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# CIOMS Research Guidelines: Considering the Needs of Developing Countries

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Webinar  
December 6, 2023

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Council for  
International  
Organizations of  
Medical  
Sciences



Founded in 1949 by WHO and UNESCO

In official relations with WHO

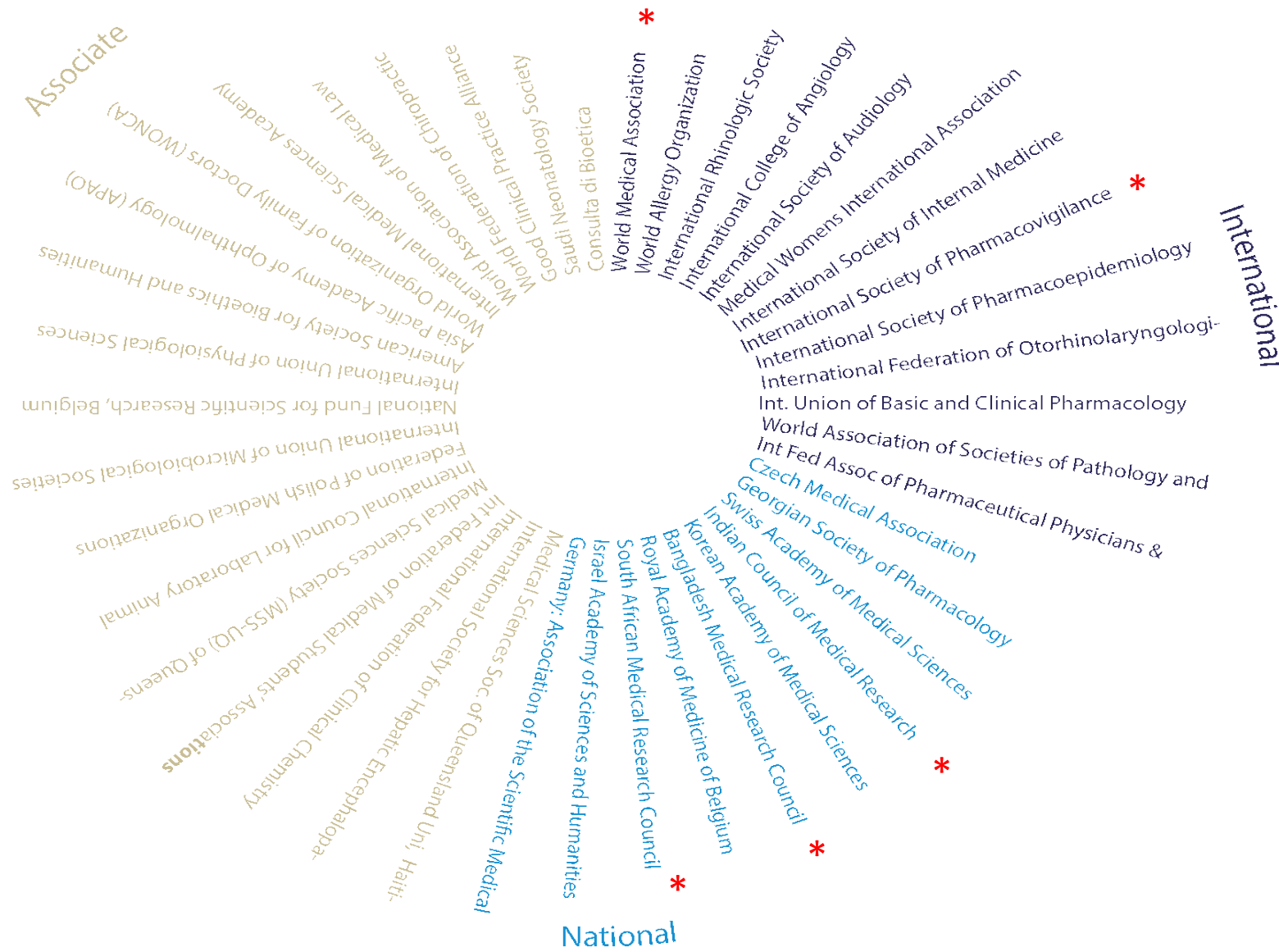
UNESCO associated partner

ICH Observer since 2016

#### Mission Statement

CIOMS mission is to advance public health through guidance on health research including ethics, medical product development and safety

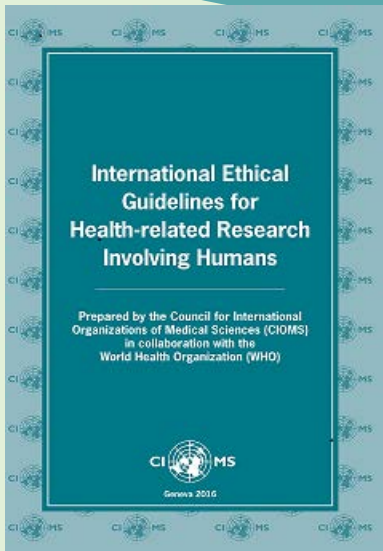
# CIOMS membership



2023 - European Network of Research Ethics Committees (EUREC) joined CIOMS

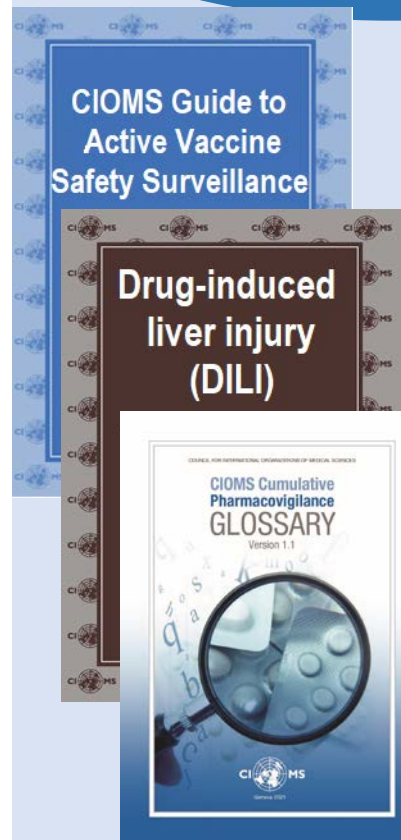
- In the mid-1960s, the world went through some huge political and technological developments. At the same time, biomedical scientific and technological advances were transforming the practice and potential of medicine, with unprecedented social, cultural and ethical implications.
- In 1977 the World Health Assembly adopted the goal of health for all. This asserted the need for health policy to be informed by ethics and human values, indicating the field in which CIOMS could best complement the work of WHO.
- A particular aspect of biomedical technology—*the development and safe use of medicines*—became another dominant theme of CIOMS. Since the 1990s most of CIOMS working groups have focused on various aspects of pharmacovigilance without abandoning research ethics and other topics of product development

## Bioethics



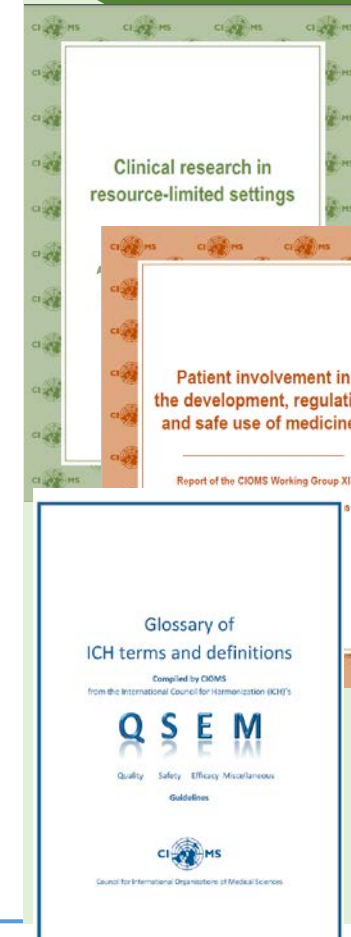
- Since 1967; 1st CIOMS Round Table Conference ‘Biomedical Science and the dilemma of Human Experimentation’
- Issued significant guidelines
  - Latest revision 2016
  - Focus on ‘low -and middle- income countries’
  - Available in 10 languages, e.g. Chinese, Spanish, Japanese, Russian

## Pharmacovigilance



- 1986: first PV Working Group
- 13 more working group reports to date
- Several ICH Guidelines are based on results of CIOMS Working Groups
- Cumulative Glossary 2021

## Product development

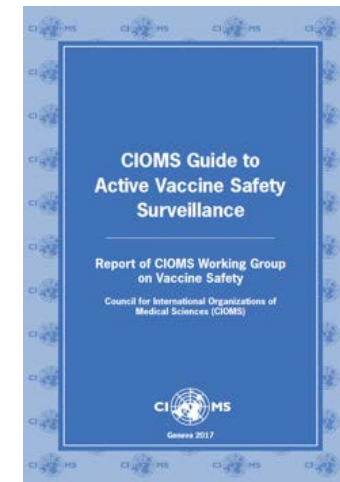
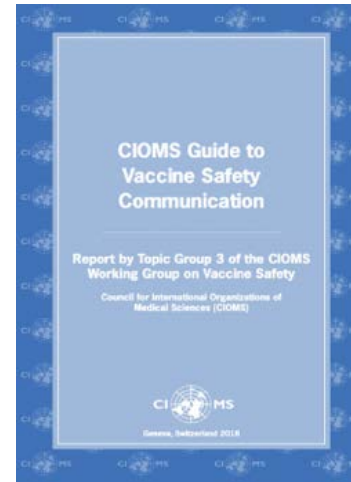
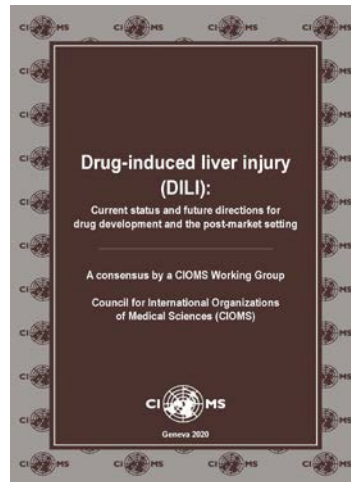


- Since 1977 CIOMS Round Table Conference, ‘Trends and Prospects in Drug Research and Development’ ....
- 2021: Clinical Research in Resource-Limited Settings, CIOMS Working Group report
- 2022: Patient Involvement ... WG XI
- 2022: Glossary of ICH terms and definitions

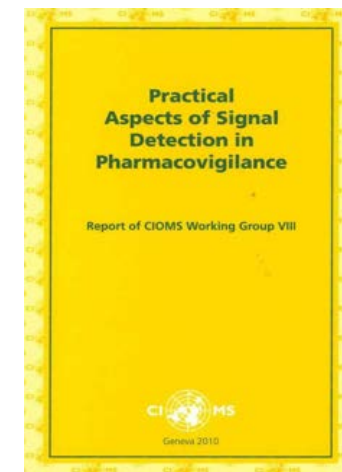
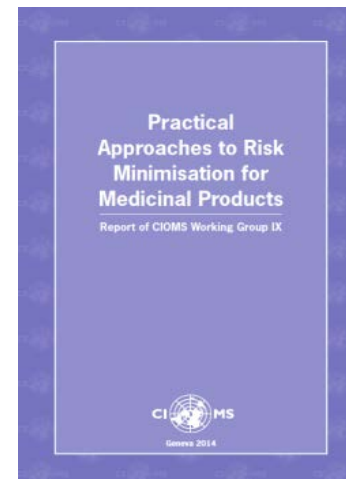
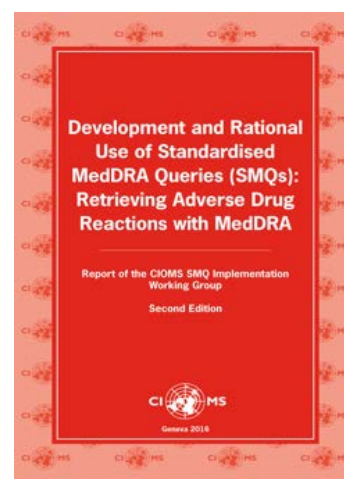
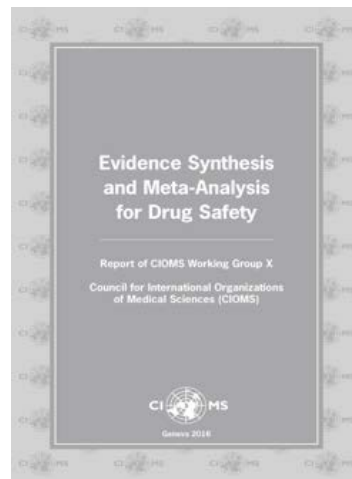
# CIOMS Recent Pharmacovigilance related Publications



<https://cioms.ch/publications/>



Chinese translation was made available in 2018



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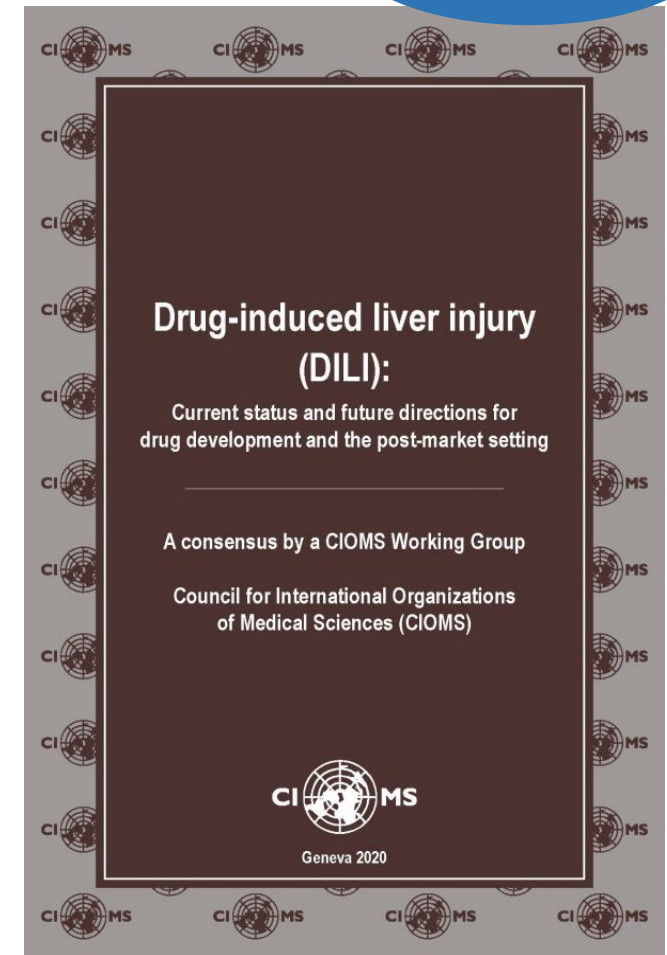
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## SUPPLEMENTAL APPENDICES

Online only – freely available on the CIOMS website at:  
<https://cioms.ch/publications/product/drug-induced-liver-injury/>

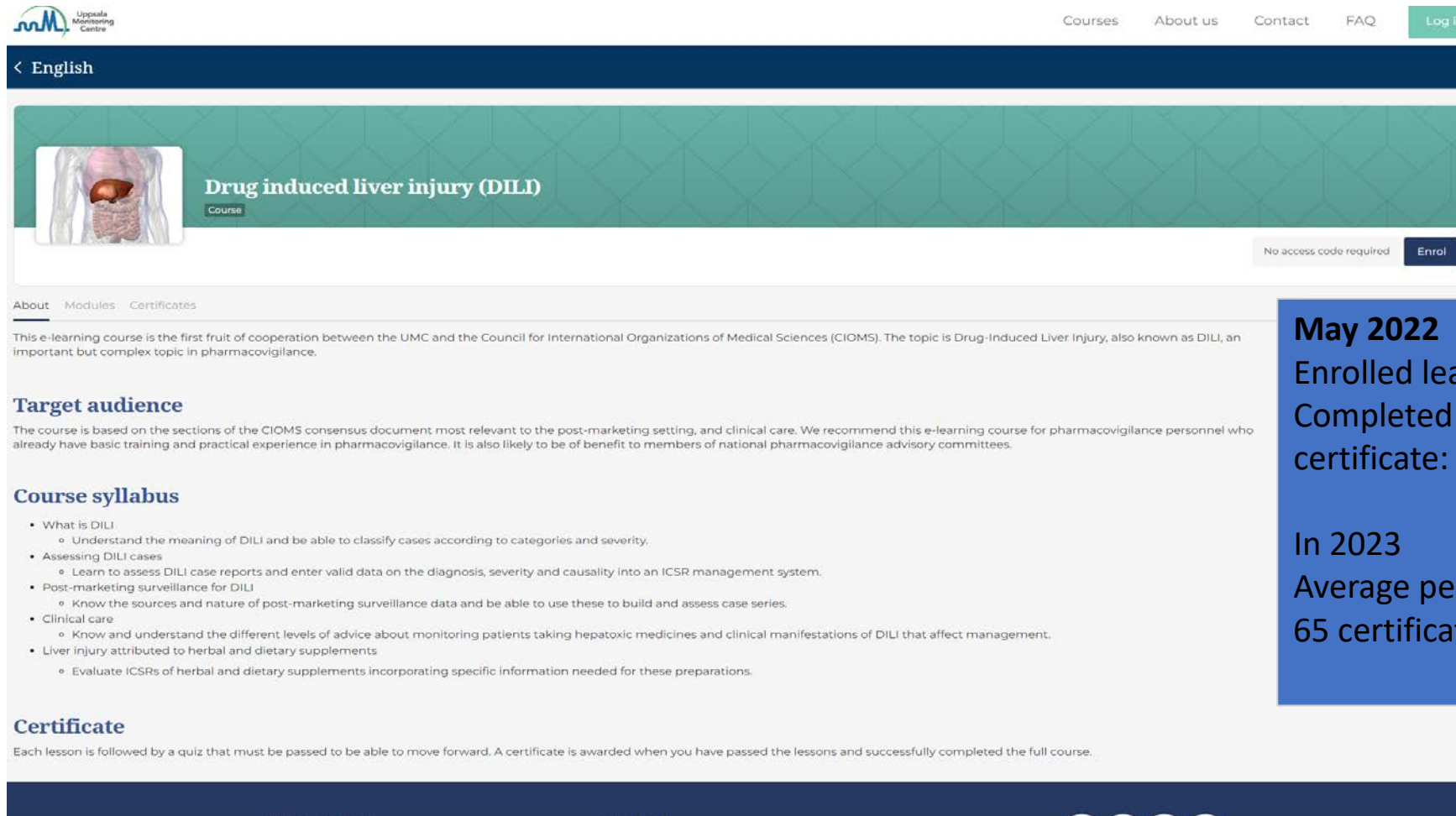
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APPENDIX 7	DILI registries and epidemiological studies
APPENDIX 8	Information on DILI risks shown in product information of selected drug classes Anti-cancer drugs Tuberculosis chemotherapies Antiretrovirals
APPENDIX 9	Differences in label safety information on hepatotoxicity: Two examples
APPENDIX 10	Example of a causality assessment process for HDS-induced liver injury: the algorithm used in China
APPENDIX 11	Post-publication updates



<https://doi.org/10.56759/ojs8296>

# New training online courses

- Joint CIOMS/Uppsala Monitoring Centre (UMC) training modules based on CIOMS DILI WG report (started 2021, finalized April 2022)



The screenshot shows the course page for 'Drug induced liver injury (DILI)'. At the top, there is a navigation bar with links for 'Courses', 'About us', 'Contact', 'FAQ', and a 'Log in' button. Below the navigation bar, there is a language selector set to 'English'. The main header features a green background with a grid pattern and an image of a human torso with the liver highlighted. The title 'Drug induced liver injury (DILI)' is prominently displayed, with 'Course' written below it. A button labeled 'Enrol' is visible, with the text 'No access code required' next to it. Below the header, there are sections for 'About', 'Modules', and 'Certificates'. The 'About' section contains a paragraph: 'This e-learning course is the first fruit of cooperation between the UMC and the Council for International Organizations of Medical Sciences (CIOMS). The topic is Drug-Induced Liver Injury, also known as DILI, an important but complex topic in pharmacovigilance.' The 'Target audience' section states: 'The course is based on the sections of the CIOMS consensus document most relevant to the post-marketing setting, and clinical care. We recommend this e-learning course for pharmacovigilance personnel who already have basic training and practical experience in pharmacovigilance. It is also likely to be of benefit to members of national pharmacovigilance advisory committees.' The 'Course syllabus' section lists several topics: 'What is DILI' (with a sub-point: 'Understand the meaning of DILI and be able to classify cases according to categories and severity'), 'Assessing DILI cases' (with a sub-point: 'Learn to assess DILI case reports and enter valid data on the diagnosis, severity and causality into an ICSR management system.'), 'Post-marketing surveillance for DILI' (with a sub-point: 'Know the sources and nature of post-marketing surveillance data and be able to use these to build and assess case series.'), 'Clinical care' (with a sub-point: 'Know and understand the different levels of advice about monitoring patients taking hepatotoxic medicines and clinical manifestations of DILI that affect management.'), and 'Liver injury attributed to herbal and dietary supplements' (with a sub-point: 'Evaluate ICSRs of herbal and dietary supplements incorporating specific information needed for these preparations.'). The 'Certificate' section states: 'Each lesson is followed by a quiz that must be passed to be able to move forward. A certificate is awarded when you have passed the lessons and successfully completed the full course.'

**May 2022**

Enrolled learners: 270

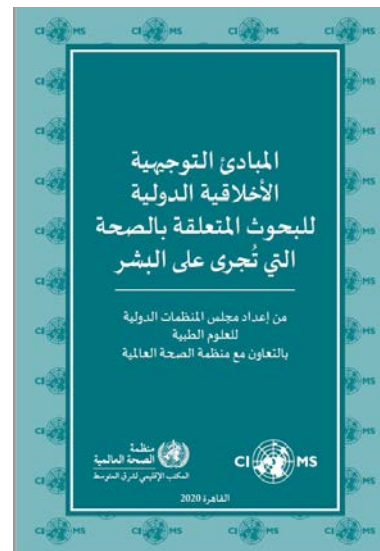
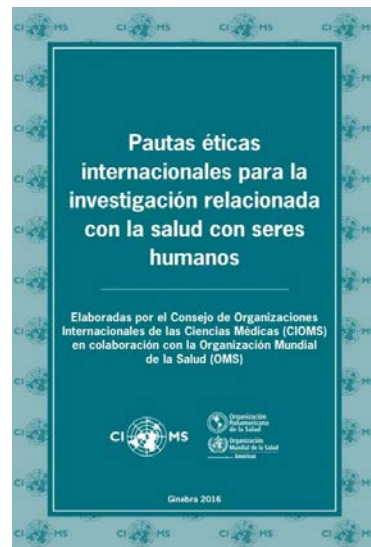
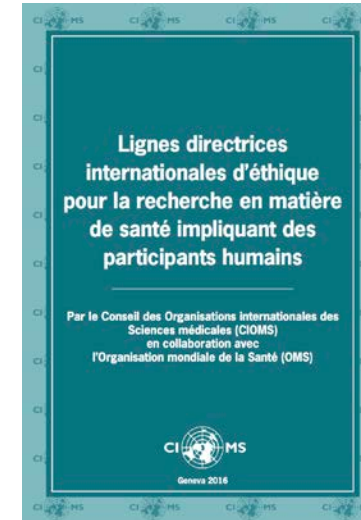
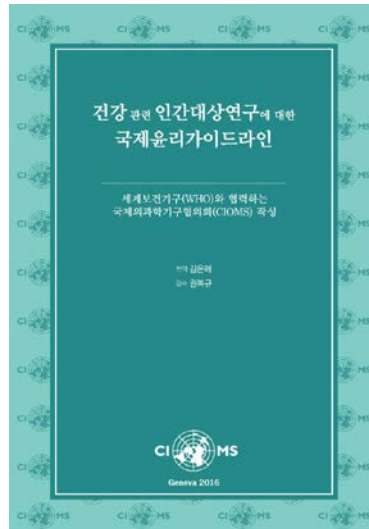
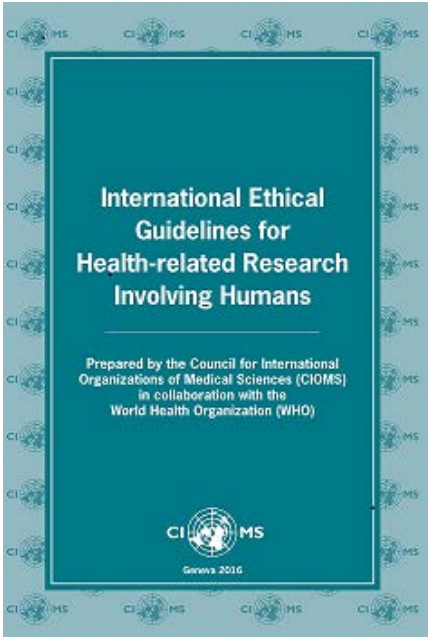
Completed the course and received a certificate: 130

**In 2023**

Average per month enrolled learners 130, and 65 certificate

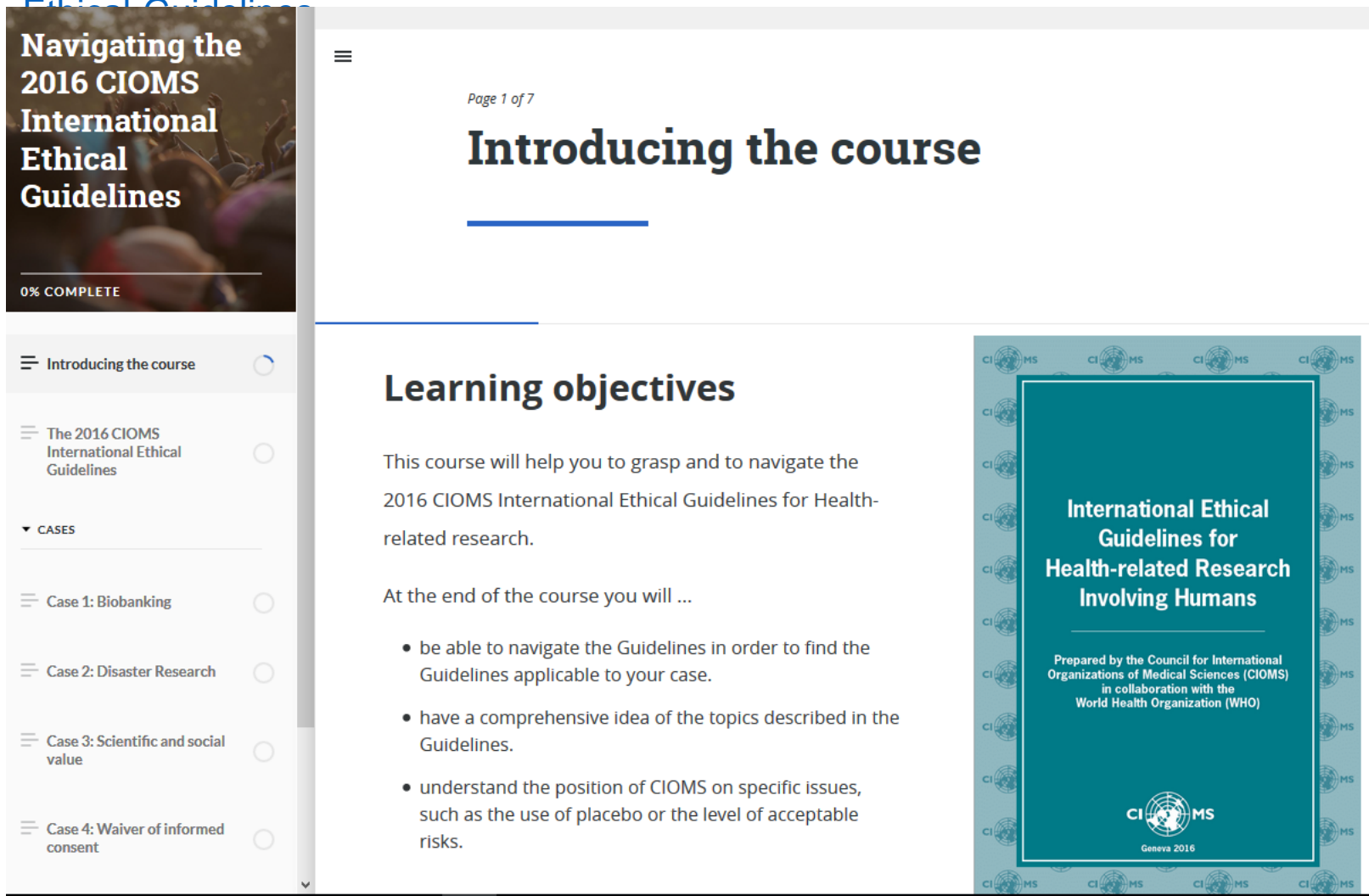


# CIOMS latest, 2016 Ethical Guidelines - In all 6 UN languages + Japanese, Korean, Polish, Portuguese, Ukrainian ...



- 
- |   |  |  |
|---|--|--|
| 1 – Scientific and social value and respect for rights  | 10 – Modifications and waivers of informed consent                               | 18 – Women as research participants                              |
| 2 – Research conducted in low-resource settings   | 11 – Collection, storage and use of biological materials and related data        | 19 – Pregnant women and lactating women as research participants |
| 3 – Equitable distribution of benefits and burdens in the selection of groups of participants | 12 – Collection, storage and use of data in health-related research              | 20 – Research in disasters and disease outbreaks                 |
| 4 – Potential benefits and risks of research  | 13 – Reimbursement and compensation for research participants                    | 21 – Cluster randomized trials                                   |
| 5 – Choice of control in clinical trials  | 14 – Treatment and compensation for research-related harms                       | 22 – Use of online environment and digital tools                 |
| 6 – Caring for participants' health needs   | 15 – Research involving vulnerable persons                                       | 23 – Research ethics committees and review                       |
| 7 – Community engagement  | 16 – Research involving individuals who are incapable of giving informed consent | 24 – Public accountability                                       |
| 8 – Collaborative partnership and capacity building   | 17 – Research involving children and adolescents                                 | 25 – Conflicts of interest                                       |
| 9 – Individual informed consent   |  |  |
-

<https://cioms.blendleren.nl/Navigating-the-2016-CIOMS-International-Ethical-Guidelines>



The screenshot shows a web-based e-training course interface. On the left is a navigation sidebar with a progress indicator for '0% COMPLETE' and a list of course sections: 'Introducing the course', 'The 2016 CIOMS International Ethical Guidelines', and 'CASES' (including Case 1: Biobanking, Case 2: Disaster Research, Case 3: Scientific and social value, and Case 4: Waiver of informed consent). The main content area displays 'Page 1 of 7' and the title 'Introducing the course'. Below this is the 'Learning objectives' section, which states the course's purpose and lists three objectives. On the right side of the main content area is a cover image for the 'International Ethical Guidelines for Health-related Research Involving Humans', prepared by the Council for International Organizations of Medical Sciences (CIOMS) in collaboration with the World Health Organization (WHO) in Geneva 2016.

## Navigating the 2016 CIOMS International Ethical Guidelines

0% COMPLETE

- Introducing the course
- The 2016 CIOMS International Ethical Guidelines
- CASES
  - Case 1: Biobanking
  - Case 2: Disaster Research
  - Case 3: Scientific and social value
  - Case 4: Waiver of informed consent

Page 1 of 7

## Introducing the course

### Learning objectives

This course will help you to grasp and to navigate the 2016 CIOMS International Ethical Guidelines for Health-related research.

At the end of the course you will ...

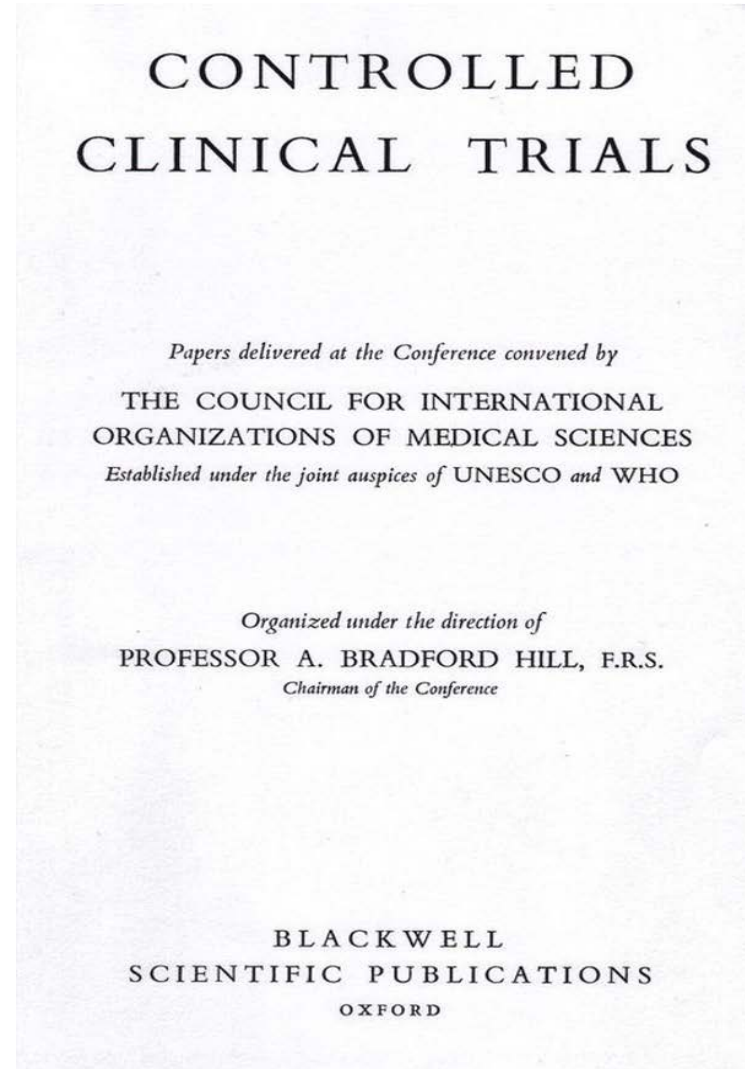
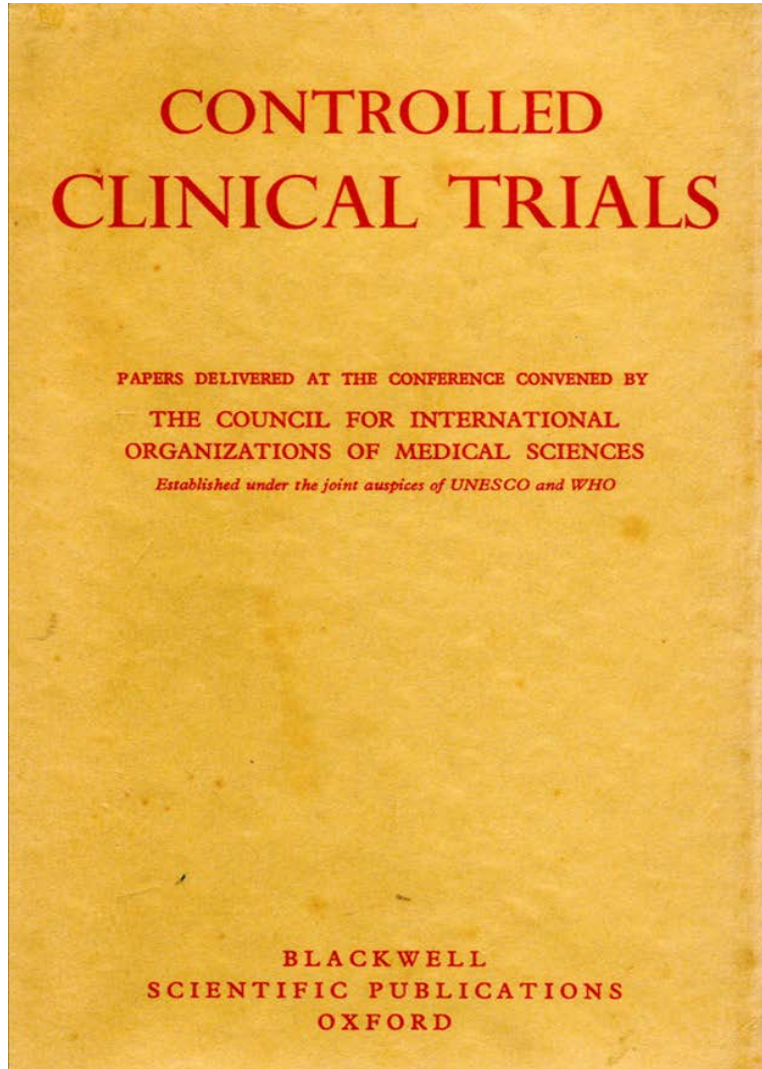
- be able to navigate the Guidelines in order to find the Guidelines applicable to your case.
- have a comprehensive idea of the topics described in the Guidelines.
- understand the position of CIOMS on specific issues, such as the use of placebo or the level of acceptable risks.

**International Ethical Guidelines for Health-related Research Involving Humans**

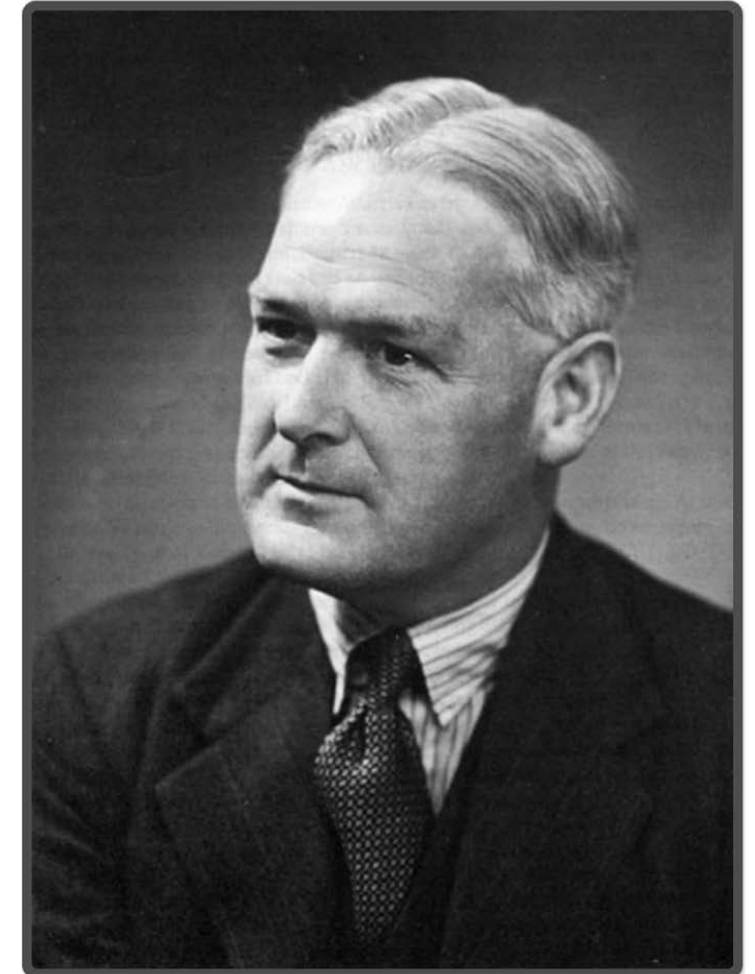
Prepared by the Council for International Organizations of Medical Sciences (CIOMS) in collaboration with the World Health Organization (WHO)

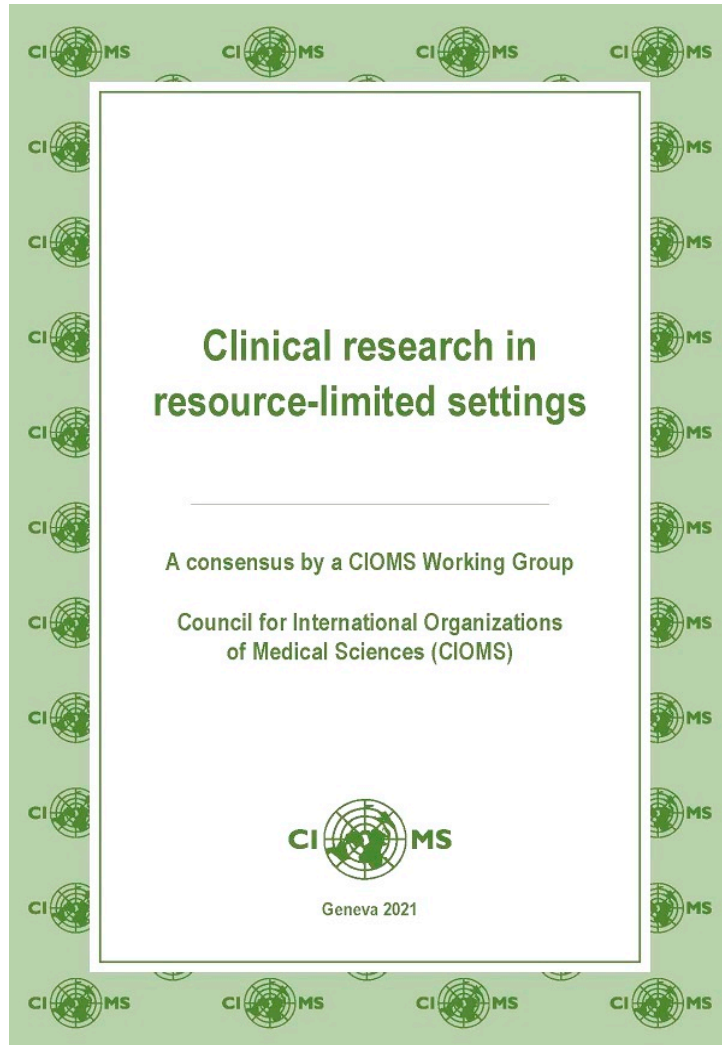
CIOMS  
Geneva 2016

Year 1960



Austin Bradford Hill (1897-1991)





<https://doi.org/10.56759/cyqe7288>



SEVENTY-FIFTH WORLD HEALTH ASSEMBLY  
Agenda item 16.2

WHA75.8  
27 May 2022



## Strengthening clinical trials<sup>1</sup> to provide high-quality evidence on health interventions and to improve research quality and coordination

The Seventy-fifth World Health Assembly,

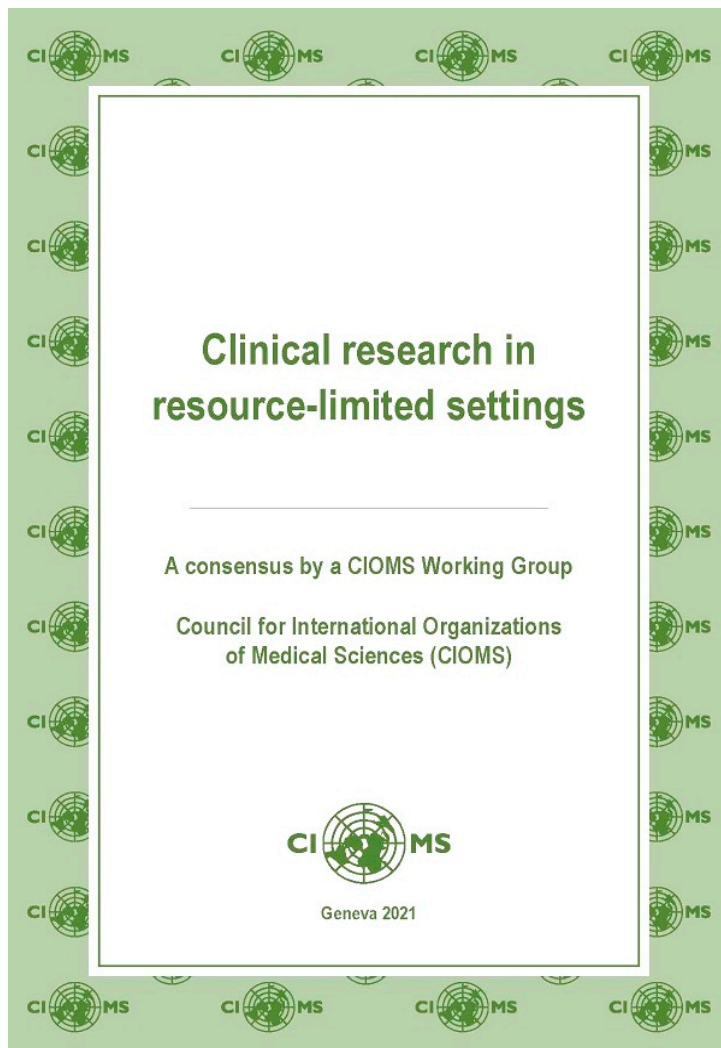
Recalling resolutions WHA58.34 (2005) acknowledging that high-quality, ethical research and the generation and application of knowledge are critical in achieving internationally agreed health-related development goals, WHA63.21 (2010) outlining WHO's role and responsibilities in health research, WHA66.22 (2013) and WHA69.23 (2016) on the follow-up of the report of the Consultative Expert Working Group on Research and Development: Financing and Coordination, WHA67.20 (2014) on regulatory system strengthening for medical products, WHA67.23 (2014) on health intervention and technology assessment in support of universal health coverage, WHA74.6 (2021) on strengthening local production of medicines and other health technologies to improve access, and WHA74.7 (2021) on strengthening WHO preparedness for and response to health emergencies, which notes the importance of basic and clinical research and recognizes the critical role of international collaboration in research and development, including in multicountry clinical and vaccine trials, as well as rapid diagnostics test and assay development, while acknowledging the need for further rigorous scientific evidence;

Noting the recommendations made by the Independent Panel for Pandemic Preparedness and Response in their review "COVID-19: make it the last pandemic"<sup>2</sup> relating to health research and development, including clinical trials;

<sup>1</sup> "A clinical trial is defined by WHO as any research study that prospectively assigns human participants or groups of humans to one or more health-related interventions to evaluate the effects on health outcomes. Clinical trials may also be referred to as interventional trials. Interventions include but are not restricted to drugs, cells and other biological products, surgical procedures, radiologic procedures, devices, behavioural treatments, process-of-care changes, preventive care, etc. This definition includes Phase I to Phase IV trials." Joint statement on public disclosure of results from clinical trials, 2017 (<https://www.who.int/news/item/18-05-2017-joint-statement-on-registration>, accessed 25 May 2022).

<sup>2</sup> Independent Panel for Pandemic Preparedness and Response. COVID-19: make it the last pandemic, 2021 ([https://theindependentpanel.org/wp-content/uploads/2021/05/COVID-19-Make-it-the-Last-Pandemic\\_final.pdf](https://theindependentpanel.org/wp-content/uploads/2021/05/COVID-19-Make-it-the-Last-Pandemic_final.pdf), accessed 25 May 2022).

## Report Content



Foreword

Executive summary

Recommendations

Chapter 1: Background and problem statement

Chapter 2: The Research environment: obstacles and enablers

Chapter 3: Guiding principles for clinical research

Chapter 4: Ethical considerations

Chapter 5: Scientific considerations

Conclusion

References

Appendices:

1. Special populations
2. Digital technology and electronic health records
3. Outbreaks
4. Cervical cancer screening in India
5. Pharmacogenetics and personalized medicines
6. CIOMS WG membership and meetings
7. List of commentators

Bioethics

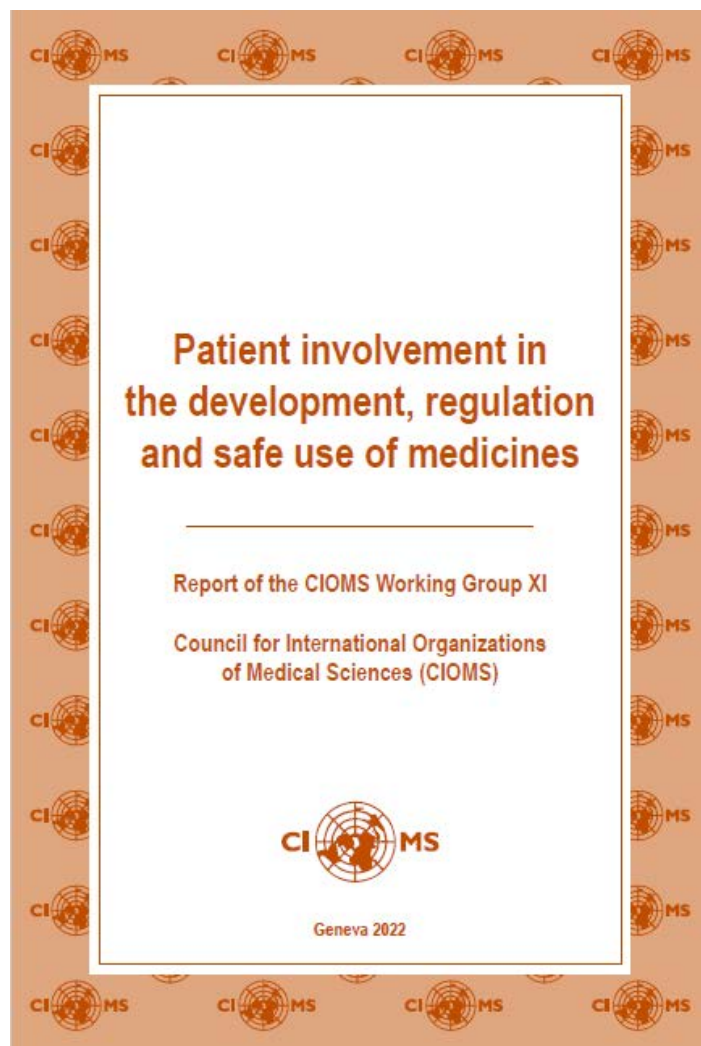
Product development

## Report Content

Bioethics

Pharmaco-

Product  
development



<https://doi.org/10.56759/iiew8982>

### Ethical considerations for patient involvement

Executive summary

Chapter 1: Introduction

Chapter 2: Landscape

Chapter 3: Guiding principles

Chapter 4: Advancing treatments

Chapter 5: Use of real-world data and evidence

Chapter 6: Product labeling

Chapter 7: Rapid safety communication

Chapter 8: Additional risk minimization

Chapter 9: Clinical practice guideline

Chapter 10: Low- and middle-income countries

Chapter 11: Pandemic considerations

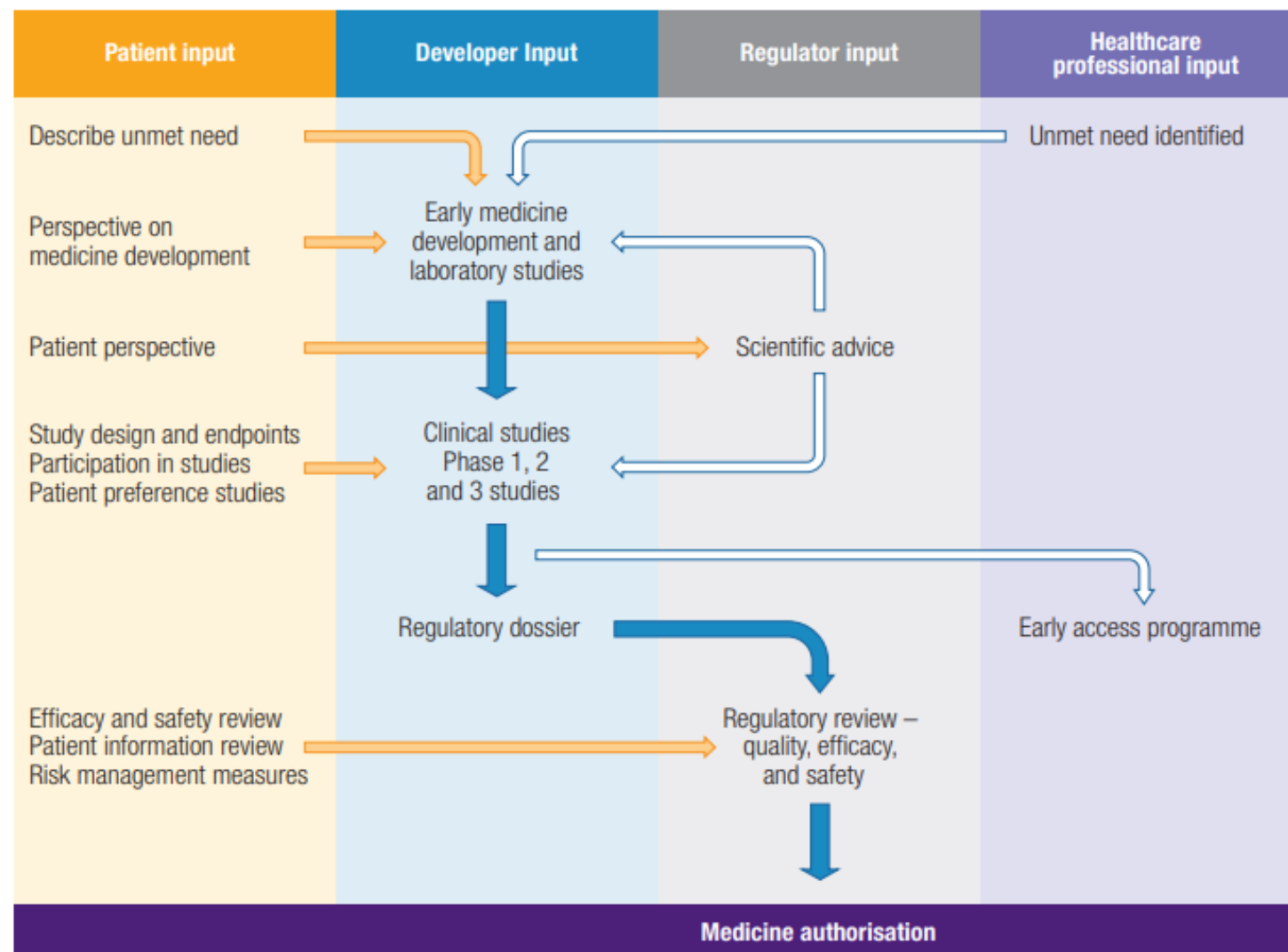
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1. Glossary
2. Case studies
3. CIOMS WG XI statement
4. CIOMS WG membership and meetings
5. List of commentators

# Some snapshots

Figure 1a: Patient involvement during a medicine life-cycle

## Pre-authorization period



Source: CIOMS Working Group XI

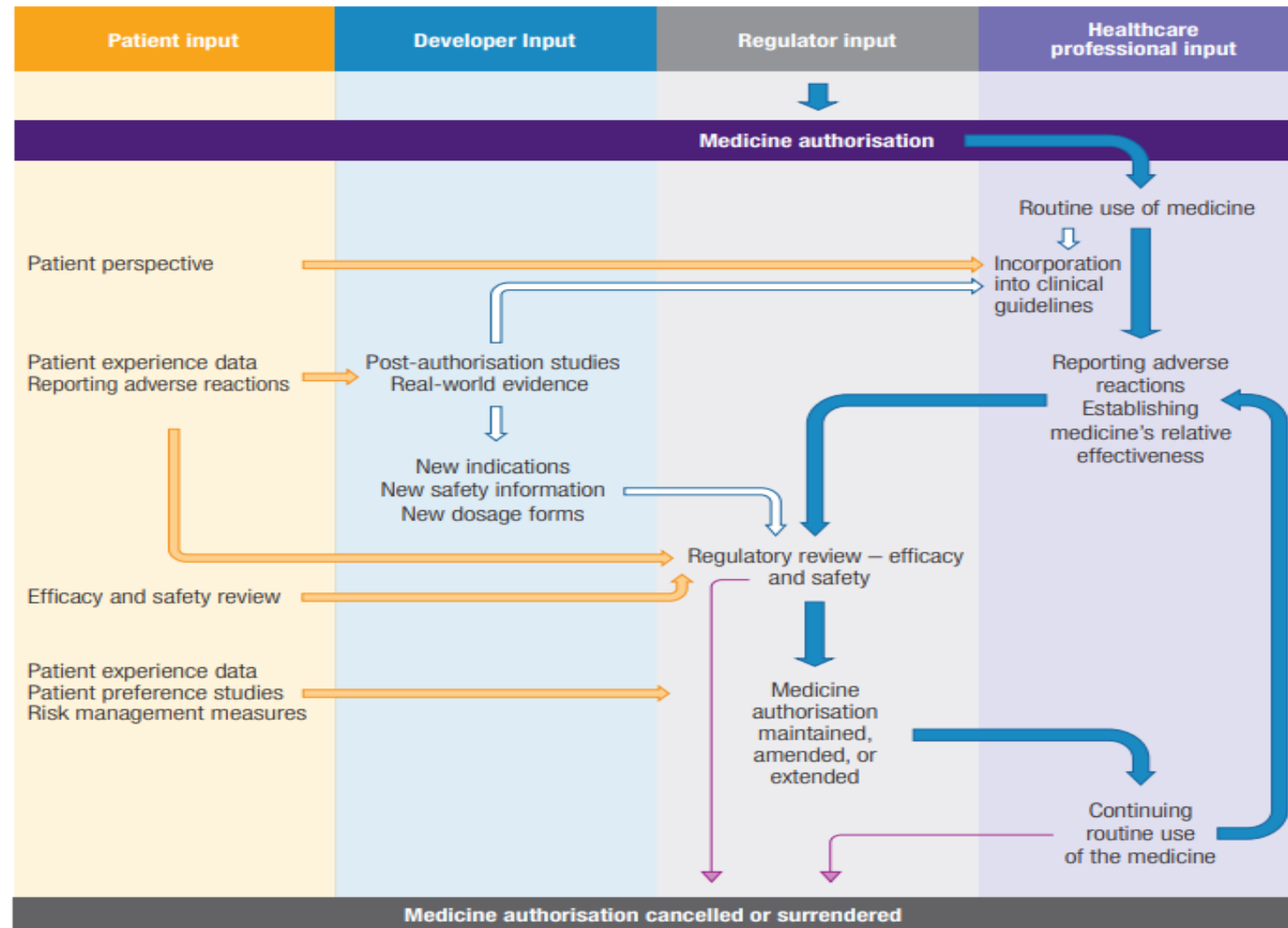
- 1: Introduction
- 2: Landscape
- 3: Guiding principles
- 4: Advancing treatments
- 5: Real-world data /evidence
- 6: Product labelling
- 7: Rapid safety communication
- 8: Additional risk minimisation
- 9: Clinical practice guidelines
- 10: LMICs
- 11: Pandemic considerations
- Appendices



# Some snapshots (ct'd)

Figure 1b: Patient involvement during a medicine life-cycle

## Post-authorization period



Source: CIOMS Working Group XI

1: Introduction

2: Landscape

3: Guiding principles

4: Advancing treatments

5: Real-world data /evidence

6: Product labelling

7: Rapid safety communication

8: Additional risk minimisation

9: Clinical practice guidelines

10: LMICs

11: Pandemic considerations

Appendices

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A	Medication formulation created to meet patients' and doctors' needs (AdrenalNET)
B	A regulatory agency involving patients; public hearing on valproate (EMA)
C	Pilot collaboration between Lareb and a patient organisation in communicating a signal (Lareb)
D	Creating partnerships between industry and patient groups for therapy development (Roche)
E	Example of a pharmaceutical company working with patients to develop an additional risk minimisation measure
F	Engaging patients in early development plans for a novel treatment (Takeda)
G	Patient activism to counter AIDS denialism and improve access to HIV medicines in South Africa
3	(...)

**Each case study describes:**

- Purpose and objective of the case study
- Pharmacology
- Indication/disease treated
- Stage of the drug development lifecycle
- Why were patients involved?
- How was contact established with the patients?
- What did the patients do?
- Was the process adjusted to the patients' needs?
- If patients were asked to help disseminate information, how was it done?
- Did the patients receive payment or compensation?
- Were any patient requests or recommendations discarded and why?
- Conclusion
- Contact details

# CIOMS Ongoing Working Groups in 2023

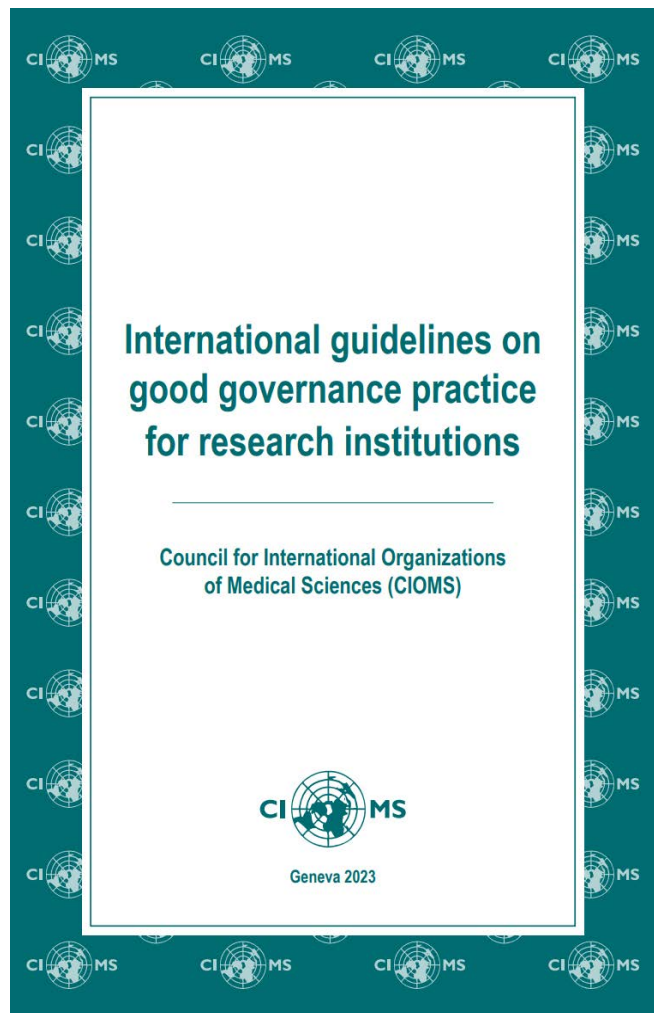


- ▶ **MedDRA Labelling Groupings.** Started April 2019 \*
- ▶ **Benefit-Risk Balance for Medicinal Products.**  
CIOMS WG XII. Started: September 2019 \*
- ▶ **Real-World Data and Real-World Evidence in Regulatory Decision-Making.** CIOMS WG XIII. Started: March 2020 \*
- ▶ **Severe Cutaneous Adverse Reactions (SCARs).**  
Started: February 2021 \*
- ▶ **Recommended Standards of Education and Training for Health Professionals Participating in Medicines Development.** Started: April 2021
- ▶ **International Guidelines on Good Governance Practices for Research Institutions.** Started: July 2021 \*
- ▶ **Artificial Intelligence in Pharmacovigilance.** CIOMS WG XIV. Started: May 2022
- ▶ **Harnessing the potential of pharmacoepidemiology for public health.**  
CIOMS WG XV. Started: November 2023



In-person participants  
at the 1<sup>st</sup> Meeting of  
CIOMS WG XIV

- \* Finalization in 2023
- \* Finalization in 1Q/2Q 2024



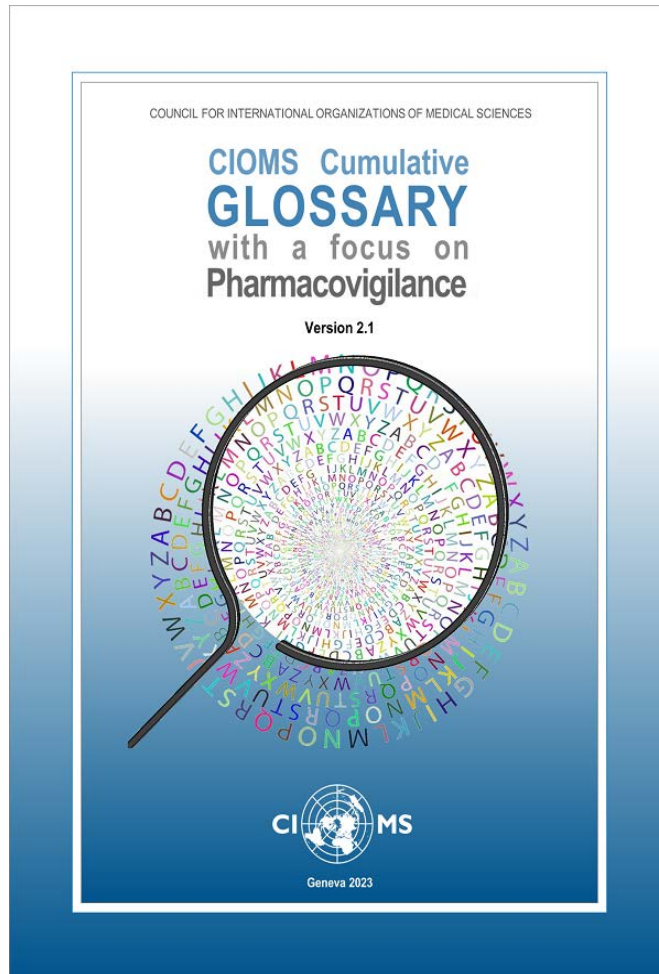
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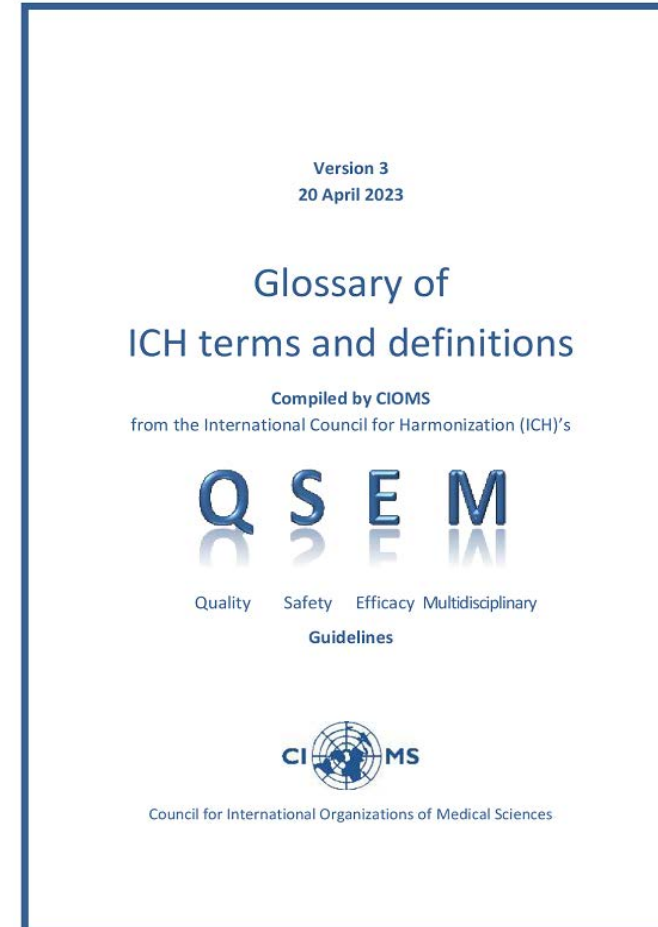
# CIOMS Glossaries – 2 complimentary successful projects

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*Working for public health and patients has a little difficulty*

*No matter how good we are we can and should always do better!*

How can we do better for public health?



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Thank you for your  
attention

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