



# CLINICAL TRIAL TRANS- PARENCY

ROADMAP FOR  
ADVOCATING  
AT YOUR  
UNIVERSITY



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# 1 WHY IS CLINICAL TRIALS TRANSPARENCY SO IMPORTANT?



## Failure to publish results directly harms patients.

Doctors making decisions on which medicines to prescribe to their patients need to know that they are prescribing the most effective and appropriate treatments. In order to do so, they must be confident that they have access to all of the evidence on these - which drugs work, and which do not. If only certain trials are published, this is not possible, putting the patients' health at risk.

## Failure to publish results creates a financial burden on health systems.

Failing to publish negative trials about new drugs can make drugs seem more effective than they really are - these newer, more expensive, patented drugs may then be used by health systems and doctors based on false improvement. Thus, countries pay more for medicines that offer no improvement over the drugs that are already available, and patients do not receive the most cost-effective treatment.

## Failure to publish results leads to unnecessary waste of resources.

Failure to publish the results of clinical trials leads to duplicated research and superfluous studies about research questions that are already answered. This is both a waste of valuable resources and puts trial participants unnecessarily at risk by assigning control groups to already proven less effective treatment.

## Failure to publish results makes independent safety analysis of medicines impossible.

When decisions from regulatory agencies to approve new medicines are based partly on unpublished data, it impairs independent analysis and reanalysis of the safety of a medicine, before and after it has been put on the market - these independent analyses can be critical for flagging up safety concerns.

## Failure to publish results betrays the trust of trial participants.

Not publishing results is unethical to trial participants, who volunteer because they believe (and are told so) that their participation in trials will further the scientific knowledge and inform medical decisions in the future.





# 2

## REGULATIONS AND INTERNATIONAL AGREEMENTS

### The Declaration of Helsinki

The Declaration of Helsinki is a set of ethical principles regarding human experimentation developed for the medical community by the World Medical Association (WMA). It is widely regarded as the cornerstone document on human research ethics.

The Declaration clearly states that it is illegal to not publish the results of clinical trials:

*Article 35 - Every research study involving human subjects must be registered in a publicly accessible database before recruitment of the first subject.*

*Article 36 - Researchers, authors, sponsors, editors and publishers all have ethical obligations with regard to the publication and dissemination of the results of research.*

*Researchers have a duty to make publicly available the results of their research on human subjects and are accountable for the completeness and accuracy of their reports. All parties should adhere to accepted guidelines for ethical reporting. Negative and inconclusive as well as positive results must be published or otherwise made publicly available. [1]*

### European Commission Regulations and Current Situation in Europe

While reporting results has long been seen as a scientific and ethical imperative, which big institutions such as the World Health Organization or the European Commission have been demanding more and more, no regulations have been legally enforced thus far. This will, however, change when the new EC Clinical Trial Regulations No. 536 will most likely become applicable in 2020. The new EU law is very clear: every trial on the EU clinical trials register must report results directly in the register within 12 months of completing the trial.

When this will happen exactly is still unclear, however. Although the regulation entered into force on 16 June 2014 the timing of its application depends on the development of a fully functional EU clinical trials portal and database, which will be confirmed by an independent audit. So far, there is only an EC Directive which calls for the reporting of results in the trial register. The directive strongly urges each member state to incorporate the policies of the directive in their national policies, however it is not legally

binding. EC Regulations, on the other hand, are EU laws and thus automatically become national laws. This means as soon as the EC Regulation 536 becomes applicable (hopefully in 2020), it will be illegal not to publish results in the EU Clinical Trial Register. The new EU clinical trials tracker released by Ben Goldacre and his team at the Evidence-Based Medicine Data Lab at Oxford shows that public research institutions perform badly in publishing their clinical trial results. On the other hand many big pharmaceutical companies comply with the legal requirements and have high reporting rates, some up to 100%. German and Dutch universities in particular have a low compliance, with some having not even reported the results of a single clinical trial.

The Medical University of Vienna, one of the biggest European academic sponsors of clinical trials barely reported 5% of their trials. UK Universities, on the other hand, perform comparatively better with the University of Dundee and the University of Oxford leading the list with over 80% of trial results reported.

The trial tracker is a useful tool for us to assess the performance of universities. It is not intended to shame any organization but rather to give them an opportunity for performance evaluation and grounds for improvement, as the tracker is updated on a monthly basis.





# 3 THE ROLE OF UNIVERSITIES

Perhaps surprisingly, universities are worse at publishing clinical trial results than pharmaceutical companies. [4] Universities have different motivations for not publishing the results of clinical trials than pharmaceutical companies. Because of this their pattern of non-publication is different. The ratio of non-reported negative to positive clinical trials is 2:1 for the pharmaceutical industry, but more random for universities. [6]

## Why don't universities publish negative clinical trials?

- Publishing trials takes a lot of effort, there is no incentive for researchers to put in the effort for negative trials
  - Researchers are often not aware of the existence of registries where they can publish with little effort.
- Universities think it's sufficient to publish results in journals.
  - There is less public eye on universities - attention has mainly been on pharmaceutical companies.





# 4 WHAT ARE THE SOLUTIONS?

What we want from universities:



Universities **MUST** publish results of all trials in Clinical Trials Registries, and mandate all researchers within the university to do so.

Universities **MUST** share study protocols and planned outcomes for all university trials at the beginning of the research project.



Universities **MUST** publish past trials dating back to 2014 that are not published yet in clinical trial registries.

Where external companies attempt to include clauses prohibiting universities from publishing data (e.g. in commissioned research), the universities should simply not engage with that company.







# 5 HOW CAN WE ACHIEVE THIS?

STEP

1

## Gather information

Look into how well your university is currently performing in publishing clinical trial results. A very easy way to do this is with the EU clinical trial tracker: <https://eu.trialstracker.net>. Most European Universities that are conducting clinical research should be on the tracker. If you are unable to find your university in the tracker, you can find out very easily yourself. Just go on the EU Clinical Trials Registry and look for trials that are sponsored by your university. Look up all the trials that are marked as 'completed' and find those that were completed more than 12 months ago. You can easily see whether results were published or not. We recommend you create a quick Excel template and compile a list of all the trials and mark them as 'results published' and 'no results published'. That way you get exact numbers and you can create nice diagrams and graphs.

STEP

2

## Find out what the current policies for publishing results are at your university

Does your University already have policies in place that mandate publication of results? Does your University claim to conduct research in accordance with the Helsinki Declaration/WHO standards etc.? How good is the compliance of researchers to university's own policies and guidelines? Here you can find a checklist you can fill out for your university that will tell you how strong your university's policies are in regards to clinical trial transparency: <https://www.transparimed.org/single-post/2018/08/22/How-strong-are-your-clinical-trial-reporting-policies-New-checklist>





## STEP 3

# Approach the responsible person at your university with the results you found

Find out who is the person at your university responsible for clinical trials. Here are some key people/institutions to talk to. Try to find out if any of them are at your university:


- Clinical Studies Center
  - Dean of Research
  - Department of research
  - Ethics Committee
  - Research Council
- 

Contact them and ideally request an in-person meeting where you can explain to them the current situation, discuss your university's performance and also talk to them about the new EC regulations, they might not even be aware of the new EU laws! There should be regular meetings of the research council. Ask them to put this point on their agenda. Avoid being confrontational, rather offer them to cooperate in ensuring a better compliance with the EU laws and help them find solutions to improve the situation. Get in touch with the student representatives at your university. They usually know who the responsible figures are. Plus, it's always a good idea to have them on your side. Typically there are also student representatives in the Research Council. Don't be afraid to talk to the head of your university. He/She will probably refer you but it might be helpful to have them on your side.

## STEP 4

# Offer to collaborate to improve Clinical Trial Transparency at your university

You might be asked by your university about feasible proposals to solve the issue. It is important that you have some ideas in mind on how you can support them to improve the situation. You definitely not want to come across in way that accuses them of something they are doing wrong, instead you want to offer them your support. Remember that this typically also in the interest of the responsible





person/institution you are talking to and you are not working against them. They will usually very much welcome your help and suggestions, especially if they are already aware of this problem.

Here are some ideas:

- Create student positions to support Principal Investigators. Students can do their busy work, which should always be welcome.
- Price money for negative and timely publications.
- Convince research funders to make a good publication history a condition for grants. This is definitely a more long-term solution, which will require much tenacity and can go beyond our student capacities, but we can aim big!
- Something similar, and maybe more feasible is possible within the University. For example at some German universities internal money allocation happens (to some extent) achievement oriented (in Germany this is called LOM = Leistungsorientierte Mittelvergabe). Success indicators are usually publications, patents, grant money etc. One could be good publication behaviour. Or there could be negative points for the opposite.

## STEP 5

# Urge your university to sign onto the WHO Joint Statement on Public Disclosure of Results from Clinical Trials

You can find the Joint Statement [here](#).

“Signatories not only commit to share results: they commit to share results within 12 months of trial completion ... the WHO statement uniquely and very simply covers all trials.”

How can your University sign on to the statement? Very simple: A representative of the university with the relevant authority emails Dr Vasee Moorthy (moorthyv@who.int) to indicate their agreement with statement and intention to sign on. Your Universities could seize this opportunity and be one of the first academic institutions and pioneers in terms of Clinical Trial Transparency and sign onto the WHO Joint Statement and be on top of the list together with prestigious research and funding institutions, such as the Bill and Melinda Gates Foundation, Médecins Sans Frontière and the Drugs for Neglected Disease Initiative!



## What can you do when you feel like you reached a dead end?

This roadmap gives you a basic strategy to follow for tackling the transparency problem. This strategy should be applicable for most European universities. Nevertheless, every university is structured differently and every university's research bodies will react differently to being approached by students about this issue. You may find yourselves having followed everything this roadmap suggests and feel like you reached a dead end at your university. The responsible personnel may not be responding to your repeated messaging or they give questionable excuses for not dealing with this problem immediately or ever. This can be very frustrating, since you have already invested a lot of effort and time but you feel like nothing is moving forward. Don't give up! This is where it gets interesting and where your creativity is called upon! There is no one-size-fits-all approach when it comes to really pushing your university. You need to be creative and come up with ideas that go beyond this roadmap and that are specific to your own university.

Here are some tips and specific ideas other chapters have previously had:

- First of all, make sure you are well-equipped and familiar with false excuses your university might have and counter them with convincing arguments. The argument bank at the end of this roadmap will help you maintaining the upper hand.
- Exchange experiences with other chapters who might be struggling with the same problems. Get in contact with them and see what they did or are planning to do. To make this exchange easier, we created the [Clinical Trial Campaign: Chapter Activity Tracker](#). We strongly encourage every chapter to enter a few details about their progress and to keep it updated. This will be a valuable resource for you and other chapters and also a great way to stay motivated.
- Key aspects that will help you are “credibility” and “publicity”. Try to keep an eye out for possible allies. For example, there might be researchers or organizations doing similar work in your area or even at your university. Get them on your side, the more senior the person supporting you is the more credibility this will give you and the more difficult it will make it for your university to simply dismiss your claims. Also, try to make the issue as public as possible. Organize events, such as panel discussions, quizzes etc. to raise awareness at your university, invite all your allies



and also the responsible institutions of your university (e.g. ethics committee, research council etc.). Publicity will put more pressure on them and you might be able to get them to commit publicly to actions. Find out if there are any legal options at your university, for example bringing the issue to the senate of the university or starting a petition among the students and faculty.

- Write an article for your university's newspaper! And depending on how far you are willing to take it, you can always try getting local media involved.
- Always be sure to have the student body on your side. They are a valuable ally and will have connections to responsible people at your university.

## Some useful resources:

- [Clinical Trial Reporting by UK Universities](#)
- [Transparency International's Guide for Policy Makers](#)
- [Transparimed's Roadmap to greater Transparency in Clinical Trials](#)
- Interesting especially for German UAEMers: [This study](#) looked at the publication performance of 36 German faculties. This publication is great as take several registers and journal publications into account.
- For German speakers: [The German clinical trials transparency basecamp](#) includes preparation materials and protocols for/of meetings with university officials.

Most importantly: **HAVE FUN!**

We hope that this has given you some guidance and inspiration and that you are excited and feel ready to tackle this important issue. Have fun and see it as a learning opportunity. Don't get frustrated if you do not initially get the answers you would like to hear. Perseverance is key! Advocacy work can be difficult but also very rewarding, especially if you are able to see that you are making a change. Don't hesitate to reach out to us for any support you might need!



# 6 ARGUMENT BANK

Here are some unequivocal arguments against bad excuses for not publishing results

"Asking for perfect compliance is unreasonable."

**Answer:**

No, it's not. Many companies and some small non-company sponsors have 100% compliance.

**Answer:**

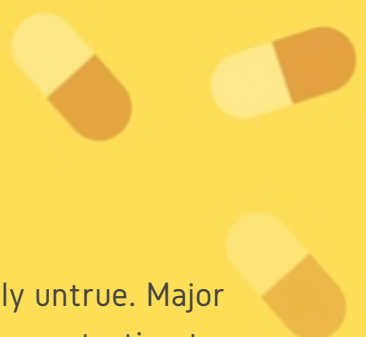
The EU rules are clear that results must be posted directly onto the EU trials register, in a standard format. This is with good reason. Reporting on a register has several advantages over academic journal publication: it is much easier to locate results; it is much easier to track compliance, and registers mandate important information that must be included in the results report. By contrast, there is extensive evidence to show that results reports in academic journals are incomplete [7], of poorer quality than registry reports, and less complete on important issues such as adverse events data [8,9]. In any case, the researchers checked a small sample of non-compliant trials to see if they really are reported in academic journals, even though this is inadequate: half were not.

"But some of the trials that are unreported in the EU Trial Registry have been reported in academic journal papers."

"But this is my research. I own the results."

**Answer:**

This is true. For research conducted on yourself and yourself alone. If you have conducted a trial on patients, then you have obligations to those patients, to your funders, to the law, and to all patients.



"There's no career incentive to report negative results."

**Answer:**

This is unethical, and increasingly untrue. Major funders and ethics approval bodies are starting to scrutinize the reporting history of researchers applying for new approvals. Some professional bodies now view non-reporting as misconduct.

**Answer:**

This is just flat out against the law, and usually against the terms of the funding. It's also unethical. Trials are conducted to inform patient care. If you don't report the results of your trial, you might as well have never done it. It should be questioned whether institutions should even be conducting further research if they are willing to make this excuse.

"There's no money left in the research grant for anyone to spend time reporting results."

"These trials are from 10 years ago/an abandoned trial/not interesting... so the results wouldn't be useful for anything now."

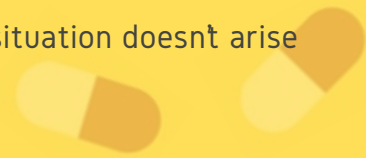
**Answer:**

The law in Europe is very clear: every trial on the EU clinical trials register must report results directly onto the register. This is for good reason. Trials with an "uninteresting" or "negative" result provide information about what doesn't work. Terminated trials that have already collected some data on some patients can contain important insights. Research on abandoned treatments can shed light on other drugs in the same class, on adverse event risks, or on new uses of older treatments.

**Answer:**

The institute has failed to ensure adequate reporting by its staff and now can't remedy that easily. If an institute is listed on the register, it remains responsible for reporting results, just as it would with, for example, a grant report. Before giving this excuse, we think sponsors should show that they have attempted to track down the results and the researcher to remedy the situation. And universities should urgently put policies in place, to make sure this situation doesn't arise again in the future!

"The researcher who ran the trial doesn't work at this institution anymore."



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