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National Agency for Food & Drug Administration & Control (NAFDAC)Drug Evaluation & Research (DER) Directorate

GUIDELINES FOR CONDUCT OF CLINICAL TRIALS DURING EMERGENCIES 2024

TABLE OF CONTENTS

1.0 INTRODUCTION

Infectious disease outbreaks are periods of great uncertainty. Events unfold, resources and capacities that are often limited are stretched yet further, and decisions for a public health response must be made quickly, even though the evidence for decision making may be scanty.

It is therefore paramount that national governments including both the regulatory authority and ethics committee (with the assistance of WHO) be prepared at any time to respond to such challenges especially in the way regulatory requirements for the conduct of clinical trials are interpreted and practically applied.

Many of such disease outbreaks are without proven and safe interventions, therefore leaving the governments and international community with no option than to look for any alternative method to curtail the effect of the disease.

With the lessons learned from the Ebola Virus Disease outbreaks, it became necessary for WHO, policy makers, national regulatory authorities, ethics committee, public health officials' funders, health-care workers and public health practitioners to come together to find ways to deal with similar situation in future. Therefore. the idea of ***emergency use of unapproved medical products*** evolved which involve the use of an investigational product in a human subject in a life-threatening or severely debilitating medical situation in which no standard acceptable treatment is available and in which there is not sufficient time to obtain IRB approval prior to use.

Such studies, raise difficult ethical, scientific, and practical questions particularly in a context characterized by poverty, vulnerability, and limited infrastructure.

Questions including the following were asked during the outbreak:

1. Do the usual regulatory requirements apply or abridged requirements should be implemented? Which clinical trials should be prioritized?
2. Is it ethical to conduct a trial when the population is already facing a disaster?
3. Can the investigational product be made available to the general population in the absence of adequate clinical data?
4. How will data collected under such circumstances impact on "regular "trials?

If these questions are not properly addressed, conducting a trial in an emergency situation

may continue to be challenging and may even be impossible

This Guideline will thus provide an opportunity to carry out ethical, safe and scientifically sound clinical trials of promising new treatments, diagnostics and vaccines in the midst of an emergency. The Guideline also seeks to provide better transparency on regulatory procedures to gather sound evidence for product safety and effectiveness in a timely manner.

2.0 SCOPE

This Guideline is to provide requirements for the conduct of clinical trials during public health emergencies.

3.0 GLOSSARY

3.1 ***AVAREF*****:** African Vaccine Regulatory Forum

3.2 eCTAP: electronic Clinical Application Platform- The Agency's electronic portal for submission of Clinical trial applications and other related documents.

3.3 ***Emergency*** - An outbreak of a disease with high mortality and which involves significant numbers of individuals and which may have a danger of international transmission.

3.4 ***Epidemic*** - The occurrence in a community or a region of cases of an illness, specific health-related behavior or other health-related events clearly in excess of normal expectancy.

Expedited review - Is a process designed to facilitate the development, and expedite the review of clinical trial applications for the conduct of clinical trials during emergencies.

3.5 ***Joint Review*** - This process involves a joint assessment of the application by the Authorities with the relevant IRBs and other receiving national drug regulatory agencies.

3.6 ***Pandemic*** - An emergency occurring worldwide or over a wide area crossing international boundaries and affecting a large number of people.

3.7 ***NAFDAC*** - National Agency for Food and Drug Administration and Control.

3.8 ***WHO*** - World Health Organization

4.0 GENERALCONSIDERATIONS

4.1 Considerations of clinical trial applications under these circumstances shall be in relation to the under listed existing Guidelines for the conduct of clinical trials in Nigeria:

4.1.1 Clinical Trial Application Guidelines

4.1.2 Good Clinical Practice Guidelines

4.1.3 Guidelines for Conduct of Clinical Trials in Paediatric Populations

4.1.4 Guidelines for importation and release of Investigational Medicinal Products (IMPs)

4.2 The Role of the National Agency for Food and Drug Administration and Control (NAFDAC) (subsequently referred to as Agency):

4.2.1 The Agency shall facilitate the processing and approval of clinical trials during public health emergencies

4.2.2 The Agency may also request for the conduct of clinical trials during public health emergencies.

4.3 The Agency shall require that the Sponsor ensures the under listed:

4.3.1 An appropriate memorandum of understanding regarding consultations and further actions shall be agreed upon and signed by all parties involved.

4.3.2 The memorandum of understanding shall be binding on all parties involved.

4.3.3 Acceptable amendments to the memorandum of understanding shall be discussed during development of the memorandum of understanding.

4.4 An application to provide investigational product being used in a clinical trial under emergency conditions to non-trial participants shall receive prior approval from the Agency.

4.5 Such application shall be in the format as prescribed in the Agency's Clinical Trial Application Form (as it is on the eCTAP).

5.0 ETHICAL CONSIDERATIONS

All the necessary ethical approvals shall be obtained for the study.

6.0 FILING AN APPLICATION

6.1 Requirements for filing a clinical trial application during an emergency shall be same as required under the Agency's Documentation Guidelines for Clinical Trials in Nigeria.

6.2 The timelines for processing such applications shall however be shortened to 15 work days for new Investigational Medicinal Products and 10 workdays for re-use of already existing medicinal products.

6.3 The Sponsor as part of the application may request a joint review of the application.

6.4 Such applications shall be considered by the Agency on a case-by-case basis.

6.5 Applications for the joint review process shall be submitted at least 14 work days beforethe proposed date of the joint review.

7.0 APPLICATION FORMAT

7.1 The format and content of an application for the conduct of a clinical trial in emergencies shall be as stipulated in Documentation Guidelines for Clinical Trials in Nigeria.

7.2 The Agency shall however, prescribe other relevant information to be provided considering the phase and nature of the intended trial.

7.3 Note that applications are to be submitted through the NAFDAC electronic Clinical Trial Application Platform (eCTAP).

8.0 PROCESSING OF APPLICATIONS

8.1 The Agency shall upon receipt of an application liaise with relevant stakeholders (including relevant ethics and other oversight bodies) to draw an appropriate plan to facilitate a holistic review of an application in a fast-track manner.

8.2 The under listed criteria shall be applied in the emergency clinical trial applications for review;

8.2.1 Epidemiology of the Disease seen as emergency.

8.2.2 Morbidity / mortality associated with the emergency and/or condition understudy.

8.2.3 Supporting scientific data/information available of the investigational product at the time of submission.

8.2.4 Feasibility of the implementation of the trial design within the context of the emergency.

8.2.5 Risk: Benefit impact of the intervention and/or trial design.

8.3 Upon conclusion of a review the Agency shall communicate its decision on the Application to the Applicant.

8.4 The decision of the Agency may be any of the underlisted:

8.4.1 Approved.

8.4.2 Deferred (and Compliance Directives issued) pending submission of further details that shall be specified.

8.4.3 Rejected; implying non-approval.

8.4.3.1 Applicant can request for a redress upon receipt of a rejection and can appeal such rejection outcome if there are adequate additional justification for the Agency to accept same

8.4.3.2 The applicant may address the letter to the Director-General through the Director , Drug Evaluation and Research Directorate for the appeal stating reason(s) with attached evidence as additional data etc. to implore the Agency's consideration. This shall not be more than 21 work days upon receipt of the initial review outcome otherwise such application shall be considered as a new application with a new payment as stipulated in the Agency's tariff.

9.0 REPORTING

9.1 Reporting on the conduct of the trial shall conform to provisions under NAFDAC Good Clinical Practice Guidelines

9.2 Monthly reports shall however be submitted to the Authority in the prescribed format.

10.0 COMMUNICATION

10.1 The Sponsor shall develop a communication plan

10.2 Any communication plan developed shall receive prior opinion from the Agency before implementation.

10.3 The communication plan and related information, educative and communication material shall be developed based on the principle of trust, transparency, rapid communication and adequate dialogue.

10.4 A communication plan shall consist of at least;

10.4.1 Background and environmental analysis

10.4.2 Goals and objectives

10.4.3 The communication team

10.4.4 Identification of key stakeholders

10.4.5 Strategy for ongoing communication with stakeholders

10.4.6 Strategy for managing controversy—crisis communications

10.4.7 Dissemination plan for trial results

10.4.8 Materials to support the trial

10.4.9 Monitoring and evaluation

10.5 Any communication plan proposed shall be implemented through broad-based programs to engage all relevant key stakeholders.

10.6 Information to be provided shall also be in local languages and shall be targeted not only to trial participants but also to key stakeholders, including local officials, medical professionals, the media, traditional leaders, Ministry of Health and others.

10.6.1 Information provided shall include at least;

10.6.1.1 Awareness about the emergency.

10.6.1.2 Awareness about existing supporting system.

10.6.1.3 Awareness about the general objective and intended impact of the proposed study.

10.6.1.4 Shall seek to secure public / civil society support for the trial.

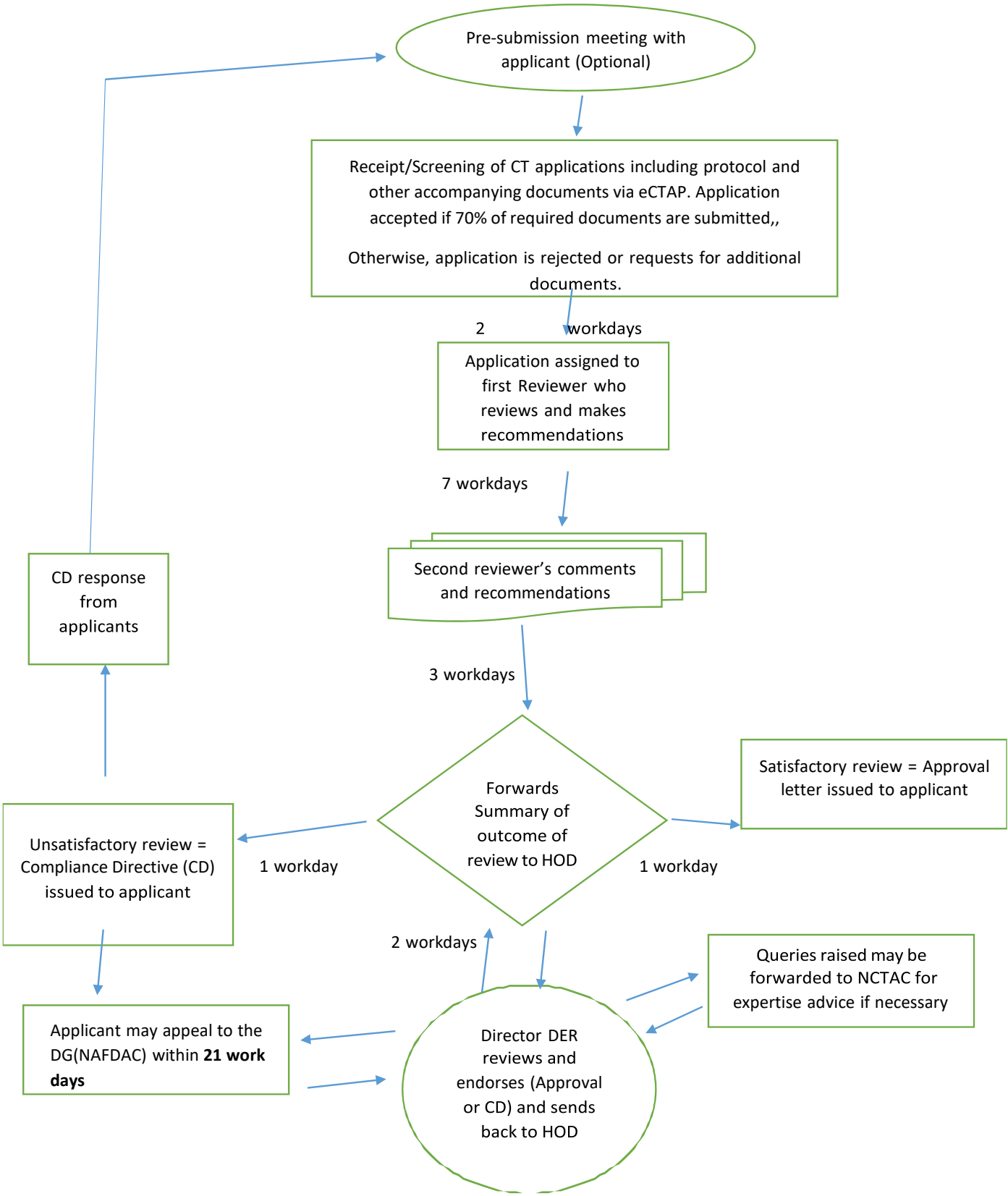
10.6.1.5 Mechanisms and channels available to the public to provide feedback on the trial.

10.6.1.6 Mechanisms and channels to be used to provide further information on the trial to stakeholders including international bodies.

10.6.1.7 Information, education and communication materials to be used shall receive the appropriate IRB/IEC approval.

10.6.1.8 The Sponsor shall ensure that information flow mechanisms are developed between investigators and participating communities; and that community are adequately educated on all relevant aspects of trial before recruitment begins.

EMERGENCY CLINICAL TRIAL APPLICATION (CTA) PROCESS FLOW CHART WITH TIMELINES



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