



Sponsor-Investigator Research and Investigational New Drugs

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Research Compliance Office
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Definitions

Sponsor-Investigator:

- ✓ Holds the IND (Investigational New Drug)
- ✓ Initiates and conducts an investigation
- ✓ Directs administration and dispensing of the drug
- ✓ Assumes all sponsor responsibilities

SIR:

- Sponsor-Investigator Research



References

eProtocol Section 6

- Investigational Drugs

FDA IND Regulations:

- 21 CFR 312
- “Investigational New Drug Application”

GUI-3m

- “Sponsor-Investigator Research Requirements”
(When a STANFORD investigator holds an IND)

GUI-36m

- “Compassionate” and “Humanitarian” Use [FDA]
 - Treatment IND
 - Single-Patient Treatment IND



Investigational Drug Documentation

Investigational Drugs, Reagents, Chemicals	
Drug, Reagent, Chemical Information	
Drug Name *	Vitamin D
Source (i.e. Pharmacy, Sponsor, etc.)	Stanford Clinical Pharmacy
If not pre-mixed, where will the material be mixed and by whom:	
Manufacturer	Vital Nutrients
IND # (if available)	79.333
Dosage	2000, 4000, and 6000 IU
Administration Route:	oral
Holder of IND	
* Indicate who holds the IND:	
<input type="radio"/>	The IND is held by the sponsor. Provide a copy of the investigator's brochure, the sponsor's protocol and the FDA letter issuing the IND number (attach in section #16). <i>The FDA letter does not have to be provided if the IND number is on the sponsor's protocol.</i>
<input checked="" type="radio"/>	The IND is held by the STANFORD (SHC, LPCH, VA) investigator. Provide a copy of the investigator's brochure (if available), the clinical protocol and a copy of the FDA letter issuing the IND number and all correspondence with the FDA on the IND (attach in section #16).
<input type="radio"/>	The IND is held by a non-STANFORD investigator. Provide a copy of the investigator's brochure (if available), the clinical protocol and a copy of the FDA letter issuing the IND number (attach in section #16).
Pharmacy Dispensing or Security and Controlled Access Plan.	
<input checked="" type="radio"/> Yes <input type="radio"/> No	Will the investigational drug/biologic be maintained and dispensed by a pharmacy or through an outpatient clinic monitored by a pharmacy?
Pharmacy Name	Stanford Clinical Pharmacy
Describe below (or attach in section 16) the procedures to be followed to prevent the Investigational drug from being used by a person other than the investigator, and to prevent it from being used in someone other than a research participant	

eProtocol Section 6

- ✓ Drug Name
- ✓ Manufacturer
- ✓ IND number
- ✓ Dosage
- ✓ Administration route
- ✓ Holder of the IND
- ✓ Pharmacy Dispensing or Security and Controlled Access Plan

Investigational Drug Documentation

Required Attachments

- FDA IND acknowledgement letter or letter of no objection
- Clinical Protocol
- Investigator's Brochure or Product Information
- ALL correspondence with FDA on IND
 - e.g., Clinical holds and annual reports



Regulations

21 CFR 312.33– FDA Annual Reports

“A sponsor shall, within 60 days of the anniversary date that the IND went into effect, submit a brief report of the progress of the investigation that includes...”



Regulations

FDA Annual Reports

Should include, for example:

- ✓ **Individual study information**
 - title, purpose, population, status
- ✓ **Summary information, such as:**
 - narrative summary showing SAE's
 - all safety reports
 - deaths/causes
 - subjects who dropped out/why
- ✓ **Investigational Plan**





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Re: BB-IND-10778-0010 Annual Report

Dear Dr. Riggins:

I am providing the Annual Report for the fifth year of our pilot study of *Total Lymphoid Irradiation, Antithymocyte Globulin and Donor Hematopoietic Progenitor Cell Transfusion in HLA Mismatched Living Donor Kidney Transplantation* conducted under BB-IND-10778.

1. Summary of the Study Conducted during the past year (December 21, 2007 – December 20, 2008).

The protocol was amended in September 2004 to change from HLA-mismatched to HLA-matched patients, since we did not achieve stable engraftment of hematopoietic progenitors in HLA-mismatched kidney transplant patients conditioned with total lymphoid irradiation (TLI) and anti-thymocyte globulin (ATG). However, in a separate study of the TLI and ATG conditioning regimen in patients with hematopoietic malignancies (New England Journal of Medicine 353: 1321-1331, 2005), almost all HLA-matched patients developed stable engraftment of hematopoietic progenitor cells. In HLA-matched combined kidney and hematopoietic progenitor cell transplant patients, we amended the protocol to infuse donor CD34⁺ selected cells (5-10x10⁶/kg) plus an add back of flow through cells from the Isolex column to make up 1x10⁶ donor T cells per kg of host body weight.

During the past year, four more HLA-matched patients were enrolled in addition to the six patients enrolled previously. The first patient developed stable mixed chimerism, and has not developed kidney transplant rejection episodes. He received no maintenance steroid therapy, one month of mycophenolate mofetil (MMF) and six months of cyclosporine posttransplant

LP Enbrel IND
2008

1) Number entered into the study to date, tabulated by age group, gender, and race:

Total subjects: 27

Age group *1 subject would not reveal DOB

18-30: 3
31-45: 3 = 24
46-60: 6
61-75: 10
76-90: 2

Gender

Female: 15 = 25
Male: 10

Race

Caucasian: 19 = 25
African American: 4
Hispanic: 2

2) Number whose participation in the study was completed as planned;

Completed participants (all data received and entered): 9

3) Number who dropped out of the study for any reason.



IRB Review Process

- Completion of Section 6 in eProtocol
- Verification of investigator's completion of SIR training
- Verification of required attachments

CQI Review Process

- Review 5 subject consent forms
- Documentation Compliance Review



IRB Staff Resources



Resources:

- GUI-3m and GUI-36m
- eProtocol – Section 6
- FDA 21 CFR 312/Annual Report Requirements

Sponsor/Investigator:

- Provides IRB with FDA correspondence, protocol modifications, and changes in risk

Spectrum (Office of Compliance, Training and Operations)

CCTO (Cancer Clinical Trials Office)

CQI (Continuous Quality Improvement):

- **Contact us with any questions or concerns**