



PAN AMERICAN NETWORK FOR THE DRUG REGULATORY HARMONIZATION

Good Clinical Practices Working Group (WG/GCP)

Background¹

Up until only a few years ago, complete clinical trials were concentrated in countries with the requisite research and development industry. In Latin America, phase IV trials and studies of a promotional nature were carried out, although, currently, an increase can be observed in the number of phase II and phase III trials. However, the lack of qualified human resources within the regulatory authorities and research institutions has limited development in this area. To date, most countries of the Region do not have inspection programs for clinical trial execution, and are thereby limited to protocol authorization.

In 1995, the World Health Organization (WHO) issued its *Guidelines for Good Clinical Practice (GCP) for Trials on Pharmaceutical Products*, the purpose of which was to provide a body of applicable international standards for managing biomedical research on human subjects. These guidelines were based on regulations enacted by developing countries. Another contribution was the development of training courses on good clinical practice and their implementation.²

At the Tenth International Conference of Drug Regulatory Authorities (ICDRA), supported by the WHO, a working group was formed on the regulation of good and ethical clinical practices. The group analyzed scientific advances in the pharmaceutical field (genetic therapy and biotechnological products) and other aspects not included in the guidelines proposed by WHO, and called for more rigorous application of these guidelines.³

ICDRA recommendations include: a) Member States should implement the *Guidelines for Good Clinical Practice for Trials on Pharmaceutical Products* with a view to ensuring that clinical trials meet scientific and ethical requirements; b) Member States must guarantee that informed consent is obtained, particularly with regard to vulnerable populations, and ensure that in acquiring biological samples for genetic studies GCP guidelines are followed, in addition to national and ethical standards; c) Member States must take into account that gene therapy is a new area of medicine requiring rigorous implementation of GCPs and ethics; d) inasmuch as the WHO possesses a repository of knowledge and experience regarding the efficacy and safety of innovative biotechnological products it can provide information to the Member States; and d) the WHO was asked to explore options for providing experts to strengthen the regulatory authorities of countries with limited resources in the area of evaluating clinical research.⁴

¹ Prepared by the Secretariat for the IV Pan American Conference on Drug Regulatory Harmonization. March 2005

² WHO, *Guidelines for Good Clinical Practice (GCP) for Trials on Pharmaceutical Products*, 1995.

³ Eleventh International Conference of Drug Regulatory Authorities (ICDRA), Madrid 2004.

⁴ Eleventh International Conference of Drug Regulatory Authorities (ICDRA), Madrid 2004.

With respect to harmonization working groups, the most significant advances are being made at the International Conference on Harmonization of Technical Requirements for Registration of Pharmaceuticals for Human Use (ICH). This Conference brings together regulatory authorities and the pharmaceutical industry from Europe, Japan and the United States of the Americas. To date, these groups have prepared the manual *Good Clinical Practice: Consolidated Guidance*, which describes the responsibilities and expectations of all participants involved in clinical research—researchers, monitors, sponsors, and research institutions. The aforementioned manual covers aspects of monitoring, reporting, and filing of clinical research, and has incorporated addenda in the essential *Investigator’s Brochure*, prepared previously by the ICH.

Other documents on the subject include: a) Studies on Special Populations: b) Geriatrics: General Considerations for Clinical Research; c) Statistical Principles for Clinical Research: Selecting Control Groups Involved in Clinical Research; d) Clinical Research on Drugs for the Pediatric Population and Clinical Assessment Principles Regarding New Antihypertensive Drugs.⁵

In the Americas, in May 1999, a regional Good Clinical Practice Working Group was formed, tasked to promote the development of GCPs and to provide the Region with harmonized guidelines on the subject. This group had guidance from Argentina’s National Administration of Drugs, Food, and Medical Technology (ANMAT), and included the participation of technical representatives of several countries. On that occasion current legislation governing clinical research in the Region was analyzed and the necessary aspects were identified with a view to incorporating regulations on the subject. The group used the ICH manual as a reference, modifying it in places to adjust to the realities of the Region.⁶

The expert report on good clinical practices was submitted at the Second Pan American Conference on Drug Regulatory Harmonization. This was regarded as a major milestone in the harmonization process with regard to addressing the topic of GCPs. The participants at the Conference formally established the Working Group on Good Clinical Practice (WG/GCP) and considered this topic a priority area for the Pan American Network for Drug Regulatory Harmonization (PANDRH). The participants expressed interest in continuing work on toward the standardization of criteria to facilitate the processes of harmonization.⁷

In 2000, the WG/GCP conducted an assessment of the situation of the countries of Latin America in terms of GCPs regulation. Twelve countries participated in the study, which found that 10 of the 12 countries have regulation in place on clinical trials, with different contents, requirements, and application of aspects regarding ethics committees, informed consent, research on vulnerable populations, and certification of researchers and research centers. Moreover, inspections of institutions where clinical trials are conducted are only carried out in three countries. This situation demonstrates the need in the Region for harmonizing aspects regarding the authorization and follow-up of clinical research.⁸

⁵ ICH webpage: www.ich.org

⁶ PAHO, *Meeting of Experts on Good Clinical Practices, Argentina, 1999.*

⁷ *Second Pan American Conference on Drug Regulatory Harmonization. 1999.*

⁸ PAHO, *Report on the assessment of the situation of Good Clinical Practices in 12 Latin American countries, 2000.*

During the Third Pan American Conference on Drug Regulatory Harmonization the Working Group on Good Clinical Practice (WG/GCP) reported on its activities and submitted proposals for consideration two proposals addressing the greatest needs of harmonization: a) an ethics committee; and b) informed consent, so that these proposals could be used as support materials to guide subregional integration groups on projects and to assist countries in establishing ethics committees and regulations to govern informed consent. In addition, the WG/GCP submitted a work plan for the next period and proposed indicators to monitor GCP implementation in the Americas.⁹

The Conference endorsed the proposals, recommending, *inter alia*, that: a) authorization and monitoring of clinical research, ethics committees, informed consent, and investigators, is the responsibility of regulatory authorities; b) regulatory authorities should harmonize procedures for evaluating protocols of clinical trials; and c) the WG/GCP should develop inspection guidelines to monitor Good Clinical Practice and directives on pediatric drug research.

Subsequently, the WG/GCP devoted its energies to preparing the document ***Good Clinical Practices: Document of the Americas***. This document integrates the two aspects already approved by the Conference, expands its content to cover the most important aspects of GCP regulatory administration. The preparation of the document took into account the different degrees of development of regulations governing the clinical research of drugs in the Region, the needs of national regulatory authorities in addressing the growing number of requests for bioequivalence studies in order to promote the interchangeability of products, and the growing trend toward assigning national regulatory authorities with responsibility for regulating and monitoring implementation of national GCPs. The document is designed to serve as guidelines for regulatory agencies on the authorization and monitoring of clinical trials, and to assist researchers, ethics committees, universities, and companies in conducting and evaluating such research.

As a basis for the preparation of this document, members of the WG/GCP used guidelines developed by WHO, the ICH, and current legislation of those countries of the Region with the most experience in this area.

The document ***Good Clinical Practices: Document of the Americas*** was officially adopted by the IV Pan American Conference on Drug regulatory Harmonization on March 2005.

⁹ *Third Pan American Conference on Drug Regulatory Harmonization, Washington, 2002.*