7.1 DRUG RESEARCH POLICY AND PROCEDURE

RESPONSIBLE OFFICE: Human Research Protection Program Department (HRPPD)  EFFECTIVE DATE: November 5, 2021

I. POLICY STATEMENT

A. The IRB reviews projects that involve drugs or biologics (referred to in this policy as drugs) to protect the rights and welfare of human subjects involved in such research/investigations as directed by the Department of Health and Human Services (DHHS) and by the Food and Drug Administration (FDA).

B. The IRB is responsible for evaluating the use of a drug in research involving human subjects (DHHS) or a clinical investigation (FDA) to determine if prior submission to the FDA is required or if the use of the drug is exempt from such prior submission to the FDA. If prior submission is required, the IRB must determine whether an Investigational New Drug application (IND) has been obtained.

C. An IND application may go into effect:
   a. 30 days after FDA receives the application, unless FDA notifies the sponsor that the investigations described in the application are subject to a Clinical Hold; or
   D. on earlier notification by FDA that the clinical investigations in the IND may begin. It is the policy of the UT Southwestern IRB that research involving a drug, other than the use of a marketed drug in the course of medical practice, must have an investigational new drug (IND) number provided by the FDA, unless the drug meets the FDA IND Exemption criteria described in the procedure below.

E. This policy does not apply to emergency use and use under a Treatment IND as both are covered in the 7.4 EXPANDED ACCESS TREATMENT USE OF AN UNAPPROVED DRUG/BIOLOGIC

II. SCOPE

A. This policy and procedures applies to all human subjects’ research of drugs or biologics that constitute research involving human subjects (DHHS) or clinical investigations (FDA).

III. PROCEDURES FOR POLICY IMPLEMENTATION

A. The IRB evaluates:
   a. Whether use of the drug is considered research and involves human subjects (DHHS – 45 CFR 46.101), and;
   b. Whether a drug used is considered an investigational drug and involves human subjects (FDA – 21 CFR 56.102)

A. If the IRB determines neither A.a nor A.b. above are true, the activity that includes a drug may still be reviewed. In this case, if the activity is not considered to be research (non-research) or research not involving human participants under DHHS rules the activity is reviewed following guidance in the 1.2. DETERMINING WHETHER AN ACTIVITY IS RESEARCH INVOLVING HUMAN SUBJECTS.
B. If the activity is considered Exempt research (DHHS) not constituting a clinical investigation (FDA) then it is reviewed following guidance in the 1.3. EXEMPT REVIEW OF RESEARCH.

C. All research (DHHS) involving human participants (whether or not determined not to be a clinical investigation (FDA)) is evaluated following guidance in 2.1. INITIAL REVIEW OF RESEARCH.

D. Clinical investigations are evaluated by the IRB to determine whether:
   a. Submission to the FDA for an IND is required, and if required has been completed (as indicated by documentation provided by the sponsor) or;
   b. The use of the drug is exempt from prior submission to the FDA.

E. IND Exemption Categories. Research which meets one or more of the following exemptions categories does not require prior submission to the FDA for an IND.
   a. Exemption 1 - The clinical investigation is for a drug product that is lawfully marketed in the United States and all of the following apply:
      i. The investigation is not intended to be reported to FDA as a well-controlled study in support of a new indication for use nor intended to be used to support any other significant change in the labeling for the drug.
      ii. If the drug that is undergoing investigation is lawfully marketed as a prescription drug product, the investigation is not intended to support a significant change in the advertising for the product.
      iii. The investigation does not involve a route of administration or dosage level or use in a patient population or other factor that significantly increases the risks (or decreases the acceptability of the risks) associated with the use of the drug product.
      iv. The investigation will be conducted in compliance with 21 CFR 50 and 56.
      v. The investigation will be conducted in compliance with the requirements of 21 CFR 312.7.
   b. Exemption 2 - The clinical investigation is for an in vitro diagnostic biological product that involves one or more of the following:
      i. Blood grouping serum, reagent red blood cells, and/or anti-human globulin; AND
      ii. The diagnostic test was intended to be used in a diagnostic procedure that confirms the diagnosis made by another, medically established, diagnostic product or procedure, AND
      iii. The diagnostic test will be shipped in compliance with 21 CFR 312.160.
   c. Exemption 3 – The clinical investigation is for a drug intended solely for tests in vitro or in laboratory research animals if shipped in accordance with 21 CFR 312.160.
   d. Exemption 4 – The clinical investigation involves the use of a placebo and the investigation does not otherwise require submission of an IND
   e. Exemption 5 – Dietary supplements, botanicals, or other substances designated as generally recognized as safe (GRAS) for use in food if study does NOT evaluate product’s
ability to diagnose, cure, mitigate, treat or prevent disease (see FDA guidance for required conditions)

f. Exemption 6 – Radioactive drug or biological product (see FDA guidance) if:
   i. It involves basic research not intended for immediate therapeutic, diagnostic, or similar purposes, or otherwise to determine the safety and efficacy of the product,
   ii. The use in humans is approved by a Radioactive Drug Research Committee (RDRC) that is composed and approved by FDA,
   iii. The dose to be administered is known not to cause any clinically detectable pharmacological effect in humans, and
   iv. The total amount of radiation to be administered as part of the study is the smallest radiation dose practical to perform the study without jeopardizing the benefits of the study and is within specified limits.

F. When a Clinical Investigation (i.e., research proposal) is received involving a drug with an IND number the HRPPD documents a valid IND has been received as evidenced by:
   a. A document from the sponsor indicating the IND number or;
   b. A letter from the FDA indicating the IND number or;
   c. Other IRB approved method of validation.

G. When a study involving an investigational drug is submitted to the IRB for review without an IND number:
   a. The HRPPD staff pre-reviewer considers the justification for exemption provided by the investigator/spONSOR in the eIRB application. Based on this review, the HRPPD staff pre-reviewer determines whether an IND is needed or whether the use in the clinical investigation can be exempt from the IND requirements.
   b. If the IRB agrees with the justification for exemption, then this decision is documented in the IRB files and the research is reviewed in accordance with 2.1. INITIAL REVIEW OF RESEARCH. The IRB agreement with this determination is documented in the minutes (See 8.1 IRB MINUTES).
   c. If the HRPPD staff pre-reviewer determines that an IND is required and the IRB agrees with this determination, the HRPPD staff will communicate this decision to the investigator/spONSOR and approval will not be granted until an IND number is submitted to the IRB or the FDA determines that an IND is unneeded for the study.

H. When prior submission to the FDA is required but has not yet been received
   1. The IRB may contingently approve the study under the condition that valid proof of receipt of an IND has been obtained prior to starting the study.

IV. DEFINITIONS

SEE GLOSSARY OF HUMAN RESEARCH TERMS
V. REFERENCES

<table>
<thead>
<tr>
<th>Resource</th>
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<tbody>
<tr>
<td>21 CFR 50 – PROTECTION OF HUMAN SUBJECTS</td>
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<td>45 CFR 46 – PROTECTION OF HUMAN SUBJECTS</td>
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<td>45 CFR 164 – SECURITY AND PRIVACY (HIPAA PRIVACY RULE)</td>
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<td>21 CFR 56 – INSTITUTIONAL REVIEW BOARDS</td>
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VI. REVISION AND REVIEW HISTORY

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<tr>
<th>Revision Date</th>
<th>Author</th>
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<tr>
<td>November 2021</td>
<td>HRPP</td>
<td>Defined when an IND goes into effect as per FDA regulation</td>
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<tr>
<td>June 2021</td>
<td>HRPP</td>
<td>Separated policy from P&amp;P manual. Updated references to AVPHRA and IRB Director. Minor administrative edits.</td>
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<tr>
<td>January 2019</td>
<td>HRPP</td>
<td>Revision to reference 2019 common rule</td>
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<tr>
<td>August 2017</td>
<td>HRPP</td>
<td>New Policy Development</td>
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<td>March 2012</td>
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