International Agency for Research on Cancer

World Health Organization

Scientific Council **SC/51/5**
Fifty-first Session 17/12/2014

Lyon, 28–30 January 2015
Auditorium

BIENNIAL REPORT OF THE IARC ETHICS COMMITTEE, 2013–2014

1. The IARC Ethics Committee (IEC) ensures the protection of the rights and welfare of participants in research carried out or sponsored by IARC, through the consistent application of the highest ethical standards for research involving humans. The Committee is composed of thirteen senior individuals from diverse backgrounds and nationalities (as of November 2014). It meets five times per year to give an ethical evaluation of all IARC projects within its competence. Meetings take place in Lyon with participation by videoconference for members of the Committee who cannot participate in person.

Composition of the IARC Ethics Committee

2. Please see Annex 1 for the composition of the IEC over the reporting period.

3. The departure of some of the longer-serving members of the Committee, notably of Professor Jean-Pierre Boissel who served as IEC Chair from 2010–2013, was balanced by the appointment of new members with expertise in areas complementary to those already present in the Committee, namely in law and bioethics. Two lay members are expected to join the IEC at the start of 2015. Professor Béatrice Fervers was appointed Committee Chair in January 2014, supported by Professor Paolo Vineis as Vice-Chair.

4. Following Ms Susan Haver-Legros' retirement at the end of September 2014, Ms Agnès Meneghel was appointed Secretary to the IEC.

Activities of the Committee

5. During the period 2013–2014, the IEC met 10 times (February, April, June/July, September and November of both years) and evaluated 66 new projects as well as 14 re-submissions of projects previously reviewed by the IEC, including submissions of supplementary information, re-submissions of projects given conditional approval, and/or amendments.

6. Out of the 66 new projects evaluated:

- 56 were cleared after first ethical review;
- 7 were given conditional approval, i.e. Principal Investigators were requested to make specific changes or provide additional information before their projects were given ethical clearance (4 subsequently cleared and 3 currently pending); and
- 3 new projects were not approved and the Principal Investigators were asked to prepare a revision for re-submission (one was subsequently cleared and two are pending).

7. Out of the 14 re-submitted projects:

- 11 were cleared;
- 1 was given conditional approval; and
- 2 projects were not approved.

Request for Periodic Reports

8. All studies must inform the IEC of any ethical concerns arising in the conduct of the study. However, the vast majority of studies conducted or coordinated by IARC consist of observational epidemiological studies where, after approval of the protocol by the ethics committee, the potential for causing harm to study participants or for raising other significant ethical or safety issues is negligible. In order to improve the follow-up of studies requiring monitoring of ethical issues the IEC implemented a policy requiring specific studies to submit annual progress reports. In total five of the 66 newly submitted studies approved over the biennium and four of the re-submitted projects were requested to provide Annual Reports.

9. The Rules and Procedures (RAPs) and the Standard Operating Procedures (SOPs) are currently being updated to better define the requirements and process for periodic reporting to the IEC. In addition, the implementation of a web-based application tool (see "forthcoming perspectives" below) will also improve the follow-up of projects and the submission of Annual Reports.

Discussion on "incidental findings (IFs) in genomic studies"

10. The development of new technologies in the areas of molecular biology, genetics, and bioinformatics and their application to human (and animal) research present new ethical challenges and highlight previously unresolved questions. The ever-increasing speed of these technological changes has, in some cases, largely outpaced the development of guidelines and standards for ethical review. Among these emerging ethical challenges, one of the most difficult is the management of IFs[1] in genomic studies. Following a meeting held at IARC on 28 June 2012, work has been ongoing on the issue of IFs, particularly within the context of human genomic studies using the new exome or whole genome sequencing methodologies. A discussion document on the ethical issues raised by "incidental findings" in genomic studies

[1] Various terms have been proposed for these findings, such as "unrelated" or "unanticipated" findings or "individual genomic results", but "incidental" seems to be the most widely used term.

and the way these issues would be considered by the IEC was prepared and extensively discussed over a number of meetings.

11. From the extensive debate in the literature, a consensus seems to be emerging in favour of a conditional return of information to research participants on clinically relevant and "actionable" IFs. However, there is at present no list, developed from systematic evidence-based reviews, of genomic IFs that satisfy these conditions and which should be returned to participants in research studies. In addition there are no internationally agreed standards or guidelines on the process for managing the return of information on IFs, particularly in a research context. The IEC considers that the conditions are currently not fulfilled for implementing the return of information on IFs in genomic research.

12. The IEC decided to address the ethical and practical issues associated with the management of IFs and to develop a set of draft proposals for dealing with studies where IFs may occur. This activity also served to engage IARC scientists and external collaborators in a consultation on the future implementation of the return of IFs into the design of IARC studies. In developing these draft proposals, the IEC took a pragmatic approach based on the ethical principles of autonomy, justice, beneficence and non-maleficence, guided by the logic and constraints of medical screening and medical responsibility.

13. The IEC agreed during its meeting in November 2014 that the latest version of this draft document would be circulated to IARC scientists for feedback prior to a possible wider circulation. The IEC's position will be revised to take into account the feedback from IARC scientists, the evolution of technology, and developments in ethical and legal standards in this area.

Joint IEC-EPIC Working Group for simplified review of EPIC studies

14. A Joint IEC-EPIC Working Group was established to develop a simplified review process for studies involving only the re-analysis by IARC and/or EPIC scientists of previously collected data and/or already available biomarker information. This simplified and well-defined process would first be applied to EPIC projects and then, if judged satisfactory by both the IEC and the Principal Investigators, as a second step, the IEC would consider extending it to other studies besides EPIC. A meeting was held on 19 November 2014 and, as a first step, it is envisaged to develop a submission template integrating the relevant criteria and an algorithm for decision (whether the project can go through a "fast track approval" or whether it should be sent to the IEC as a "full submission").

Conflicts of interests

15. The ethics review of research involves the consideration of potential "conflicts of interest" referring to situations in which financial or other personal considerations may compromise, or have the appearance to affect the conduct or reporting of research.

16. The IEC previously established a set of procedures for dealing with conflicts of interest of its members. External IEC members must declare any generic potential conflicts of interest by completing a "Declaration of Interests for IARC/WHO Experts" form once a year. In addition members are required to declare any potential conflicts of interest in relation to specific

applications or any matter for consideration at IEC meetings, and are not allowed to participate in their discussion.

17. Dr Rodolfo Saracci, Senior Visiting Scientist at IARC and former Chair of the IARC Ethics Review Committee made a presentation in April 2014 to all IARC personnel on "Conflicts of interest". The presentation centred on raising awareness of the relevance and impact of conflicts of interest, not only in terms of blurring the confidence in the results of scientific investigations but also – and ultimately more importantly – in terms of its implications for public health and clinical practice. Dr Saracci distinguished different levels of conflict of interest as a potential risk, distinct from actual wrongdoing like misconduct or fraud, and outlined some of the key factors and boundaries of what may constitute or not a conflict of interest in health research.

Monitoring of the "ASBEST Study"

18. This study was discussed in 2014 by the Scientific Council (see documents SC/50/12 and SC/50/10).

19. The IEC considered the ASBEST study in several of its meetings in 2014 and noted the assessment and recommendations made by the Scientific Council. The IEC recognized that conducting such a study has inherent risks for IARC in terms of conflicts of interest of study collaborators and of the potential misuse of the Agency's involvement in the study.

20. The IEC welcomed the measures put in place by IARC to ensure the independent oversight of the scientific quality of the study, namely the establishment of a Scientific Advisory Board (SAB), to monitor progress and advise on the conduct of the study. The IEC further recognized the efforts made by IARC to address the issues regarding conflicts of interest and to implement measures to ensure the study's scientific integrity, and recommended they continue to be strengthened.

21. The IEC will continue to monitor the progress of this study and report to the IARC Director on an annual basis.

Training for new IEC members

22. The IEC is exploring possible avenues for providing training on ethical conduct and review of research involving human participants to its members, and possibly also to IARC scientists. Several courses are available, e.g.:

a) WHO course available from: http://elearn.who.int/course/view.php?id=118

b) European Network of research ethics Committees: http://www.eurecnet.org/materials/index.html; http://elearning.trree.org/

c) Tutorial in research ethics, Quebec health ministry: http://ethique.msss.gouv.qc.ca/didacticiel/

d) NHS: http://www.hra.nhs.uk/research-ethics-committee-members/rec-members-training/; http://www.hra.nhs.uk/hra-training/training/

23. The IEC will review the training programmes available to possibly organize an internal training day for IEC members, in the first instance.

IARC Ethics Advisory Group (EAV)

24. The IARC Ethics Advisory Group (EAV) is a small group of international bioethics experts. It has been constituted to provide specialist expertise to the IEC to help resolve complex ethical issues. The members are as follows:

- Professor Sheila McLean, Emeritus Professor of Law and Ethics in Medicine, University of Glasgow;
- Professor Michael Parker, Professor of Bioethics and Director, The Ethox Centre, University of Oxford;
- Dr Rodolfo Saracci, Senior Visiting Scientist at IARC and former Chair of the IARC Ethics Review Committee (1982–2005).

25. The EAV was consulted by the IEC in 2013 to consider the draft document on incidental findings, to provide advice in an area in which ethical standards are still not well defined.

Forthcoming perspectives

26. The recent assessment of the processes involved in managing the work of the IEC, as part of the ongoing work to update the Rules and Procedures (RAPs) and Standard Operating Procedures (SOPs), has highlighted the need for the development of adapted office tools and/or a specifically designed web-based platform to support the submission, processing, review and follow-up of projects, to facilitate and improve the work of the Committee.

27. The IEC and its Secretariat will work with the IT support services at IARC to develop a customized platform for the management of IEC projects, integrated in the new IARC Intranet currently being developed and implemented. This project has been recognized as being of high priority, and the work on the development of the IEC platform will start in early 2015.

ANNEX 1 – Composition of the IEC

	Name	Affiliation	Appointed	End of Term
Past members				
External Members	*Prof. Jean-Pierre Boissel*	*IEC Chair, Emeritus professor of pharmacology, University Claude Bernard Lyon 1, Lyon (France)*	*January 2012*	*December 2013*
	Dr Marc Guerrier	*Ethicist, Haute Autorité de la Santé, Saint Denis La Plaine (France)*	*January 2013*	*November 2014*
	Dr Pierre-Jean Souquet	*Pneumologist, Centre Hospitalier Lyon-Sud (France)*	*January 2013*	*December 2013*
	Mr Yazid Ikdoumi	*Lay member (France)*	*January 2013*	*December 2013*
IARC	*Dr Martyn Plummer*	*Infections and Cancer Epidemiology Group*	*January 2013*	*December 2013*
	Current members			
External Members	Prof. Isaac Adewole	Vice-Chancellor, University of Ibadan (Nigeria)	August 2013	July 2015
	Mr Michel Baduraux	Medical Doctor, previously IARC Staff Physician (France)	June 2014	May 2016
	Dr Safia Bouabdallah	Jurist, Université Jean Monnet, Saint-Etienne (France)	June 2014	May 2016
	Prof. Béatrice Fervers	IEC Chair, Oncologist (France), Centre Léon Bérard – University Claude Bernard Lyon 1, Lyon (France)	January 2010 Chair since January 2014	December 2015
	Prof. Groesbeck Parham	Director of the CIDRZ (Zambia) & Professor of gynecologic oncology, University of North Carolina (USA)	February 2013	January 2015
	Dr Emmanuelle Rial-Sebbag	Ethicist, INSERM, Faculté de Médecine, Toulouse (France)	June 2014	May 2016
	Dr Hans Storm	Epidemiologist, Danish Cancer Society (Denmark)	June 2014	May 2016
	Prof. Paolo Vineis	IEC Vice-Chair, Epidemiologist, Imperial College London (UK)	January 2014	December 2015
WHO	Dr Abha Saxena	Secretariat of the Research Ethics Review Committee	January 2014	December 2015
IARC	Ms Evelyn Bayle	Screening Group	January 2014	December 2015
	Dr Ghislaine Scélo	Genetic Epidemiology Group	September 2012	December 2016
	Dr Eduardo Seleiro	Director's Office	January 2014	December 2015
	Dr Salvatore Vaccarella	Infections and Cancer Epidemiology Group	January 2014	December 2015