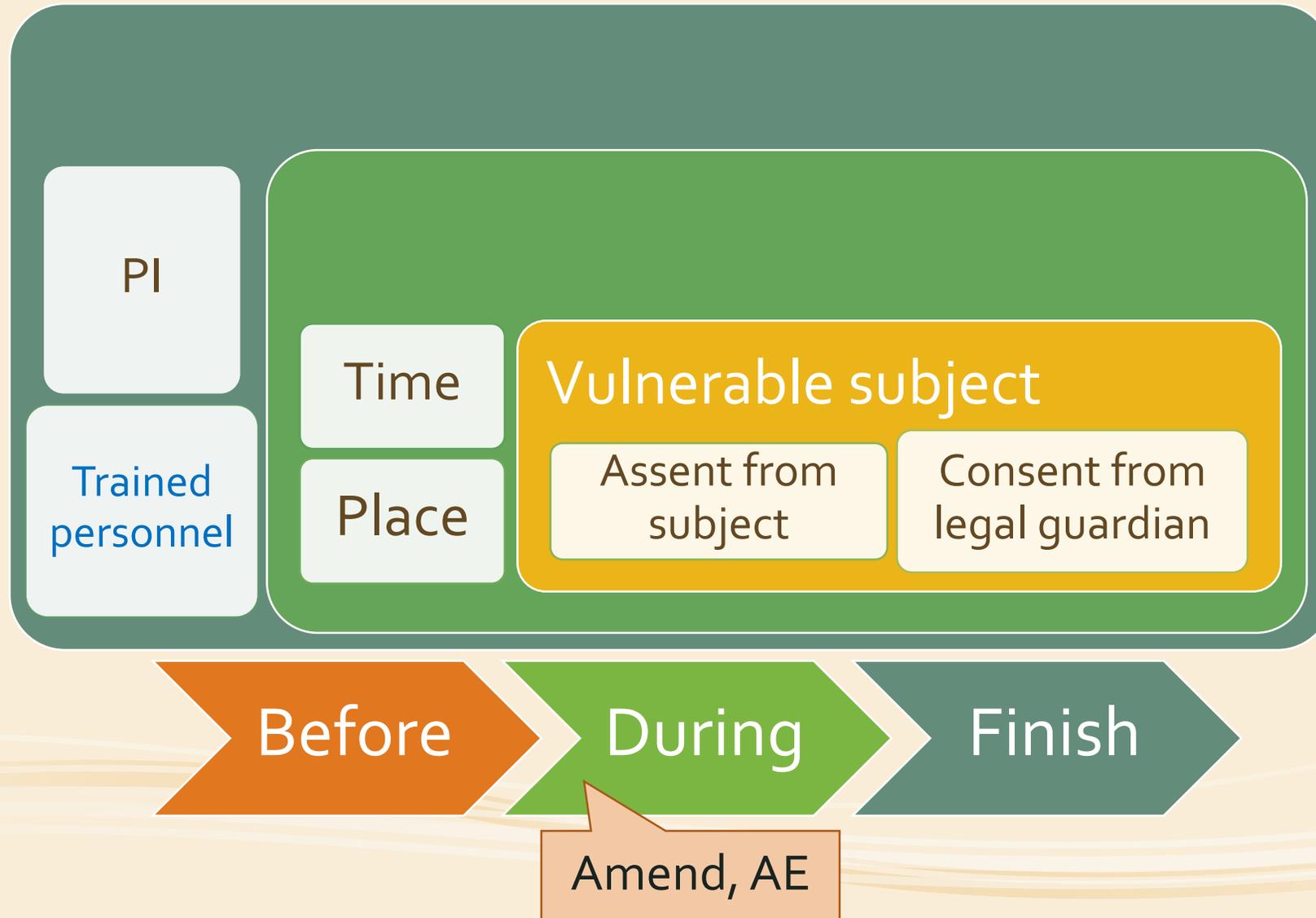
# Informed consent from basic to beyond

Standard course in Clinical Trial and GCP Training 2017

# Informed consent process

- Does not just a **form** or a **signature**
- Does not end after signing in a consent form
- Is a **process of information exchange**
- Starting from **recruitment process**
- Is an **ongoing process throughout the research study**  
– re-affirm
- **May continue after the end of study**

# กระบวนการให้ข้อมูลเพื่อขอความยินยอมเข้าร่วมวิจัย



# Declaration of Helsinki

## Version 2013

34. **In advance** of a clinical trial, **sponsors**, researchers and **host country governments** should make **provisions for post-trial access** for all participants who still need an intervention identified as beneficial in the study.
- This information should also be **disclosed** to participants **during the informed consent process**.

## Version 2008

33. **At the conclusion of the study**, patients entered into the study are entitled
- **to be informed about the outcome** of the study
  - **to share any benefits that result from it**, for example, access to interventions identified as beneficial in the study or to other appropriate care

# Information component of the consent

- Why am I here? = inclusion/exclusion criteria
- Why are they doing this study? = objective of the research
- What will happen to me? = procedure, duration, cost
- Will the study hurt? = risk, discomfort, compensation, privacy/confidentiality
- Alternative way if not in the research
- Approximate number of subject

# Information component of the consent

- Will am I get better if I am in the study? = **benefit, payment**
- What can I do if I have any question? = **contact person, new finding**
- Do I have to be in the study? = **voluntariness, alternative, consequence of not to participate or withdrawal**
- Termination of the subject's participation by the investigators without subject's consent
- After I **clearly understand** the information, here is what I decide = **consent**

# Documentation of informed consent

- A copy shall be given to research participants
- The form may be read to the subject or give the opportunity to **read before sign**
- For illiterate people, the form may be read by other who sign as a witness
- Waive a signed consent when: that is the **only** record **linking** to subject, or **no more than minimal risk** and **no procedure required** (such as only reply a questionnaire)

# Consent VS. Assent

## Consent

- Competent person (Autonomy)
- Method
  - Written consent
  - Verbal consent
  - Waiver

## Assent

- Incompetent person
  - **Children**
  - **Incompetent Adult** (physical or mental condition that prevents giving informed consent)
- Assent form - **content**

# Element of Assent

- **Why** child/incompetent adult is being asked to participate
- **Basic** study procedures, potential risk & benefit
- **Voluntary** participation that can stop at any time without penalty
- Statement that child/incompetent adult is being ask to **agree** to research

## Assent and parental permission requirements

Age of minor	Assent form	Parental permission form
Infant-6 years old	No	Yes
7-12 years old	Yes	Yes
13-17 years old (Option A)	Yes	Yes (same form)
13-17 years old (Option B)	Yes	Yes (separate form)

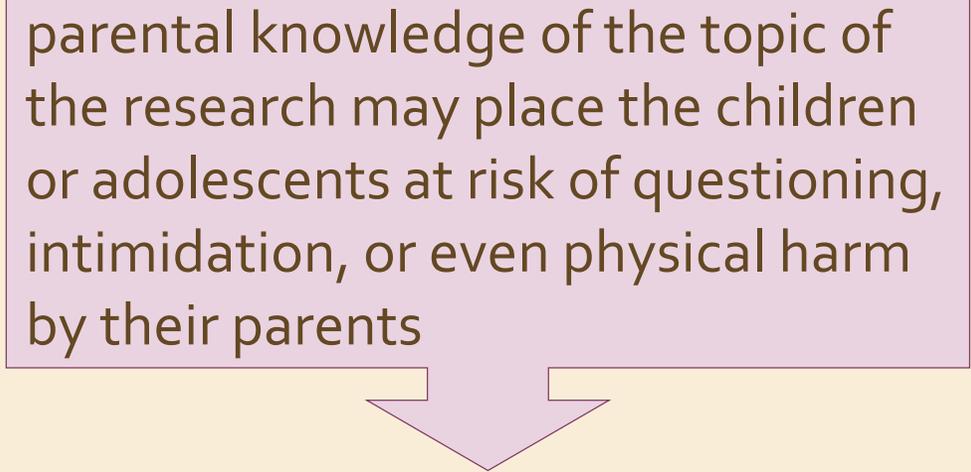
# Permission of a parent or legally authorized representative

- at least one parent or guardian in writing, consistent with applicable laws and regulations.

- **Waiver of parental permission**

- “emancipated” or “mature” minors
  - be married,
  - pregnant or be parents themselves, or
  - live independently
- studies involve investigation of adolescents’ beliefs and behaviour regarding sexuality, sexually transmitted diseases, pregnancy, abortion
- Studies the use of recreational drugs.
- Research address domestic violence, or child abuse.

parental knowledge of the topic of the research may place the children or adolescents at risk of questioning, intimidation, or even physical harm by their parents



# Additional safeguard for children & adolescents

- the **involvement of independent child advocates**: a relative, trusted friend, or family physician who is not involved in the research project
- **Independent psychological and medical support** for the participating children and adolescents
- **Observation of the study by a parent or guardian** - enable the child to be withdrawn if the parent or guardian decides it is in the child's best interests to do so

## Re-assent and consent at youth and adult milestones

The researcher and the IRB should consider whether re-assent or assent of children is required

- Assent of children who reach **7** years old
- Re-assent of subjects who turn **13** years old
- Consent of children who turn **18** years old



ดอกกุหลาบพระนามสิรินธร

เครดิตภาพ : <http://www.2.crma.ac.th/flower905/index6.asp>

# Exceptional conditions in consent

Waiver of informed consent

Waiver of the requirement of a signed consent

Waiving or modifying informed consent requires justification, and must in **all cases** be **explicitly approved** by a research ethics committee.

Research involving physically & mentally incapable subject may proceed before informed consent  
(Declaration of Helsinki)

Modifying the informed consent process

- withholding information to maintain the scientific validity
- actively deceiving

# CIOMS Guideline 10: Modifications and waivers of informed consent

A research ethics committee may approve a **modification** or **waiver** of informed consent to research if

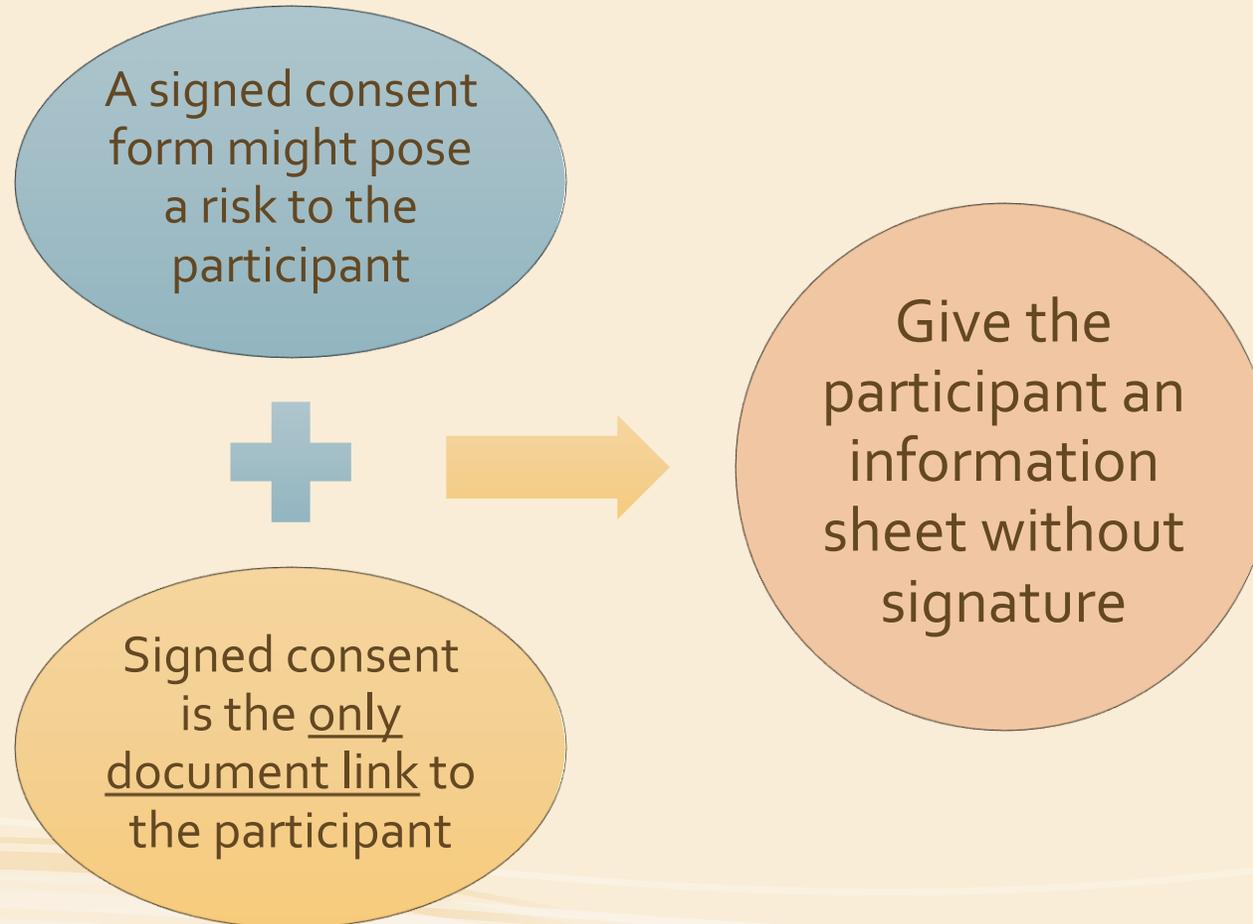
- the research would **not be feasible or practicable to carry out** without the waiver or modification; and
- the research has **important social value**; and
- the research **poses no more than minimal risks** to participants when research interventions or procedures offer participants no potential benefits.

See also slide 22, 24  
Use of stored biological specimen

# CIOMS Guideline 9: Individual informed consent a waiver of the requirement of a signed consent

- ❖ under certain conditions may also be approved when existence of a signed consent form might pose a risk to the participant, for example in studies involving illegal behavior.
- ❖ In some cases, particularly when the information is complicated, it is advisable to give participants information sheets to retain; these may resemble consent forms in all respects except that participants are not required to sign them.
- ❖ When consent has been obtained orally, researchers are responsible for providing documentation of consent to the research ethics committee.

# Waiver of the requirement of a signed consent



# Declaration of Helsinki 2013 item 30

- Research involving subject with physically or mentally incapable of giving informed consent, for example, unconscious, may be done only if **the physical or mental condition** that prevent giving informed consent is **a necessary characteristic** of the research group.
- The physician must seek informed consent from the **legally authorized representative**.
- If **no such representative is available**, and if the research **cannot be delayed** the study may **proceed without informed consent** provided that the specific reasons for involving subjects with a condition that renders them unable to give informed consent have been state in the protocol and the study have been **approved by a research ethics committee**.
- Consent to remain in the research should be obtained as soon as possible from a legally authorized representative

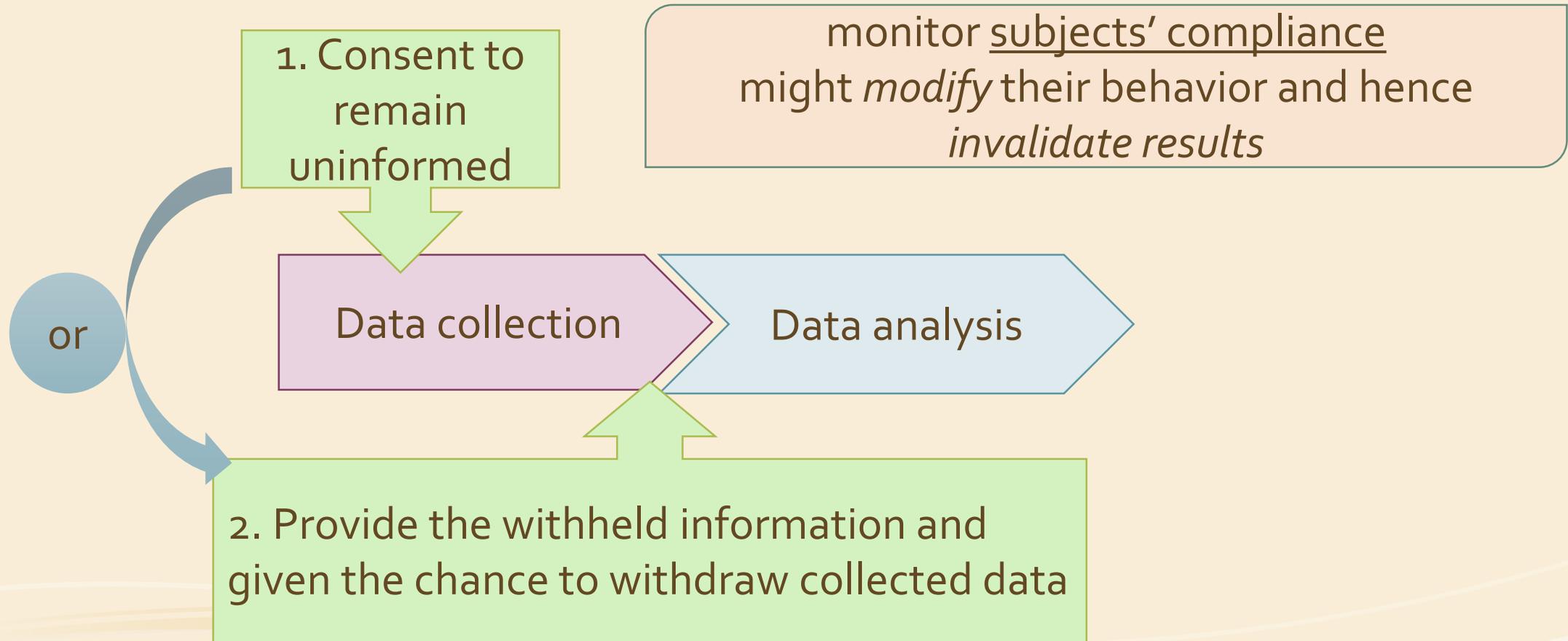


Consent to remain in the research should be obtained **as soon as possible** from a legally authorized representative

# Modifying the informed consent process by withholding information in order to maintain the scientific validity of the research

- the purpose of tests performed to **monitor their compliance**
- if they knew their compliance was being monitored they might modify their behavior and hence invalidate results.
- potential participants may be asked
  - to **consent to remain uninformed** of the purpose of some procedures until the research is completed. After their participation in the study ends, they must be given the omitted information, or
  - withheld until the data have been collected.
- *Before* study results are *analysed*, participants must be *provided with the information withheld* and given the *possibility to withdraw their data* collected under the study.
- The potential impact on the validity of the study when participants withdraw their data must be considered before a study starts.

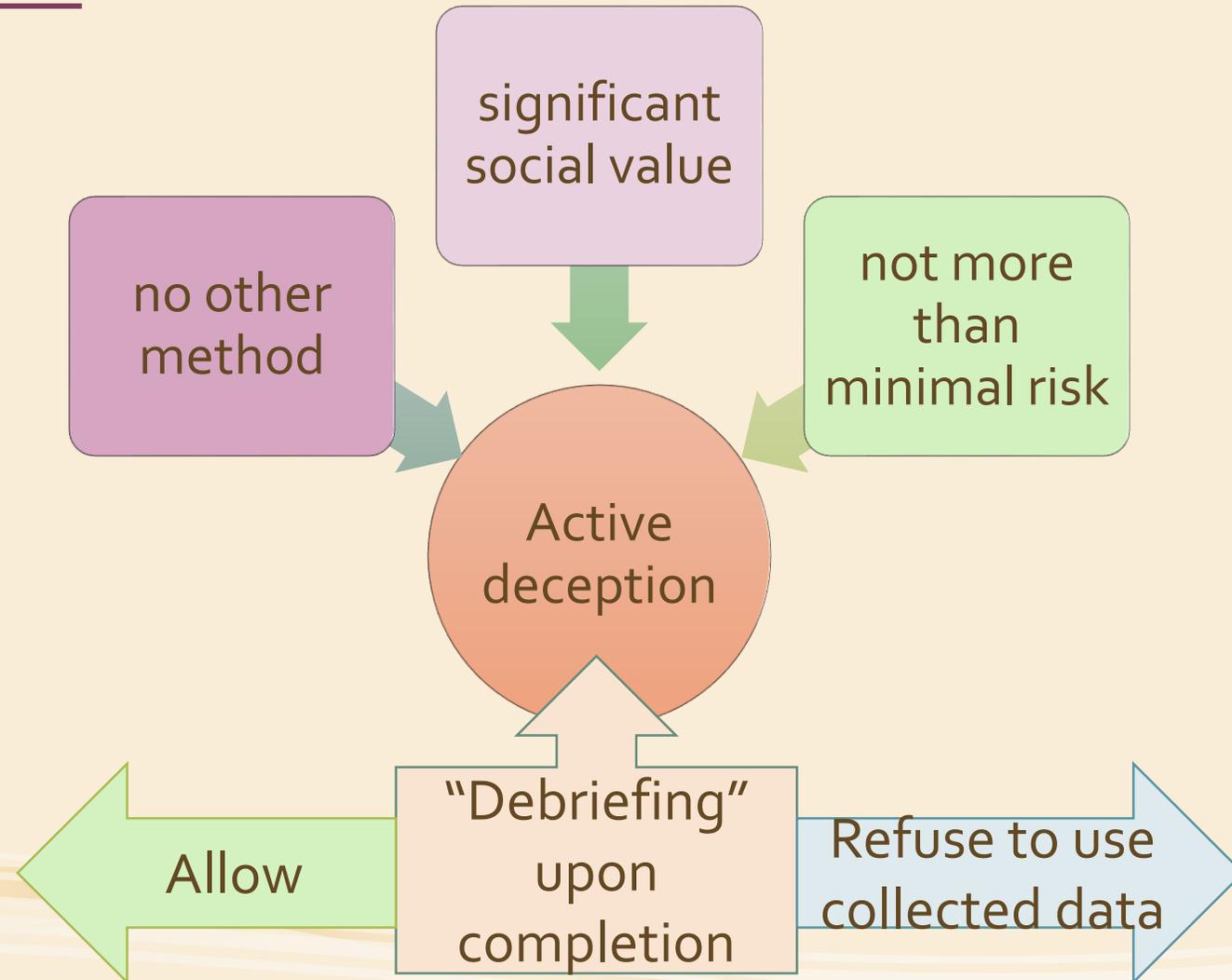
# Modifying the informed consent process by withholding information



# Modifying the informed consent process by actively deceiving participants

- to study their attitudes and behavior
- no other method could obtain valid and reliable data;
- the research has significant social value; and
- no information has been withheld that, if divulged, would cause a reasonable person to refuse to participate.
- exposes participants not more than minimal risk
- The research ethics committee must determine how participants must be informed of the deception upon completion of the research = “debriefing”, ordinarily entails explaining the reasons for the deception.
- Participants who disapprove of having been deceived for research purposes must be offered an opportunity to refuse to allow the researcher to use their data obtained through deception.
- In exceptional cases, a research ethics committee may approve the retention of non-identifiable information.

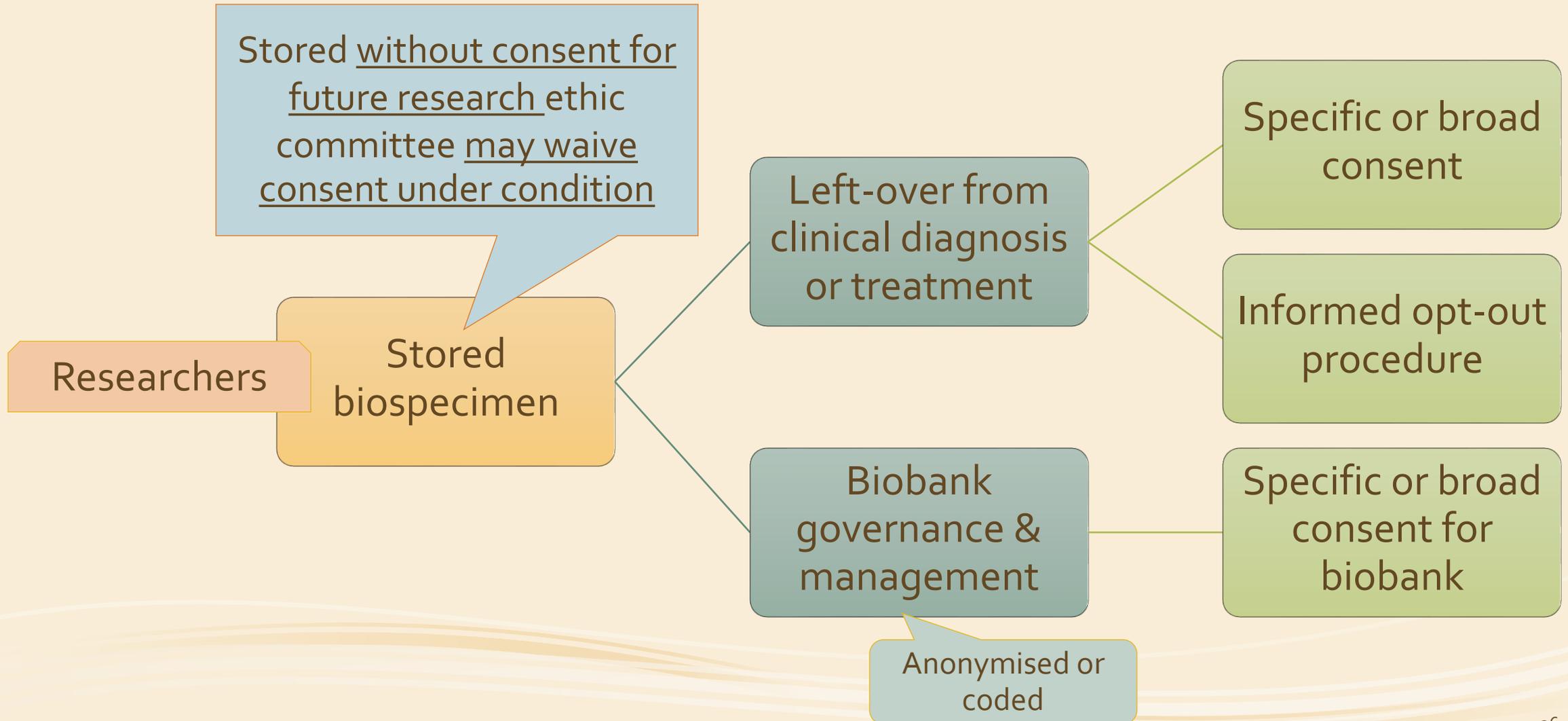
# Actively deceiving participants to study attitudes and behavior



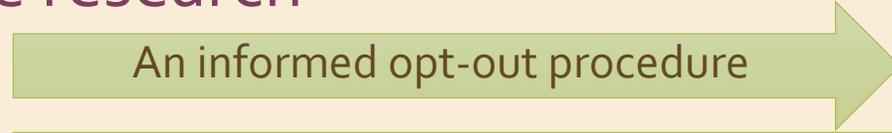
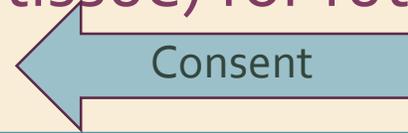
# CIOMS Guideline 11: Use of stored biological materials and related data

- When specimens are collected for research purposes, either **specific** informed consent for a **particular use** or **broad** informed consent for **unspecified** future use must be **obtained**.
- Such **broad** informed consent relies on proper governance and management of the **biobank**.
- When human biological materials are **left over after clinical diagnosis or treatment** (so-called **residual tissue**) and are stored for future research, a specific or broad informed consent may be used or may be **substituted** by an **informed opt-out procedure**.

# Use of Stored specimen in research



# Stored left over biospecimen after clinical diagnosis or treatment (so-called residual tissue) for future research



## Broad consent

- the range of future uses
- the conditions and duration of storage;
- who will manage access to the materials;
- the foreseeable uses of the materials,
- the intended goal of such use, whether only for research, basic or applied, or also for commercial purposes,
- the possibility of unsolicited findings and how they will be dealt with.

- **An informed opt-out procedure** = the material is stored and used for research unless the person from whom it originates explicitly objects
- The informed opt-out procedure has to fulfill the following conditions:
  - 1) patients need to be aware of its existence;
  - 2) sufficient information needs to be provided;
  - 3) patients need to be told that they can withdraw their data; and
  - 4) a genuine possibility to object has to be offered.

# Research ethics committees and biobanks

The protocol must be submitted to a research ethics committee,

- Appropriateness of specific or broad informed consent for future research.
- Necessity for re-consent.
- **Waiver of consent**
  - 1) the research would not be feasible or practicable to carry out without the waiver; and
  - 2) the research has important social value; and
  - 3) the research poses no more than minimal risks to participants when research interventions or procedures offer participants no potential benefits.

# Guideline 22: Use of online information or tools in health-related research

- Some information is **provided directly by users**. For example, users of health apps supply health-related data to these sites or apps.
- Other information is **generated by tracking online behavior**
- Researchers may use online tools or platforms as a way of conducting studies, such as online surveys.
- The veracity of the data can be more difficult to confirm than in research involving face-to-face interaction. For example, **respondents to an online survey may not satisfy the inclusion or exclusion criteria. People can – consciously or unconsciously - pretend to be what they are not.** Therefore, researchers must discuss the validity of their data in their report.

# Consent and ethical review for Internet research

i) **information that is clearly publicly accessible** - researchers only observe and do not interact with human subjects → can use the information without individual informed consent after **accelerated ethical review** or **exemptions** from ethical review – case by case basis

ii) **information that users have provided in a semi-private space**

Service providers must offer authorization mechanism such that users must be explicitly informed about the possibility that research may be done with their information and ideally similar to broad informed consent to research with biological material. Users must give specific permission for such research.

This explicit broad informed consent procedure must be separate from agreeing to the terms of use.

iii) **collect information specifically for research purposes- must undergo ethical review**.

In order to protect confidentiality, survey participants could be advised to adopt a fictional name.

When researchers use online tools to actively recruit participants for their research, a user must receive information on research participation with specific options relevant to his or her situation and informed consent must be sought.

# Use of online information or tools: Consent and ethical review

