

# Mock IRB

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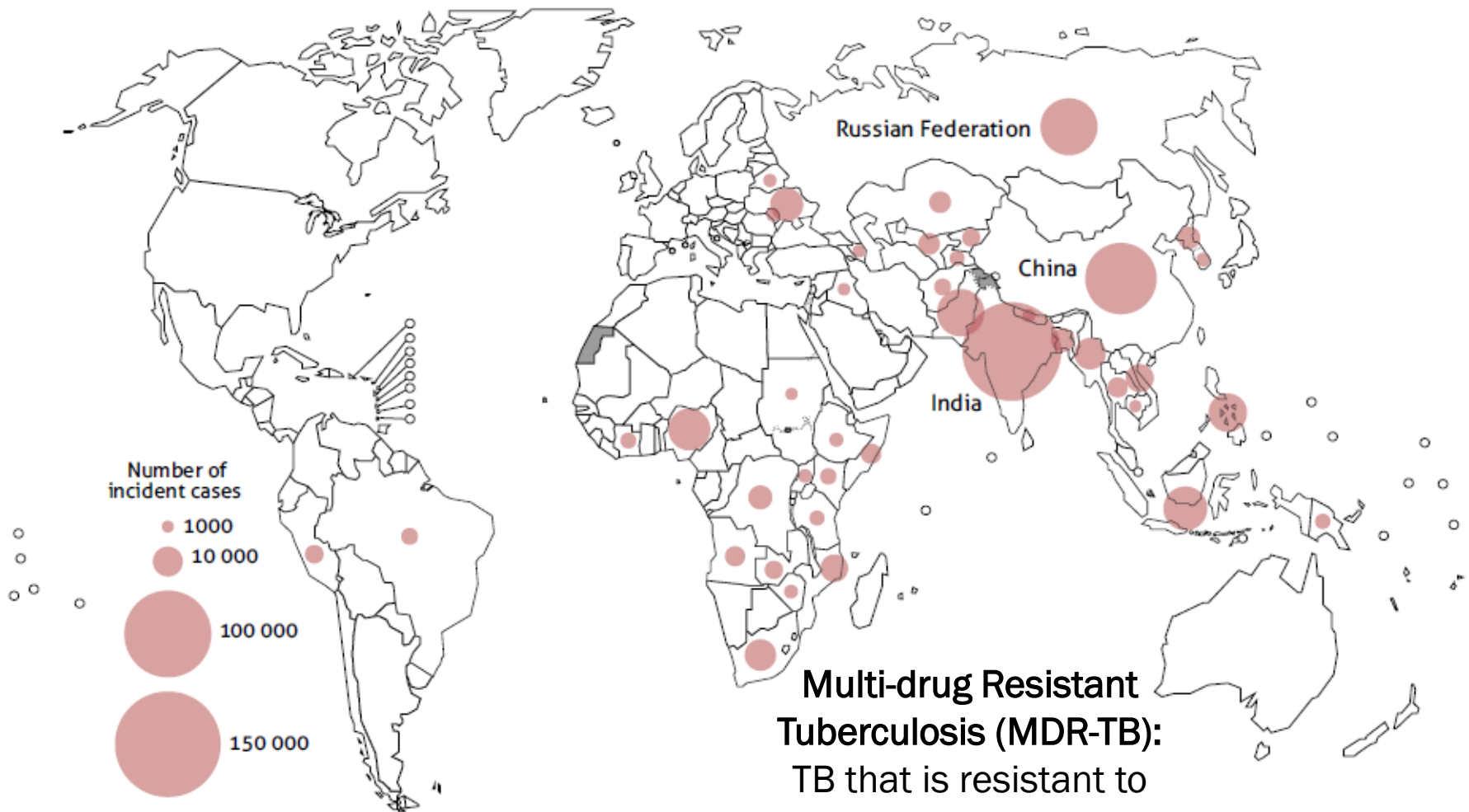
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# Disclaimer

The views expressed in this talk are ours.  
They do not represent the position or policy  
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## Estimated incidence of MDR/RR-TB<sup>a</sup> in 2018, for countries with at least 1000 incident cases



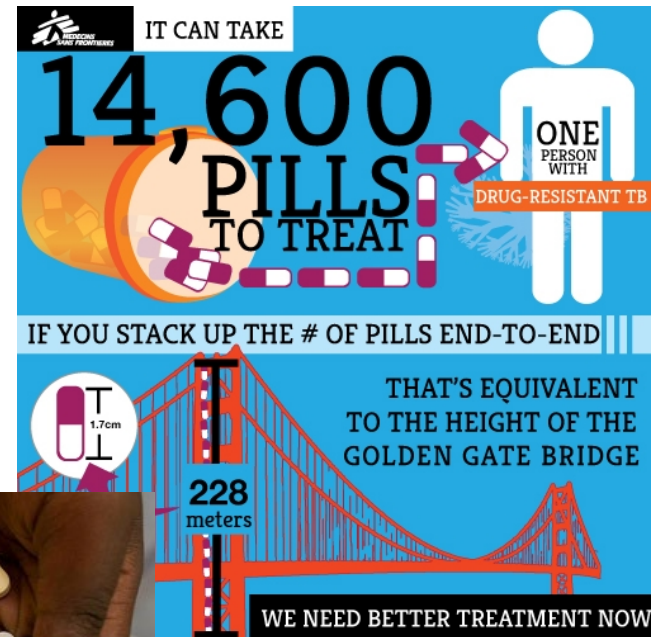
**Multi-drug Resistant Tuberculosis (MDR-TB):**  
TB that is resistant to the two most potent drugs against TB.

<sup>a</sup> MDR-TB is a subset of RR-TB.

Source: WHO Global TB Report (2018)

# Standard-of-Care

- Key aspects of MDR TB Treatment
  - Up to 20 months in length
  - Directly observed
  - Many pills (up to 20/dose)
    - Side effects
  - Pain of injections



# STREAM

- International, multi-site, parallel group, open label, randomized controlled trial
  - A: Standard local treatment (WHO approved)
  - B: 40 weeks (kanamycin by injection for 16 weeks)
  - C: 40 weeks (all oral)
  - D: 28 weeks (kanamycin by injection for 8 weeks)

# STREAM

- Primary objective of Stage 1: Is Regimen B non-inferior to Regimen A
  - Document health system and patient cost
- Primary objectives of Stage 2:
  - Superiority of C over B (FDA)
  - C is not inferior to B
  - D is not inferior to B

# Categories of Research

- Not Human Subject Research
- Exempt from IRB Review
- Expedited Review
  - No more than minimal risk
- Full Committee Review
  - More than minimal risk

# Review Process

- Initial Review
  - Research plan
  - Consent documents
  - Advertisements



# Review Process

- Assignment
  - Primary
  - Primary/Secondary
  - Subcommittee

# Review Process

- Deliberation
- Decision
  - Approve
  - Approve with stipulations
  - Defer
  - Disapprove

# IRB Review Criteria

- Risks minimized
- Risks reasonable when compared with anticipated benefit
- Selection of subjects equitable
- Informed consent will be sought
- Informed consent will be documented
- Safety monitoring provision
- *Adequate provisions re: Privacy/Confidentiality*

46 CFR § 46.111