International Agency for Research on Cancer

World Health Organization

**Scientific Council** **SC/53/2**
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*Auditorium*

# BIENNIAL REPORT OF THE IARC ETHICS COMMITTEE, 2015–2016

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 international ethical standards for research involving humans. The Committee is composed of eleven senior individuals from diverse backgrounds and nationalities (as of October 2016). 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 attend 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 was balanced by the appointment of new members with expertise in areas complementary to those already represented, namely in oncology, pathology and law. New lay members are expected to join the IEC at the start of 2017. Professor Béatrice Fervers was renewed as Committee Chair in December 2015, assisted by Professor Paolo Vineis as Vice-Chair.

4. Dr Chiara Scoccianti was appointed Secretary to the IEC as from July 2015.

## Activities of the Committee

*Evaluation of research projects*

5. During the period 2015–2016, the IEC met 10 times (February, April, June, September and November of both years) and evaluated 87 new projects as well as 29 re-submissions of projects previously reviewed, including submissions of supplementary information, re-submissions of projects given conditional approval, and/or amendments.

6. Out of the 87 new projects evaluated:

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

7. Out of the 29 re-submitted projects:

- 20 were cleared;
- 8 were given conditional approval; and
- 1 project was not approved.

*Request for Periodic Reports*

8. All IARC PIs must inform the IEC of any ethical concerns arising in the conduct of a 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 limited. 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 over the biennium, ten of the 87 newly submitted studies and two of the 29 re-submitted studies were requested to provide Annual Reports.

*Update of Procedures*

9. The Rules and Procedures (RAPs) and the Standard Operating Procedures (SOPs) have been updated to better define the requirements and process for submitting an application for review to the IEC. In the process, the recently revised 2016 version of the CIOMS International Ethical Guidelines for Biomedical Research Involving Human Subjects have been considered by the Committee.

10. The SOPs have been implemented with three main categories of submission (regular, expedited or notification submissions), to support IARC and non-IARC scientists, facilitate the projects' submission to the IEC, and to ensure the quality of the ethical review. Standardized templates on IEC decisions and comments have been developed accordingly. A simplified procedure for the submission and review of those studies involving the analysis of previously collected data and/or previously measured biomarkers, was implemented. This simplified procedure applies to the European Prospective Investigation into Cancer and Nutrition (EPIC) studies and to similar well-defined large consortium studies proposed by an IARC PI. The procedure was presented to and discussed by the EPIC Steering Committee which took place in Lyon on 7 June 2016, and it is currently used by the Committee.

*Implementation of informatics tools*

11. A Share-Point extranet platform has been implemented by the IEC and its Secretariat for the management of IEC projects. The new tool has improved the submission, processing and review of projects among IEC members and of tracking by the IEC Secretariat.

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

12. 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. A discussion paper on the management of IFs in genomic studies has been extensively discussed over a number of meetings and is now finalized. The paper represents a starting point for discussion and not a position paper from IARC on this matter. 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. 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. The draft has been circulated for feedback to IARC senior scientists, to some members of the IARC Ethics Advisory Group, and to selected nominated external scientists with expertise in bioethics and genomics. The paper is planned for submission to the Journal of Medical Ethics. The full document will be published on the IEC website.

13. The IEC discussed the recommendations made by the Scientific Council in 2015 (see page 3 of document SC/51/14) to extend the ethical framework to manage incidental findings to biomarker studies and will consider this issue after the publication of the above discussion paper.

*Conflicts of interests*

14. The ethics review of research involves 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.

15. 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.

[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.

*Monitoring of the "ASBEST Study"*

16. This study was discussed in 2014 by the Scientific Council (see page 4 of document SC/51/5).

17. The IEC continued to monitor the ASBEST study on an annual basis and noted the assessments and recommendations made by the Scientific Advisory Board (SAB) and by the Scientific Council.

18. The 2015 Annual Report and SAB Report were received in December 2015 and in February 2016, respectively. Both documents were reviewed by the IEC. The IEC acknowledged the effort made by the IARC team to put in place procedures to check the quality of the data and consistency in the cohort enumeration and occupational history. The IEC further acknowledged the progress made in obtaining permission to work with personal information. The IEC agreed with the remarks made by the SAB regarding the ascertainment of vital status and causes of death, smoking status, and the construction of a job-exposure matrix for asbestos exposure.

19. Also, the IEC raised additional issues that pertain to the interpretation of the study findings and avoidance of conflicts of interest and asked the PI to include a diagram explaining the procedures for acquisition, coding and linkage of exposure data and health data, with a clear indication of the role played by each institution. The IEC understands that these elements will be included in the 2017 Annual Report on the Asbest study. The IEC felt important to estimate the proportion of multiple and doubtful matches in the population under study and the way they will be dealt with by the record linkage algorithm.

20. 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 and IARC staff*

21. The IEC explored several possible avenues for providing training to its members on ethical conduct and review of research involving human participants. The following course was selected in consultation with the WHO Research Ethics Review Committee (WHO ERC):

- Global Health Research Ethics Online Training course, adapted from WHO Ethics Training Course for internal staff, available from: https://globalhealthtrainingcentre.tghn.org/elearning/research-ethics/

22. All IEC members obtained the Global Health-WHO certificate on Research Ethics.

23. A general course on biomedical research ethics particularly aimed at Early Career Scientists took place twice at IARC over the biennium.

*Update on international ethics regulations*

24. Given IARC's significant interest both in cancer registration and in biobanking and the implications this policy may have on IARC activities, the IEC discussed the World Medical Association's draft policy document providing principles for the ethical use of data in health databases and of human biological material in biobanks as well as the EU legislation for data sharing/protection for registry-based research.

## IARC Ethics Advisory Group (EAV)

25. The IARC Ethics Advisory Group (EAV) is a small group of international bioethics experts, established 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).

26. The EAV was not consulted by the IEC in 2015. The EAV was consulted in 2016 to consider the draft document on incidental findings (see point 12), to provide advice in an area in which ethical standards are still not well defined.

## Forthcoming perspectives

*Re-evaluation of the European Prospective Investigation into Cancer and Nutrition (EPIC) cohort*

27. The initial ethical approval of the EPIC cohort was given by IARC in 1995 and its overall re-evaluation by the IEC was judged necessary both due to the implementation of the new simplified review procedures described above and to support the ethics approval at the EPIC centres' level. The cohort has evolved significantly in terms of the number of study participants recruited and the corresponding prospectively collected lifestyle data and blood specimens, the number of incident cancer cases, and of research activities (e.g. on biomarkers of early detection and genetic predisposition). A list of key documents to be re-evaluated has been agreed together with the EPIC Steering Committee and includes an English version of the leaflet for participants, examples of research protocols representative of recent activities, and templates of follow-up questionnaire and of Informed Consent form. The collection of the above documents have been completed and the IEC plans to re-evaluate the EPIC cohort in the beginning of 2017.

*Implementation of informatics tools and templates*

28. A customized questionnaire for the submission of IEC projects will be developed in collaboration with the WHO ERC and the IARC IT support services. This questionnaire will be embedded into the newly developed Share-Point platform for a more efficient collection and review of submitted projects.

29. The newly developed Share-Point platform will be further implemented based on the ProEthos PAHO Database in use by the WHO ERC.

30. The IEC platform and website will be implemented respectively with guidance to IEC members for project evaluation and frequently asked questions, and templates of key ethics documents (e.g. informed consent forms).

*Ongoing ethics training activities*

31. A seminar on the updated IEC Procedures will be given by the IEC Secretariat to IARC Staff on 9 January 2017.

32. A joint WHO-IARC workshop on the updated International Ethical Guidelines for Health-related Research involving Humans developed by the Council for International Organizations of Medical Sciences (CIOMS 2016), will be organized in collaboration with WHO ERC.

33. An ethics training course for IEC members on Good Clinical Practice will be selected in consultation with WHO ERC.

ANNEX 1 – Composition of the IEC

| | Name | Affiliation | Appointed | End of Term |
|---|---|---|---|---|
| **Past members** | | | | |
| External Members | *Professor Isaac Adewole* | *Vice-Chancellor, University of Ibadan (Nigeria)* | *August 2013* | *July 2015* |
| | *Dr Safia Bouabdallah* | *Jurist, Université Jean Monnet, Saint-Etienne (France)* | *June 2014* | *May 2016* |
| | *Dr Marie-Pierre Grosset* | *Mathematician, Lyon (France)* | *December 2014* | *October 2015* |
| | *Dr Emmanuelle Rial-Sebbag* | *Ethicist, INSERM, Faculté de Médecine, Toulouse (France)* | *June 2014* | *May 2016* |
| IARC | *Ms Evelyn Bayle* | *Screening Group* | *January 2010* | *December 2015* |
| | *Dr Eduardo Seleiro* | *Director's Office* | *February 2011* | *December 2015* |
| **Current members** | | | | |
| External Members | Dr Samar Al-Homoud | Surgeon, King Faisal Specialist Hospital and Research Center, Riyadh (Saudi Arabia) | September 2015 | September 2017 |
| | Dr Denis Azoulay | Dentist, Brindas (France) | December 2014 | December 2016 |
| | Dr Michel Baduraux | Medical Doctor, previously IARC Staff Physician, Annecy (France) | June 2014 | May 2018 |
| | Professor Béatrice Fervers | IEC Chair, Oncologist (France), Centre Léon Bérard – University Claude Bernard Lyon 1, Lyon (France) | January 2010, Chair since January 2014 | December 2017 |
| | Dr Hans Storm | Epidemiologist, Danish Cancer Society (Denmark) | June 2014 | May 2018 |
| | Professor Paolo Vineis | IEC Vice-Chair, Epidemiologist, Imperial College London (UK) | January 2010 | December 2017 |
| | Dr Beatrice Wiafe Addai | Surgeon, Peace and Love Hospitals Breast Care International, Kumasi (Ghana) | September 2015 | September 2017 |
| WHO | Dr Abha Saxena | Secretariat of the Research Ethics Review Committee | January 2010 | December 2017 |
| IARC | Dr Behnoush Abedi-Ardekani | Genetic Cancer Susceptibility Group | January 2016 | January 2018 |
| | Dr Ghislaine Scélo | Genetic Epidemiology Group | September 2012 | December 2016 |
| | Dr Salvatore Vaccarella | Infections and Cancer Epidemiology Group | January 2014 | December 2017 |