Ethics in cluster randomized trials

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Why do CRTs pose ethical issues?



1. CRTs involve groups rather than individuals

Individual randomized controlled trials:

- Involve individuals, commonly patients
- •Ethics are well understood and aim to protect the liberty and welfare of individuals

Cluster randomized controlled trials:

- Involve social groups, the moral status of which is not well understood
- •Group interests may conflict with individual interests, complicates benefit-harm assessment



2. The units of randomization, intervention, and outcome assessment differ within any given trial

Individual randomized controlled trials:

• Units of randomization, intervention and outcome assessment are the same

Cluster randomized controlled trials:

- Complex and have multiple levels
- Complicates the identification of research participants
- •From whom is informed consent required?



3. Clusters may be randomized before cluster members can be approached for informed consent

Individual randomized controlled trials:

• Patients are identified and approached for consent prior to study participation

Cluster randomized controlled trials:

- Clusters may be randomized prior to identification of individual cluster members
- Is consent to randomization required?
- May gatekeepers provide consent to randomization?



4. Intervention may be directed at the level of the individual or the level of the cluster

Individual randomized controlled trials:

• Study interventions are directed at the patient

Cluster randomized controlled trials:

- Study interventions may be directed at the individual or the cluster, or both
- •Cluster-level interventions may be difficult for cluster members to avoid
- •Refusal of study participation may be meaningless



Guidelines and Guidance



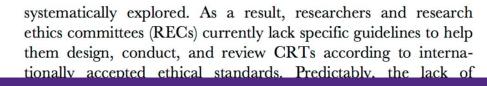
The Ottawa Statement on the Ethical Design and Conduct of Cluster Randomized Trials

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Introduction

Cluster randomized trials (CRTs), also known as group randomized, place-based, or community intervention trials, are



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Ottawa Statement (2012)

1. Justifying the cluster randomized design

DEC roview
 Identifying research participants
 Obtaining informed consent
 Gatekeepers

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- 7. Protecting vulnerable participants



Who is the research participant?



- The units of randomization, intervention, and outcome assessment differ within any given trial
- Identification of research participants is logically prior to the application of protections

- Two errors:
 - Over-inclusive definition runs the risk of unduly burdening research
 - Under-inclusive definition will fail to provide protections to those who have a right to them.



- An individual whose interests may be affected by study interventions or data collection procedures
- A research participant is an individual...
 - 1. Who is the intended recipient of an experimental (or control) intervention; or
 - 2. Who is the direct target of an experimental (or control) manipulation of his/her environment; or
 - 3. With whom an investigator interacts for the purpose of collecting data about that individual; or
 - 4. About whom an investigator obtains identifiable private information for the purpose of collecting data about that individual.



- In public health studies in which an entire community is intervened upon, all community members may be research participants
- In knowledge translation studies, health professional who are intervened upon are research participants
- Patients of those health professionals are not research participants unless they are otherwise intervened upon, interacted with, or their private health information is collected.



Devon Active Villages Evaluation trial (cluster-cluster)

• Residents of villages (2+3)

Computerized guidelines for asthma/ angina (professional-cluster)

- Physicians (1)
- Patients (3+4)

<u>Cleansing of the umbilical stump</u> (individual-cluster)

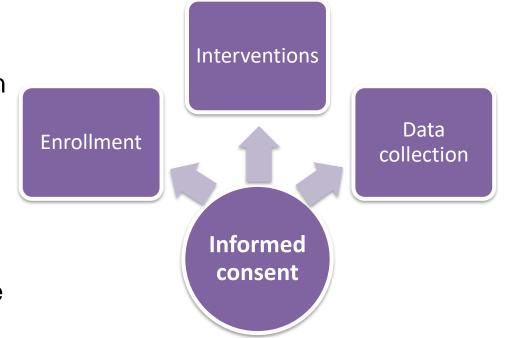
• Mothers (3) and neonates (1)



Who must provide informed consent?



- "Researchers must obtain informed consent from human research participants in a CRT, unless a waiver of consent is granted by a REC under specific circumstances."
- Heuristic: "Get consent where you can."





- Health providers commonly research
 participants in CRTs
 - Knowledge translation interventions
 - Health services interventions
- Researchers and RECs may fail to recognize health providers as research participants
- Health professionals are entitled to the protection of REC review and informed consent (unless a waiver applies).





- Waiving the consent requirement can only be justified when it is necessary to do so, and when the risk involved is minimal
- According to the Ottawa Statement a waiver of consent may be appropriate when participation poses only <u>minimal risk</u> and:
 - Cluster-level intervention is <u>difficult or impossible to avoid;</u> or,
 - Due to cluster size or other factors, requiring informed consent makes the study <u>infeasible</u>.



<u>Devon Active Villages Evaluation trial</u> (cluster-cluster)

- Waiver of informed consent for study intervention
- Consent for postal survey

<u>Computerized guidelines for asthma/ angina</u> (professional-cluster)

- Informed consent is required from physicians
- Waiver of consent for patient records; consent for postal survey
 <u>Cleansing of the umbilical stump (individual-cluster)</u>
- Informed consent from mothers.



What is the role of gatekeepers?



Gatekeepers

- "[A]n individual, body, or mechanism that can represent the interests of the cluster"
- Gatekeepers do not have the authority to provide proxy consent on behalf of cluster members, and CRTs should not proceed on the basis of such "consent".



Gatekeepers

- When a CRT may substantially affect cluster or organizational interests, gatekeepers may protect group interests
- Consultation with cluster members may protect group interests by subjecting the study to examination and discussion by those whose interests may be affected
- Permission is appropriately sought when a gatekeeper has the legitimate political authority to provide it; for example:
 - School principal may provide permission after considering staff availability, financial implications, and teachers/students willingness



Gatekeepers

<u>Devon Active Villages Evaluation trial (cluster-cluster)</u>

Community consultation and permission

Computerized guidelines for asthma/ angina (professional-cluster)

• Permission of practice manager

<u>Cleansing of the umbilical stump (individual-cluster)</u>

• Permission of public health/ community development authority.



Ethics and Pragmatic RCTs Research Group



