WAYNE STATE UNIVERSITY

HIC Policy/Procedure

Wayne State University Human Investigation Committee	
Subject	The Inclusion of Women and Minorities in Clinical Research
Form Date	Revised 7/23/10
Approvals	10/27/97 Steering Committee, 11/97 All IRB Committees, 4/25/98 Administrative Approval, 9/30/10 Administrative Approval

Background

In accordance with its dedication to the highest levels of research integrity, all research at Wayne State University is conducted in compliance with the principles of the Belmont Report and other ethical codes of conduct for research, such as the Declaration of Helsinki and the Nuremberg Code, and is consistent with Good Clinical Practice (GCP) guidelines. Wayne State has made a commitment to conduct ***all*** research, regardless of sponsorship, under these principles and all relevant local, state, federal and international regulations in order to provide the same high level of protection for all human participants.

Based on federal regulations described in the Civil Rights Act of 1964, it is illegal to discriminate against individuals on the basis of sex or race. By extension, the *automatic* exclusion of women or minorities from research protocols is discriminatory.

Sections of the Code of Federal Regulations (45 CFR 46.111) as well as recent FDA and NIH guidelines, also address the inclusion of women and minorities in research. The inclusion of these groups is meant to ensure that they receive an equal share of the benefits of research and that they do not bear a disproportionate burden. For the purposes of generalizability, investigators must include the widest possible range of populations as well as both genders.

NIH guidelines encourage investigators to actively recruit women and minorities into their trials in order to assure that adequate numbers are included in clinical research. These groups must be included in such a way that valid analyses of differences can be accomplished, especially in Phase III clinical trials. Outreach programs are recommended, and cost is not an acceptable reason to exclude underrepresented groups.

Department of Defense (DoD) guidelines apply 45 CFR 46, Subparts B, C, and D for the protection of vulnerable classes of subjects. For specifics, see DoD Directive 3216.02 when human research is conducted by a DoD component (an organizational entity within the DoD).

Inclusion requirements do not apply if they are inappropriate with respect to the subjects' health or the purpose of the research, or other circumstances as designated by federal agencies, nor do they apply if there is substantial evidence that there are no differences in the study variables or treatment effects.

Clinical research includes any biomedical or behavioral research in human subjects. A *minority group* is a readily identifiable subset of the U.S. population that is distinguished by racial, ethnic, and/or cultural heritage. The Office of Management and Budget Directive No. 15 defines the minimum standard of categories as follows: American Indian or Alaskan Native, Asian or Pacific Islander, Black, not of Hispanic origin, and Hispanic.

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Inclusion of women: The HIC requires that clinical research protocols include adequate representation of women. Specifically, there should be approximately equal numbers of both sexes in populations at risk unless different proportions are appropriate because of *known* prevalence, incidence, morbidity, mortality rates, or expected intervention effect.

Such exceptions should be described in the protocol as part of the justification for any apparent gender inequity. The rationale must be scientifically based.

For research sponsored by the Environmental Protection Agency (EPA), the following guidance applies:

- EPA prohibits research involving the intentional exposure of pregnant women, nursing women, or children to any substance.
- EPA requires application of 40 CFR 26 Subparts C and D to provide additional protections to pregnant women and children as participants in observational research, i.e., research that does not involve intentional exposure to any substance.
- EPA policy requires submission of IRB determinations and approval to the EPA Human Subjects Research Review official for final review and approval before the research can begin.
- For research not conducted or supported by any federal agency that has regulations for protecting human research participants and for which the intention of the research is submission to the EPA, the EPA regulations protecting human research participants apply, including:
    - EPA extends the provisions of the 40 CFR 26 to human research involving the intentional exposure of non-pregnant, non-nursing adults to any substance.
    - EPA prohibits the intentional exposure of pregnant women, nursing women, or children to any substance.

Inclusion of minorities: The HIC requires that clinical research protocols include adequate representation of minorities, including their sub-populations. The inclusion of minorities must be considered in all stages of research design. Researchers should collect data on groups of whom knowledge gaps exist, or in whom the disease or condition is disproportionately prevalent. Therefore, investigators should be aware of concurrent research that addresses specific minority populations, as well as areas where it would be appropriate to study a single minority group.

From a practical perspective, there is some theoretical limit on the number of such subgroups that can realistically be studied in detail in any given protocol. Therefore, the investigator should clearly address the rationale for inclusion or exclusion of minorities and their subgroups in terms of the purpose of the research. Scientific justifications must be presented. Emphasis should be placed upon inclusion of those sub-populations in which there is little information, or in which the disease or condition of interest manifests itself disproportionately, or in which the invention operates in an appreciably different way.

In geographic locations where limited numbers of racial/ethnic populations are available, the investigator must address the issue of terms of the purpose of the research and such factors as the size of the study; the relevance of the disease or condition; and the feasibility of collaborating to include minority groups. Outreach programs are recommended.

Women and minorities are to be included in such a way that valid analysis of gender or populations differences can be accomplished if appropriate, particularly in Phase III clinical trials.

Per ICH-GCP guidelines (E6), the investigator is responsible for the following:

- Informing the participant's primary physician about the participant's participation in the clinical trial if the participant has a primary physician and if the participant agrees to the primary physician being informed.
- Although a participant is not obliged to give her reasons for withdrawing prematurely from a clinical trial, the investigator must make a reasonable effort to ascertain the reason for the participant's request to withdraw, while fully respecting the participant's rights.

HIC Policy for IRB Review of Protocols

Each protocol must be reviewed individually to determine whether the plans for inclusion of minorities in that particular study are appropriate and/or adequate. The automatic exclusion of women or minorities (i.e. without a stated rationale) is not acceptable. Reviewers should ask the investigator for an explanation of the rationale for inclusion or exclusion if it is not given or it is not clear. The rationale must be scientifically justifiable.

The NIH has recently provided a "Decision Tree for Inclusion of Women and Minorities in Clinical Research". Reviewers are encouraged to use this as a guideline for reviewing individual protocols.

References

Civil Rights Act of 1964

45 CFR 46.111

45 CFR 46, Subparts B, C, and D

40 CFR 26 Subparts C and D

The Office of Management and Budget Directive No.