

Policies, Regulations and Guidelines
For
Research Involving Human Subjects



QATAR SUPREME COUNCIL OF HEALTH

Department of Research

Preface

There exist endless debates concerning the application of guidelines and policies for ethical conduct of research involving human subjects. These debates are likely to continue as new information becomes available. Researchers in biomedicine and the social and behavioral sciences confront the challenging task of adhering to national and international regulations in social and cultural environments in which ethical guidelines may not be easily translated or applied. This document is meant to outline ethical guidelines, policies and regulations that should be followed in Qatar in conducting research involving human subjects.

This document is reasonably comprehensive and is stated at a level that should assist scientists, subjects, reviewers and interested citizens to understand the ethics in research involving human subjects. These rules, regulations and policies should be followed since, generally, they provide guidance to resolve most ethical problems arising from research involving human subjects. However, since science is in a continuous state of flux and that specific advances may raise ethical issues, appendices will be added to this document as the need arises.

The Qatar Health Research Ethics Committee has unanimously approved this document. A law to legally enforce this document is in process.

In assembling this document, research ethics in various countries and international organizations were searched. The following publications were consulted and many were adapted or modified to meet the conditions in Qatar.

The Belmont Report.

<http://www.hhs.gov/ohrp/humansubjects/guidance/belmont.htm>

World Medical Association, Declaration of Helsinki. Ethical Principles for Medical Research Involving Human Subjects

<http://www.wma.net/e/policy/b3.htm>

Council for International Organizations of Medical Sciences (CIOMS)- International Ethical Guidelines for Biomedical Research Involving Human Subjects.

http://www.cioms.ch/guidelines_nov_2002_blurb.htm

US Health and Human Services Regulations for the Protection of Human Subjects

<http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.htm>

http://grants.nih.gov/grants/policy/hs/ethical_guidelines.htm

Ethical challenges in study design and informed consent for health research in resource-poor settings

http://www.who.int/tdr/publications/publications/seb_topic5.htm

Council for International Organizations of Medical Sciences
http://www.cioms.ch/frame_guidelines_nov_2002.htm

World Medical Association Declaration of Helsinki:
Ethical Principles for Medical Research Involving Human Subjects.
Adopted by the 18th WMA General Assembly, Helsinki, Finland, June 1964, and
amended by the:
29th WMA General Assembly, Tokyo, Japan, October 1975
35th WMA General Assembly, Venice, Italy, October 1983
41st WMA General Assembly, Hong Kong, September 1989
48th WMA General Assembly, Somerset West, Republic of South Africa, October 1996
52nd WMA General Assembly, Edinburgh, Scotland, October 2000
53th WMA General Assembly, Washington 2002 (Note of Clarification on paragraph 29
added)
55th WMA General Assembly, Tokyo 2004 (Note of Clarification on Paragraph 30
added)
59th WMA General Assembly, Seoul, October 2008
<http://www.wma.net/e/policy/b3.htm>

Proceedings of the First Meeting of the Eastern Mediterranean and Arab Forum on
Bioethics in Research held on August 12-14, 2008 in Cairo, Egypt and sponsored by
World Health Organization, United Nations Educational, Scientific and Cultural
Organization, ISESCO, and University of Maryland, USA

"Ethical Practices for Health Research in the Eastern Mediterranean Region of the
World Health Organization: A Retrospective Data Analysis"
<http://www.plosone.org/article/fetchArticle.action?annotationId=info%3Adoi%2F10.1371%2Fannotation%2Fbcecd518-d53f-4028-8d98-d6b4cab57979&articleURI=info%3Adoi%2F10.1371%2Fjournal.pone.0002094>

Medical Genetics Ethics, Islamic views and considerations in Iran
http://journals.tums.ac.ir/upload_files/pdf/4923.pdf

Kuwait Institute for Medical Specialization, the Ministry of Health, State of Kuwait
<http://www.kims.org.kw/Ethical%202.doc>

Nils Fischer. National Bioethics Committees in selected States of North Africa and the
Middle East. *Journal of International Biotechnology Law*, 05, (No.2), 45-58 (2008).

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Basic Policy for Protection of Human Research Subjects

This policy applies to all research involving human subjects conducted, privately or governmentally supported or otherwise subject to regulation by any department of research or research organization in Qatar. This includes research conducted or supported in collaboration with a non-Qatari institution.

This policy does not affect any local or foreign laws or regulations which may otherwise be applicable and which provide additional protections for human subjects involved in research.

Research activities in which the only involvement of human subjects will be in one or more of the following categories are exempt from this policy:

(1) Research conducted in established or commonly accepted educational settings, involving normal educational practices, such as (i) research on regular and special education instructional strategies, or (ii) research on the effectiveness of or the comparison among instructional techniques, curricula, or classroom management methods.

(2) Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures or observation of public behavior, unless: (i) information obtained is recorded in such a manner that human subjects can be identified; and (ii) any disclosure of the human subjects' responses outside the research could reasonably place the subjects at risk of criminal or civil liability or be damaging to the subjects' financial standing, employability, or reputation.

(3) Research involving the collection or study of existing data, documents, records, pathological specimens, or diagnostic specimens, if these sources are publicly available or if the information is recorded by the investigator in such a manner that subjects cannot be identified.

(4) Research and demonstration projects which are designed to study, evaluate, or otherwise examine: (i) Public benefit or service programs; (ii) procedures for obtaining benefits or services under those programs; (iii) possible changes in or alternatives to those programs or procedures; or (iv) possible changes in levels of payment for benefits or services under those programs.

(5) Taste and food quality evaluation and consumer acceptance studies, (i) if wholesome foods without additives are consumed or (ii) if a food is consumed that contains a food ingredient at or below the level found to be safe, or agricultural chemical or environmental contaminant at or below the level found to be safe.

When research covered by this policy takes place in foreign countries, procedures normally followed in the foreign countries to protect human subjects with guidelines consistent with the World Medical Assembly Declaration (Declaration of Helsinki amended 1989) may be reviewed and approved by the Institutional Review Board (IRB) of the Institution in Qatar.

Definitions: For the purpose of this policy:

(a) *Research* means a systematic investigation, including research development, testing and evaluation, designed to develop or contribute to general knowledge. Activities which meet this definition constitute research for purposes of this policy, whether or not they are conducted or supported under a program which is considered research for other purposes.

(b) *Human subject* means a living individual about whom an investigator conducting research obtains: (1) Data through intervention or interaction with the individual or (2) Identifiable private information.

Intervention includes both physical procedures by which data are gathered (for example, vein puncture) and manipulations of the subject or the subject's environment that are performed for research purposes.

Interaction includes communication or interpersonal contact between investigator and subject.

Private information includes information about behavior that occurs in a context in which an individual can reasonably expect that no observation or recording is taking place, and information which has been provided for specific purposes by an individual and which the individual can reasonably expect will not be made public (for example, a medical record). Private information must be individually identifiable (i.e., the identity of the subject is or may readily be ascertained by the investigator or associated with the information) in order for obtaining the information to constitute research involving human subjects.

(c) *IRB* means an Institutional Review Board established in accord with and for the purposes expressed in this policy.

(d) *Minimal risk* means that the probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests.

Assuring compliance with this policy

(a) Each institution engaged in research which is covered by this policy shall provide written assurance satisfactory to the Supreme Council of Health of Qatar that it will comply with the requirements set forth in this policy.

(b) Institutions will conduct or support research covered by this policy only if the institution has an assurance approved as provided in the attachments to this document, and only if the institution has certified to the Supreme Council of Health that the research has been reviewed and approved by an Institutional Review Board (IRB) and will be subject to continuing review by the IRB. Assurances applicable to conducted research shall include:

(1) A statement of principles governing the institution in the discharge of its responsibilities for protecting the rights and welfare of human subjects of research conducted at or sponsored by the institution. This requirement does not preempt provisions of this policy applicable to institution-supported or regulated research and need not be applicable to any research exempted or waived.

(2) Designation of one or more Institutional Review Boards (IRBs) established in accordance with the requirements of this policy, and for which provisions are made for meeting space and sufficient staff to support the IRB's review and recordkeeping duties.

(3) A list of IRB members identified by name; earned degrees; representative capacity; indications of experience such as board certifications, licenses, etc., sufficient to describe each member's chief anticipated contributions to IRB deliberations; and any employment or other relationship between each member and the institution. Changes in IRB membership shall be reported to the Institution head, and to the Department of Research, Supreme Council of Health, or any successor office.

(4) Written procedures which the IRB will follow (i) for conducting its initial and continuing review of research and for reporting its findings and actions to the investigator and the institution; (ii) for determining which projects require review more often than annually and which projects need verification from sources other than the investigators that no material changes have occurred since previous IRB review; and (iii) for ensuring prompt reporting to the IRB of proposed changes in a research activity, and for ensuring that such changes in approved research, during the period for which IRB approval has already been given, may not be initiated without IRB review and approval except when necessary to eliminate apparent immediate hazards to the subject.

(5) Written procedures for ensuring prompt reporting to the IRB, and appropriate institutional officials of: (i) any unanticipated problems involving risks to subjects or others or any serious or continuing noncompliance with this policy or the requirements or determinations of the IRB; and (ii) any suspension or termination of IRB approval.

(c) The assurance shall be executed by an individual authorized to act for the institution and to assume on behalf of the institution the obligations imposed by this policy and shall be filed in such form and manner as the institutional head prescribes.

(d) The Institutional head (the person who officially authorized to represent and speaks on behalf of the institution) will evaluate all assurances submitted in accordance with this policy through such officers and employees of the institution. The institutional head's evaluation will take into consideration the adequacy of the proposed IRB in light of the anticipated scope of the research activities and the types of subject populations likely to be involved, the appropriateness of the proposed initial and continuing review procedures in light of the probable risks, and the size and complexity of the institution.

(e) On the basis of this evaluation, the institutional head may approve or disapprove the assurance, or enter into negotiations to develop an approvable one. The institutional head may limit the period during which any particular approved assurance or class of approved assurances shall remain effective or otherwise condition or restrict approval.

(f) An institution with an approved assurance shall certify that each application or proposal for research covered by the assurance and by this Policy has been reviewed and approved by the IRB. Such certification should be submitted with the application or proposal or by such later date as may be prescribed by the institution to which the application or proposal is submitted. **Under no condition** shall research

covered by the Policy be supported or conducted prior to receipt of the certification that the research has been reviewed and approved by the IRB.

Institutional Review Board (IRB) membership

(a) Each IRB shall have at least five members, with varying backgrounds to promote complete and adequate review of research activities commonly conducted by the institution. The IRB shall be sufficiently qualified through the experience and expertise of its members, and the diversity of the members, including consideration of cultural backgrounds and sensitivity to such issues as religion, community attitudes, etc to promote respect for its advice and counsel in safeguarding the rights and welfare of human subjects. In addition to possessing the professional competence necessary to review specific research activities, the IRB shall be able to ascertain the acceptability of proposed research in terms of institutional commitments and regulations, applicable laws, and standards of professional conduct and practice. The IRB shall therefore include persons knowledgeable in these areas. If an IRB regularly reviews research that involves a vulnerable category of subjects, such as children, prisoners, pregnant women, or handicapped or mentally disabled persons, consideration shall be given to the inclusion of one or more individuals who are knowledgeable about and experienced in working with these subjects.

(b) Every nondiscriminatory effort will be made to ensure that the composition of the IRB members is balanced, including the institution's consideration of qualified persons of both sexes. No IRB may consist entirely of members of one profession.

(c) Each IRB shall include at least one member whose primary concerns are in scientific areas and at least one member whose primary concerns are in nonscientific areas. A lay member may also be considered.

(d) Each IRB shall include at least one member who is not otherwise affiliated with the institution and who is not part of the immediate family of a person who is affiliated with the institution.

(e) No IRB may have a member participate in the IRB's initial or continuing review of any project in which the member has a conflicting interest, except to provide information requested by the IRB.

(f) An IRB may, in its discretion, invite individuals with competence in special areas to assist in the review of issues which require expertise beyond or in addition to that available on the IRB. These individuals may not vote with the IRB.

Institutional Review Board (IRB) functions and operations

In order to fulfill the requirements of this policy each IRB shall: (a) Follow written procedures in the same detail as described below and, to the extent required. (b) Except when an expedited review procedure is used, review proposed research at convened meetings at which a majority of the members of the IRB are present. In order for the research to be approved, it shall receive the approval of a majority of those members present at the meeting.

Institutional Review Board (IRB) review of research

(a) An IRB shall review and have authority to approve, require modifications in (to secure approval), or disapprove all research activities covered by this policy.

(b) An IRB shall require that information given to subjects as part of informed consent. The IRB may require that information be given to the subjects when in the IRB's judgment the information would meaningfully add to the protection of the rights and welfare of subject. This information must be in the language that patient / parents / guardians can read and understands.

(c) An IRB shall require documentation of informed consent or may waive documentation with appropriate justification.

(d) Within two weeks of its meeting, an IRB shall notify investigators and the institution in writing of its decision to approve or disapprove the proposed research activity or of modifications required to secure IRB approval of the research activity. If the IRB decides to disapprove a research activity, it shall include in its written notification a statement of the reasons for its decision and give the investigator an opportunity to respond in person or in writing.

(e) An IRB shall conduct continuing review of research covered by this policy at intervals appropriate to the degree of risk, but not less than once per year, and shall have authority to observe or have a third party observe the consent process and the research.

Expedited review procedures for certain kinds of research involving no more than minimal risk, and for minor changes in approved research

(a) Research that may be reviewed by the IRB through an expedited review procedure may include research activities that (1) present no more than minimal risk to human subjects, and (2) involve only procedures listed in one or more of the following categories: 1) Clinical studies of drugs and medical devices only when cleared/approved for marketing and the medical use; (2) Collection of blood samples by finger stick, heel stick, ear stick, or vein puncture; 3) Prospective collection of biological specimens for research purposes by noninvasive means; 4) Collection of data through noninvasive procedures; 5) Research involving materials (data, documents, records, or specimens) that have been collected, or will be collected solely for non-research purposes; 6) Collection of data from voice, video, digital, or image recordings made for research purposes; 7) Research on individual or group characteristics or behavior (including, but not limited to, research on perception, cognition, motivation, identity, language, communication, cultural beliefs or practices, and social behavior) or research employing survey, interview, oral history, focus group, program evaluation, human factors evaluation, or quality assurance methodologies.

(b) An IRB may use the expedited review procedure to review minor changes in previously approved research during the period (of one year or less) for which approval is authorized.

(c) For multicenter, multinational research projects which have been approved by the IRBs in their relevant countries, the institutional Qatari IRB may carry an expedited

review provided that a copy of relevant research ethics information as approved by the other IRBs is submitted.

Under an expedited review procedure, the review may be carried out by the IRB chairperson or by one or more experienced reviewers designated by the chairperson from among members of the IRB. In reviewing the research, the reviewers may exercise all of the authorities of the IRB except that the reviewers may not disapprove the research. A research activity may be disapproved only after review in accordance with the non-expedited procedure.

(d) Each IRB which uses an expedited review procedure shall adopt a method for keeping all members advised of research proposals which have been approved under the procedure.

(e) The institutional head may restrict, suspend, terminate, or choose not to authorize an institution's or IRB's use of the expedited review procedure.

Criteria for Institutional Review Board (IRB) approval of research

(a) In order to approve research covered by this policy the IRB shall determine that all of the following requirements are satisfied:

(1) Risks to subjects are minimized: (i) By using procedures which are consistent with sound research design and which do not unnecessarily expose subjects to risk, and (ii) whenever appropriate, by using procedures already being performed on the subjects for diagnostic or treatment purposes.

(2) Risks to subjects are reasonable in relation to anticipated benefits, if any, to subjects, and the importance of the knowledge that may reasonably be expected to result. In evaluating risks and benefits, the IRB should consider only those risks and benefits that may result from the research (as distinguished from risks and benefits of therapies subjects would receive even if not participating in the research). The IRB should not consider possible long-range effects of applying knowledge gained in the research (for example, the possible effects of the research on public policy) as among those research risks that fall within the purview of its responsibility.

(3) Selection of subjects is equitable. In making this assessment the IRB should take into account the purposes of the research and the setting in which the research will be conducted and should be particularly cognizant of the special problems of research involving vulnerable populations, such as children, prisoners, pregnant women, mentally disabled persons, or economically or educationally disadvantaged persons.

(4) Informed consent will be sought and appropriately documented from each prospective subject or the subject's legally authorized representative.

(5) When appropriate, the research plan makes adequate provision for monitoring the data collected to ensure the safety of subjects.

(6) When appropriate, there are adequate provisions to protect the privacy of subjects and to maintain the confidentiality of data.

(b) When some or all of the subjects are likely to be vulnerable to coercion or undue influence, such as children, prisoners, pregnant women, mentally disabled persons, or economically or educationally disadvantaged persons, additional safeguards have been included in the study to protect the rights and welfare of these subjects.

Review by institution

Depending on individual institutional policies, research covered by this policy that has been approved by an IRB may be subject to further appropriate review and approval or disapproval by officials (e.g board of governors, chancellor, CEOs) of the institution. However, those officials may not approve the research if it has not been approved by an IRB.

Suspension or termination of Institutional Review Board (IRB) approval of research

An IRB shall have authority to suspend or terminate approval of research that is not being conducted in accordance with the IRB's requirements or that has been associated with unexpected serious harm to subjects. Any suspension or termination of approval shall include a statement of the reasons for the IRB's action and shall be reported promptly to the investigator, appropriate institutional officials, funding agency, as well as the Supreme Council of Health.

Cooperative research

Cooperative research projects are those projects covered by this policy which involve more than one institution. In the conduct of cooperative research projects, each institution is responsible for safeguarding the rights and welfare of human subjects and for complying with this policy. With the approval of the department or institutional head, an institution participating in a cooperative project may enter into a joint review arrangement, rely upon the review of another qualified IRB, or make similar arrangements for avoiding duplication of effort. **Research collaboration with foreign institutions must provide IRB approval from the foreign institution as well as IRB approval from the Qatari institution to the funding body.**

Institutional Review Board (IRB) Records

(a) An institution, or when appropriate an IRB shall prepare and maintain adequate documentation of IRB activities, including the following:

(1) Copies of all research proposals reviewed, scientific evaluations, if any, that accompany the proposals, approved sample of consent documents, progress reports submitted by investigators, and reports of injuries to subjects. (2) Minutes of IRB meetings which shall be in sufficient detail to show attendance at the meetings; actions taken by the IRB; the vote on these actions including the number of members voting for, against, and abstaining; the basis for requiring changes in or disapproving of research; and a written summary of the discussion of controversial issues and their resolution. (3) Records of continuing review activities. (4) Copies of all correspondence between the IRB and the investigators. (5) A list of IRB members in detail as described above. (6) Written procedures for the IRB in the same detail as described above. (7) Statements of significant new findings provided to subjects.

(b) The records required by this policy shall be retained for at least 3 years, and records relating to research which is conducted shall be retained for at least 3 years after completion of the research. All records shall be accessible for inspection and copying by authorized representatives of the Supreme Council of Health at reasonable times and in a reasonable manner.

General requirements for informed consent

Except as provided elsewhere in this policy, no investigator may involve a human being as a subject in research covered by this policy unless the investigator has obtained the legally effective informed consent of the subject or the subject's legally authorized representative. An investigator shall seek such consent only under circumstances that provide the prospective subject or the representative sufficient opportunity to consider whether or not to participate and that minimize the possibility of coercion or undue influence. The information that is given to the subject or the representative shall be in a language understandable to the subject or the representative. No informed consent, whether oral or written, may include any exculpatory language through which the subject or the representative is made to waive or appear to waive any of the subject's legal rights, or releases or appears to release the investigator, the sponsor, the institution or its agents from liability for negligence.

(a) Basic elements of informed consent: In seeking informed consent the following information shall be provided to each subject: (1) A statement that the study involves research, an explanation of the purposes of the research and the expected duration of the subject's participation, a description of the procedures to be followed, and identification of any procedures which are experimental; (2) A description of any reasonably foreseeable risks or discomforts to the subject; (3) A description of any benefits to the subject or to others which may reasonably be expected from the research; (4) A disclosure of appropriate alternative procedures or courses of treatment, if any, that might be advantageous to the subject; (5) A statement describing the extent, if any, to which confidentiality of records identifying the subject will be maintained; (6) An explanation as to whether any compensation and an explanation as to whether any medical treatments are available if injury occurs and, if so, what they consist of, or where further information may be obtained; (7) An explanation of whom to contact for answers to pertinent questions about the research and research subjects' rights, and whom to contact in the event of a research-related injury to the subject; and (8) A statement that participation is voluntary, refusal to participate will involve no penalty or loss of benefits to which the subject is otherwise entitled, and the subject may discontinue participation at any time without penalty or loss of benefits to which the subject is otherwise entitled.

(b) Additional elements of informed consent: When appropriate, one or more of the following elements of information shall also be provided to each subject: (1) A statement that the particular treatment or procedure may involve risks to the subject (or to the embryo or fetus, if the subject is or may become pregnant) which are currently unforeseeable; (2) Anticipated circumstances under which the subject's participation may be terminated by the investigator without regard to the subject's consent; (3) Any additional costs to the subject that may result from participation in the research; (4) The consequences of a subject's decision to withdraw from the research and procedures for orderly termination of participation by the subject; (5) A statement that significant new findings developed during the course of the research which may relate to the subject's willingness to continue participation will be provided to the subject; and (6) The approximate number of subjects involved in the study.

(c) An IRB may approve a consent procedure which does not include, or which alters, some or all of the elements of informed consent set forth above, or waive the requirement to obtain informed consent provided the IRB finds and documents that: (1) The research project is to be conducted by or subject to the approval of the Supreme Council of Health officials and is designed to study, evaluate, or otherwise examine: (i) public benefit or service programs; (ii) procedures for obtaining benefits or services under those programs; (iii) possible changes in or alternatives to those programs or procedures; or (iv) possible changes in methods or levels of payment for benefits or services under those programs; (2) The research involves no more than minimal risk to the subjects; (3) The waiver or alteration will not adversely affect the rights and welfare of the subjects; (4) The research could not practicably be carried out without the waiver or alteration; and (5) Whenever appropriate, the subjects will be provided with additional pertinent information after participation.

(d) The informed consent requirements in this policy are not intended to preempt any applicable laws which require additional information to be disclosed in order for informed consent to be legally effective.

(e) Nothing in this policy is intended to limit the authority of a physician to provide emergency medical care, to the extent the physician is permitted to do so under applicable laws.

Documentation of informed consent

(a) Informed consent shall be documented by the use of a written consent form approved by the IRB and signed by the subject or the subject's legally authorized representative. A copy shall be given to the person signing the form.

(b) The consent form may be either of the following: (1) A written consent document that embodies the elements of informed consent as described above. This form may be read to the subject or the subject's legally authorized representative, but in any event, the investigator shall give either the subject or the representative adequate opportunity to read it before it is signed; or (2) A short form written consent document stating that the elements of informed consent as described above have been presented orally to the subject or the subject's legally authorized representative. When this method is used, there shall be a witness to the oral presentation. Also, the IRB shall approve a written summary of what is to be said to the subject or the representative. Only the short form itself is to be signed by the subject or the representative. However, the witness shall sign both the short form and a copy of the summary, and the person actually obtaining consent shall sign a copy of the summary. A copy of the summary shall be given to the subject or the representative, in addition to a copy of the short form.

(c) An IRB may waive the requirement for the investigator to obtain a signed consent form for some or all subjects if it finds either: (1) that the only record linking the subject and the research would be the consent document and the principal risk would be potential harm resulting from a breach of confidentiality. Each subject will be asked whether the subject wants documentation linking the subject with the research, and the subject's wishes will govern; or (2) that the research presents no more than minimal risk of harm to subjects and involves no procedures for which written consent is normally required outside of the research context.

Cases in which the documentation requirement is waived, the IRB may require the investigator to provide subjects with a written statement regarding the research.

Applications and proposals lacking definite plans for involvement of human subjects

Certain types of research applications are submitted to departments or institutions with the knowledge that subjects may be involved within the period of support, but definite plans would not normally be set forth in the application or proposal. These include projects in which human subjects' involvement will depend upon completion of instruments, prior animal studies, or purification of compounds. **These applications need not be reviewed by an IRB before an award may be made.** However, except for research exempted or waived, **no human subjects may be involved** and no human research can be supported until the project has been reviewed and approved by the IRB, as provided in this policy, and certification are submitted by the institution to the funding body.

Research undertaken without the intention of involving human subjects

In the event research is undertaken without the intention of involving human subjects, but it is later proposed to involve human subjects in the research, the research shall first be reviewed and approved by an IRB, as provided in this policy, a certification submitted, by the institution, to the funding body, and final approval given to the proposed change by the funding body.

Evaluation and disposition of applications and proposals for research to be conducted or supported by Intramural staff of a Department or an Institution

(a) All applications and proposals involving human subjects submitted by the intramural officers and employees of a department or an institution must be reviewed by an approved IRB that is not necessarily residing in the same Department or Institution. (b) On the basis of this evaluation, the Department or Institution head may approve or disapprove the submission of the application or proposal, or enter into negotiations to develop an approvable one.

Use of Research funds

Research funds administered by a department or institution may not be expended for research involving human subjects unless the requirements of this policy have been satisfied.

Early termination of research support: Evaluation of applications and proposals

(a) The institutional head as well as the Department of Research at the Qatar Supreme Council of Health may require the funding body that research support for any project be terminated or suspended in the manner prescribed in applicable program requirements, when the institution has materially failed to comply with the terms of this policy. (b) In making decisions about supporting or approving applications or proposals covered by this policy the institutional head may take into

account, in addition to all other eligibility requirements and program criteria, factors such as whether the applicant or the person or persons who would direct or has/have directed the scientific and technical aspects of an activity has/have materially failed to discharge responsibility for the protection of the rights and welfare of human subjects.

Additional Conditions

With respect to any research project or any class of research projects the institutional head may impose additional conditions prior to or at the time of approval when in his/her judgment additional conditions are necessary for the protection of human subjects.

ADDITIONAL PROTECTIONS FOR PREGNANT WOMEN, HUMAN FETUSES AND NEONATES INVOLVED IN RESEARCH

This section applies to all research involving pregnant women, human fetuses, neonates of uncertain viability, or nonviable neonates. This includes all research conducted by any person in any facility in Qatar.

Definitions

For the purpose of this policy, the following applies:

Dead fetus: means a fetus that does not exhibit heartbeat, spontaneous respiratory activity, spontaneous movement of voluntary muscles, or pulsation of the umbilical cord.

Delivery: means complete separation of the fetus from the woman by expulsion or extraction or any other means.

Fetus: means the product of conception from implantation until delivery.

Neonate: means a newborn.

Nonviable: neonate means a neonate after delivery that, although living is not viable.

Pregnancy: encompasses the period of time from implantation until delivery. A woman shall be assumed to be pregnant if she exhibits any of the pertinent presumptive signs of pregnancy, such as missed menses, until the results of a pregnancy test are negative or until delivery.

Viable: as it pertains to the neonate, means being able, after delivery, to survive (given the benefit of available medical therapy) to the point of independently maintaining heartbeat and respiration.

Duties of IRBs in connection with research involving pregnant women, fetuses, and neonates

In addition to other responsibilities assigned to IRBs, each IRB shall review research and approve only research which satisfies the conditions of all applicable sections of this policy.

Research involving pregnant women or fetuses

Pregnant women or fetuses may be involved in research if all of the following conditions are met:

(a) Where scientifically appropriate, preclinical studies, including studies on pregnant animals, and clinical studies, including studies on non-pregnant women, have been

conducted and provide data for assessing potential risks to pregnant women and fetuses;

(b) The risk to the fetus is caused solely by interventions or procedures that hold out the prospect of direct benefit for the woman or the fetus; or, if there is no such prospect of benefit, the risk to the fetus is not greater than minimal and the purpose of the research is the development of important biomedical knowledge which cannot be obtained by any other means;

(c) Any risk is the least possible for achieving the objectives of the research;

(d) If the research holds out the prospect of direct benefit to the pregnant woman, the prospect of a direct benefit both to the pregnant woman and the fetus, or no prospect of benefit for the woman nor the fetus when risk to the fetus is not greater than minimal and the purpose of the research is the development of important biomedical knowledge that cannot be obtained by any other means, her consent is obtained in accord with the informed consent provisions described above;

(e) If the research holds out the prospect of direct benefit solely to the fetus then the consent of the pregnant woman and the father is obtained in accord with the informed consent provisions described above except that the father's consent need not be obtained if he is unable to consent because of unavailability, incompetence, or temporary incapacity or the pregnancy resulted from rape or incest.

(f) Each individual providing consent is fully informed regarding the reasonably foreseeable impact of the research on the fetus or neonate;

(g) For children as defined above, who are pregnant, assent and permission are obtained in accord with the provisions of (d) above;

(h) No inducements, monetary or otherwise, will be offered to terminate a pregnancy;

(i) Individuals engaged in the research will have no part in any decisions as to the timing, method, or procedures used to terminate a pregnancy; except as a part of an approved randomized clinical trials in which decision about timing, method or procedure of delivery will be made by randomization, and

(j) Individuals engaged in the research will have no part in determining the viability of a neonate, except as a part of RCT in which the decision will be made by randomization.

Research involving neonates

(a) **Neonates of uncertain viability and nonviable neonates** may be involved in research if all of the following conditions are met:

(1) Where scientifically appropriate, preclinical and clinical studies have been conducted and provide data for assessing potential risks to neonates; (2) Each individual providing consent is fully informed regarding the reasonably foreseeable impact of the research on the neonate; (3) Individuals engaged in the research will have no part in determining the viability of a neonate; (4) The requirements of paragraph (b) or (c) of this section have been met as applicable.

(b) **Neonates of uncertain viability.** Until it has been ascertained whether or not a neonate is viable, a neonate **may not** be involved in research covered by this subpart **unless** the following additional conditions have been met:

(1) The IRB determines that: (i) The research holds out the prospect of enhancing the probability of survival of the neonate to the point of viability, and any risk is the least possible for achieving that objective, or (ii) The purpose of the research is the development of important biomedical knowledge which cannot be obtained by other means and there will be no added risk to the neonate resulting from the research; and, (2) When the neonate survives as a result of any research intervention, he will be at a very high risk of adverse neuro-developmental outcome later in his life. This must be clearly explained to the parents at the time of taking their consent. (3) The legally effective informed consent as described above is obtained, and it is suggested that the individual researcher, IRB and the institution should have indemnity against the legal consequences of this outcome.

(c) **Nonviable neonates.** After delivery, nonviable neonate may not be involved in research covered by this subpart unless all of the following additional conditions are met:

(1) Vital functions of the neonate will not be artificially maintained; (2) The research will not terminate the heartbeat or respiration of the neonate; (3) There will be no added risk to the neonate resulting from the research; (4) The purpose of the research is the development of important biomedical knowledge that cannot be obtained by other means; and (5) The legally effective informed consent has been obtained.

(d) **Viable neonates.** A neonate, after delivery, that has been determined to be viable may be included in research only to the extent permitted by and in accord with the requirements of this policy.

Research involving, after delivery, the placenta, the dead fetus or fetal material

(a) Research involving, after delivery, the placenta; the dead fetus; macerated fetal material; or cells, tissue, or organs excised from a dead fetus, shall be conducted only in accord with any applicable laws and regulations regarding such activities.

(b) If information associated with material described above is recorded for research purposes in a manner that living individuals can be identified, directly or through identifiers linked to those individuals, those individuals are research subjects and all pertinent subparts of this policy are applicable.

Add itional Protections Pertaining To Biomedical And Behavioral Research Involving Vulnerable Subjects

Applicability

(a) The regulations in this subpart are applicable to all biomedical and behavioral research conducted involving vulnerable subjects (e.g. prisoners) in addition to those imposed above; and (b) Nothing in this subpart shall be construed as indicating that compliance with the procedures set forth herein will authorize research involving

vulnerable subjects such as prisoners, to the extent such research is limited or barred by applicable laws.

Purpose

The purpose of this subpart is to provide additional safeguards for the protection of vulnerable subjects such as prisoners since they may be under constraints because of their circumstances (e.g. incarceration, for prisoners) which could affect their ability to make a truly voluntary and un-coerced decision whether or not to participate as subjects in research.

Composition of Institutional Review Boards where vulnerable subjects are involved

In addition to satisfying the above requirements, an Institutional Review Board shall also meet the following specific requirements:

(a) A majority of the Board (exclusive of prisoner members for example) shall have no association with the prison involved, apart from their membership on the Board; and (b) At least one member of the Board shall be a prisoner, or a prisoner representative with appropriate background and experience to serve in that capacity, except that where a particular research project is reviewed by more than one Board; only one Board needs satisfy this requirement.

Additional duties of the Institutional Review Boards where prisoners are involved

(a) In addition to all other responsibilities prescribed above for Institutional Review Boards, the Board shall review and approve such research only if it finds that:

(1) The research under review represents one of the categories of research permissible; (2) Any possible advantages accruing to the prisoner through his or her participation in the research are not of such a magnitude that his or her ability to weigh the risks of the research against the value of such advantages is impaired; (3) The risks involved in the research are commensurate with risks that would be accepted by non-prisoner volunteers; (4) Procedures for the selection of subjects within the prison are fair to all prisoners and immune from arbitrary intervention by prison authorities or prisoners. Unless the principal investigator provides to the Board justification in writing for following some other procedures, control subjects must be selected randomly from the group of available prisoners who meet the characteristics needed for that particular research project; (5) The consent form information is presented in language which is understandable to the subject population; (6) Adequate assurance exists that parole boards will not take into account a prisoner's participation in the research, and each prisoner is clearly informed in advance that participation in the research will have no effect on his or her parole; and (7) Where the Board finds there may be a need for follow-up examination or care of participants after the end of their participation, adequate provision has been made for such examination or care, taking into account the varying lengths of individual prisoners' sentences, and for informing participants of this fact.

(b) The IRB shall carry out such other duties as may be assigned, and

(c) The institution shall certify to the funding body and the Supreme Council of Health that the duties of the IRB under this section have been fulfilled.

Permitted research involving prisoners

(a) Biomedical or behavioral research may involve prisoners as subjects only if:

(1) The institution responsible for the conduct of the research has certified that the IRB has approved the research; and (2) In the judgment of the funding body and the Supreme Council of Health, the proposed research involves solely the following:

(i) Study of the possible causes, effects, and processes of incarceration, and of criminal behavior, provided that the study presents no more than minimal risk and no more than inconvenience to the subjects; (ii) Study of prisons as institutional structures or of prisoners as incarcerated persons, provided that the study presents no more than minimal risk and no more than inconvenience to the subjects; (iii) Research on conditions particularly affecting prisoners as a class (for example, vaccine trials and research on social and psychological problems such as alcoholism, drug addiction, and sexual assaults) provided that the study may proceed only after the Supreme Council of Health has consulted with appropriate experts; or (iv) Research on practices, both innovative and accepted, which have the intent and reasonable probability of improving the health or well-being of the subject. In cases in which those studies require the assignment of prisoners in a manner consistent with protocols approved by the IRB to control groups which may not benefit from the research, the study may proceed only after the Supreme Council of Health has consulted with appropriate experts, of the intent to approve such research.

Additional Protections For Children Involved As Subjects In Research

(a) This subpart applies to all research involving children as subjects either in Qatar or in collaboration with foreign institutions. Institutional heads may adopt non-substantive procedural modifications as may be appropriate from an administrative standpoint.

(b) Exemptions applicable to this subpart include those mentioned above involving research conducted in established or commonly accepted educational settings; involving the use of educational tests; the collection or study of existing data; research and demonstration projects; and taste and food quality evaluation and consumer acceptance studies. Exemption regarding educational tests is also applicable to this subpart. However, exemption for research involving survey or interview procedures or observations of public behavior does not apply to research covered by this subpart, except for research involving observation of public behavior when the investigator(s) do not participate in the activities being observed.

(c) The exceptions, additions, and provisions for waiver as they appear above are applicable to this subpart.

Definitions.

The definitions described above shall be applicable to this subpart as well. In addition, as used in this subpart:

(a) *Children* are persons who have not attained the legal age for consent to treatments or procedures involved in the research, under the applicable law of the State of Qatar. (i.e. less than 18 years of age).

(b) *Assent* means a child's affirmative agreement to participate in research. Mere failure to object should not, absent affirmative agreement, be construed as assent.

(c) *Permission* means the agreement of parent(s) or guardian to the participation of their child in research.

IRB duties.

In addition to other responsibilities assigned to IRBs, each IRB shall review research covered by this subpart and approve only research which satisfies the conditions of all applicable sections of this subpart.

Research not involving greater than minimal risk

Institutions will conduct or fund research in which the IRB finds that no greater than minimal risk to children is presented, and only if the IRB finds that adequate provisions are made for soliciting the assent of the children and the permission of their parents or guardians, as set forth in this policy.

Research involving greater than minimal risk but presenting the prospect of direct benefit to the individual subjects

Institutions will conduct or fund research in which the IRB finds that more than minimal risk to children is presented by an intervention or procedure that holds out the prospect of direct benefit for the individual subject, or by a monitoring procedure that is likely to contribute to the subject's well-being, only if the IRB finds that:

(a) The risk is justified by the anticipated benefit to the subjects;

(b) The relation of the anticipated benefit to the risk is at least as favorable to the subjects as that presented by available alternative approaches; and

(c) Adequate provisions are made for soliciting the assent of the children and permission of their parents or guardians.

Research involving greater than minimal risk and no prospect of direct benefit to individual subjects, but likely to yield generalizable knowledge about the subject's disorder or condition

Institutions will conduct or fund research in which the IRB finds that more than minimal risk to children is presented by an intervention or procedure that does not hold out the prospect of direct benefit for the individual subject, or by a monitoring procedure which is not likely to contribute to the well-being of the subject, only if the IRB finds that:

(a) The risk represents a minor increase over minimal risk;

(b) The intervention or procedure presents experiences to subjects that are reasonably commensurate with those inherent in their actual or expected medical, dental, psychological, social, or educational situations;

(c) The intervention or procedure is likely to yield generalizable knowledge about the subjects' disorder or condition which is of vital importance for the understanding or amelioration of the subjects' disorder or condition; and

(d) Adequate provisions are made for soliciting assent of the children and permission of their parents or guardians.

Research not otherwise approvable which presents an opportunity to understand, prevent, or alleviate a serious problem affecting the health or welfare of children

Institutions will conduct or fund research that the IRB does not believe meets the requirements only if:

(a) the IRB finds that the research presents a reasonable opportunity to further the understanding, prevention, or alleviation of a serious problem affecting the health or welfare of children; and

(b) the Supreme Council of Health, after consultation with a panel of experts has determined either:

(1) that the research in fact satisfies the conditions applicable in this policy, or (2) the following: (i) the research presents a reasonable opportunity to further the understanding, prevention, or alleviation of a serious problem affecting the health or welfare of children; (ii) the research will be conducted in accordance with sound ethical principles; (iii) adequate provisions are made for soliciting the assent of children and the permission of their parents or guardians.

Requirements for permission by parents or guardians and for assent by children

(a) In addition to the determinations required under other applicable sections of this subpart, the IRB shall determine that adequate provisions are made for soliciting the assent of the children, when in the judgment of the IRB the children are capable of providing assent. In determining whether children are capable of assenting, the IRB shall take into account the ages, maturity, and psychological state of the children involved. This judgment may be made for all children to be involved in research under a particular protocol, or for each child, as the IRB deems appropriate. If the IRB determines that the capability of some or all of the children is so limited that they cannot reasonably be consulted or that the intervention or procedure involved in the research holds out a prospect of direct benefit that is important to the health or well-being of the children and is available only in the context of the research, the assent of the children is not a necessary condition for proceeding with the research. Even where the IRB determines that the subjects are capable of assenting, the IRB may still waive the assent requirement under circumstances in which consent may be waived as described above.

(b) In addition to the determinations required under other applicable sections of this subpart, the IRB shall determine, in accordance with and to the extent that consent is

required, that adequate provisions are made for soliciting the permission of each child's parents or guardian. Where parental permission is to be obtained, the IRB may find that the permission of one parent is sufficient for research to be conducted.

(c) In addition to the provisions for waiver contained above, if the IRB determines that a research protocol is designed for conditions or for a subject population for which parental or guardian permission is not a reasonable requirement to protect the subjects (for example, neglected or abused children), it may waive the consent requirements, provided an appropriate mechanism for protecting the children who will participate as subjects in the research is substituted, and provided further that the waiver is not inconsistent with current laws. The choice of an appropriate mechanism would depend upon the nature and purpose of the activities described in the protocol, the risk and anticipated benefit to the research subjects, and their age, maturity, status, and condition.

(d) Permission by parents or guardians shall be documented in accordance with and to the extent required by this policy.

(e) When the IRB determines that assent is required, it shall also determine whether and how assent must be documented.

(f) If the research requires making videos or photographs of Women and / or children, the IRB should strictly scrutinize this and eliminate every possibility of any misuse of these videos or photographs for any purpose.

Ethical Conduct of Clinical Trials

A clinical trial is a research study on human volunteers to answer specific health questions. Carefully conducted clinical trials are the fastest and safest way to find treatments that work in people and ways to improve health. Interventional trials determine whether experimental treatments or new ways of using known therapies are safe and effective under controlled environments. To ensure that participants in clinical trials are not unduly exposed to unreasonable or unnecessary research risks, **Monitoring Boards** are an important component of the overall process of ensuring subject safety and data quality.

DATA AND SAFETY MONITORING

Definitions

Clinical Research: Clinical Research is research conducted with human subjects (or on material of human origin such as tissues, specimens and cognitive phenomena) for which an investigator directly interacts with human subjects. Excluded from this definition are in vitro studies that utilize human tissues that cannot be linked to a living individual.

Clinical Trial: A Clinical Trial is a prospective biomedical or behavioral research study of human subjects that is designed to answer specific questions about biomedical or behavioral interventions such as: drugs, treatments, devices, or new ways of using known drugs, treatments, or device.

Observational trials address health issues in large groups of people or populations in natural settings.

Monitoring Boards for Data and Safety

The following is general guidance:

For Phase III clinical trials, a Data and Safety Monitoring Board (DSMB) is required. For a Phase II trial, a DSMB may be established depending on the study, but in most cases a DSMB appointed by the funded institution may suffice.

For a Phase I trial, monitoring by the PI and the local IRB usually suffices. However, a novel drug, device or therapy with a high or unknown safety profile may require a DSMB.

For an Observational Study, a Monitoring Board (OSMB) may be established for large or complex observational studies. This will be determined on a case-by-case basis by the funding body and the Supreme Council of Health.

The Supreme Council of Health requires research institutions in consultation with the funding body to establish DSMBs for clinical trials involving interventions that entail potential risk to participants. The purpose of this Board is to provide independent advice concerning scientific issues pertaining to subject safety and data quality. In monitoring the safety of the trial, the Board also may recommend termination in the event of early significance of findings or the determination of unacceptable adverse effects. The DSMB membership is suggested by the lead investigators and appointed in consultation with the Supreme Council of Health. The Board consists of individuals who are not associated with the institutions participating in the trial. Potential members of the DSMB should be of renowned scientific stature, experience and without potential or perceived conflict of interest to provide unbiased advice.

Monitoring activities should be conducted by experts in all scientific disciplines needed to interpret the data and ensure patient safety. Clinical trial experts, biostatisticians, bioethicists, and clinicians knowledgeable about the disease and treatment under study should be part of the monitoring group or be available if warranted.

The Supreme Council of Health with assistance from the research funding institution should assure whether the participants have conflicts of interests with or financial stakes in the research outcome; and when these conflicts exist, decision must be made to manage these in a reasonable manner.

Generally, DSMBs meet routinely first in open session, attended by selected trial investigators as well as a representative from the funding body and from the Supreme Council of Health staff and perhaps industry representatives, and then in closed session with Supreme Council of Health staff where they review emerging trial data. In the closed session, no one with a proprietary interest in the outcome should be allowed. Participants in the review of "masked" or confidential data and discussions regarding continuance or stoppage of the study should have no conflict of interest with or financial stake in the research outcome.

Confidentiality must be maintained during all phases of the trial including monitoring, preparation of interim results, review, and response to monitoring recommendations. Besides selected Supreme Council of Health's staff and trial biostatisticians, only

voting members of the DSMB should see interim analyses of outcome data. Exceptions may be made under circumstances where there are serious adverse events, or whenever the DSMB deems it appropriate.

DSMB monitoring data and safety of interventional trials will perform the following activities:

- Review the research protocol and plans for data and safety monitoring.
- Evaluate the progress of interventional trial(s), including periodic assessments of data quality and timeliness, participant recruitment, accrual and retention, participant risk versus benefit, performance of trial sites, and other factors that can affect study outcome. Monitoring should also consider factors external to the study when interpreting the data, such as scientific or therapeutic developments that may have an impact on the safety of the participants or the ethics of the study.
- Make recommendations to the Supreme Council of Health, the funding body, IRB, investigators and their institutions concerning continuation or conclusion of the trial(s).
- Protect the confidentiality of the trial data and the results of monitoring

Responsibilities

The Supreme Council of Health staff and the funding body staff in collaboration with the research institution officials and the investigators are responsible for adhering to this policy including but not limited to:

- ensuring that the monitoring activities occur in adherence to the approved DSM Plan
- responding to recommendations by the monitoring activities
- assuring that the Investigators are responsive to the recommendations from the monitoring activities.
- Each Monitoring Board is an independent advisory group to the Supreme Council of Health the funding body and the investigators with the responsibility of providing recommendations concerning starting, continuing, and/or stopping the clinical research trial under review.
- The Monitoring Board's recommendations are based on:
 - A. Safeguarding the interests of study participants
 - B. Assessing the safety and efficacy of study procedures
 - C. Monitoring the overall conduct of the study.
- In addition, the Monitoring Board is asked to make recommendations regarding:
 - 1 Participant Safety
 - 2 Efficacy of the study intervention (DSMB only)
 - 3 Benefit/risk ratio of procedures and participant burden
 - 4 Selection, recruitment, and retention of participants
 - 5 Adherence to protocol requirements
 - 6 Data and Statistical Analysis plan
 - 7 Adequacy of measured and collected data

- 8 Amendments to the study protocol and consent forms, only if cannot be influenced by knowledge of interim outcomes data (DSMBs only);
- 9 Performance of individual centers and core labs

Observational Monitoring Boards (OSMBs)

- The Supreme Council of Health and the funding body may require the appointment of OSMBs for observational studies to help assure the integrity of the study by closely monitoring data acquisition for comprehensiveness, accuracy, and timeliness; and monitoring other concerns such as participant confidentiality.

Selection and Approval of DSMB Members

- The Board must be formed as soon as a decision to fund the clinical research study/trial is made, because the Board's first action will be to accept the protocol.
- The number and expertise of Board members is determined by the size and complexity of the clinical trial or observational study.
- Typically, membership consists of five to nine members who collectively provide adequate representation in biostatistics, ethics, clinical trials, and the specific area(s) of research to be studied.
- The chairperson must have clinical trial experience, preferably in the area under study.
- The final appointment of Board members is contingent on the absence of any conflicts or conceived conflicts of interest.
- Individuals invited to serve on Monitoring Boards are required to complete and submit a "Conflict of Interest Certification" prior to participating in any meetings and annually thereafter.
- The oversight plan for the Monitoring Board would be developed collaboratively prior to commencing the study.