From: OC GCP Questions
To: [redacted]
Subject: Collection and Reporting of Run-in Data
Date: Monday, January 06, 2014 10:59:28 AM

Good morning –

In general, if a subject experiences an event, such as the scenario you describe in your email and after the subject agreed to participate in the study, signed the IRB-approved informed consent form, and passed the screening tests but before administration of any study drug, this event should not be reported as an adverse event/serious adverse event (AE/SAE).

FDA's definition of an adverse event found in 21 CFR 312.32(a) is:
Any untoward medical occurrence associated with the use of a drug in humans, whether or not considered drug related.

Because a subject has not yet received study drug in the scenario you describe, the event could not be considered associated with the use of the study drug.

Nevertheless, because an event or condition could affect the subject's eligibility/continued eligibility for the study, the event should still be recorded by the study site in the study records, tracked, and be reported to the sponsor.

The investigator should also ensure that the subject receives appropriate medical care, for example, by providing it directly or by referring the subject back to the subject's primary care physician (see FDA's guidance "Investigator Responsibilities – Protecting the Rights, Safety, and Welfare of Study Subjects" at http://www.fda.gov/downloads/drugs/guidancecomplianceregulatoryinformation/guidances/ucm187772.pdf for additional discussion of medical care).
It is best for investigators to follow the IRB-approved protocol and to consult the sponsor regarding expectations and any questions related to events that occur after a subject is considered on study, but before they receive any dose of study medication.

Also, in accordance with 21 CFR 312.66, investigator's must promptly report to the IRB all unanticipated problems involving risk to human subjects or others so you may want to consult your IRB to find out if such an event requires reporting to the IRB.

If you are unsure as to what should be reported, you can always check with the FDA review division that is overseeing your study.

If you have additional specific questions related to AE reporting, you may contact CDER, Office of Medical Policy directly. CDEROMP@fda.hhs.gov

I hope this information is helpful. Please contact us at gcp.questions@fda.hhs.gov should you have additional questions.

Kind regards,
Doreen M. Kezer, MSN
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Office of Good Clinical Practice
Office of the Commissioner, FDA

employee providing it. This information does not necessarily represent the formal position of FDA, and does not bind or otherwise obligate or commit the agency to the views expressed.

From: [Redacted]
Sent: Saturday, January 04, 2014 11:01 AM
To: OC GCP Questions
Subject: Collection and Reporting of Run-in Data

Sirs:

I am seeking the current thinking/policy of FDA on the requirements of GCP relating to the collection, retention, and reporting of safety information obtained during a clinical investigation during post-screening run-in periods defined in the protocol. More specifically, are sponsors required to collect data and report safety on subjects who successfully screened into a study and are being managed by protocol defined invasive testing and treatment PRIOR to administration of investigating study drug. In a specific case, the study requires subjects take marketed drugs (per study required administration schedules) for some 30+ days prior to randomization and assignment to a investigational drug. During this 30+ day period, subjects receive invasive tests (albeit standard of care). As part of the question, do GCP requirements expect that adverse experiences (these would be prior to exposure to any investigational product and not associated with the use of the drug) related to the run-in treatment dictated by the protocol be reported to IRB/FDA and maintain in the clinical database.

Best Regards,

[illegible]