



Continuing Review

Policy

The Institutional Review Board (IRB) is responsible for reviewing all approved research on a continuing basis.

Review must occur, within one year of the last approval date, however, the IRB may determine that review should occur at more frequent intervals. For a protocol reviewed by the full committee continuing review must occur within 1 year of the protocol being approved at a convened meeting. For a study approved under expedited review, continuing review must occur within 1 year of the date the IRB Chair or IRB member(s) designated by the Chair gives final approval.

At the time of continuing review the Full IRB or expedited reviewer will assure that the criteria for IRB approval of research (45 CFR 46.111, 46.204-207, 46.305, and 46.404-409).

When conducting continuing review and evaluating whether research continues to satisfy the criteria for IRB approval of research, The IRB will pay particular attention to the following four aspects of the research:

- Risk assessment and monitoring;
- Adequacy of the process for obtaining informed consent;
- Investigator and institutional issues; and
- Research progress.

Protocols originally approved by full committee review may undergo expedited review:

1. Where:
 - the research is permanently closed to the enrollment of new subjects;
 - all the subjects have completed all research-related interventions; and
 - the research remains active only for long term follow-up of subjects;or
2. Where no subjects have been enrolled and no additional risks have been identified;
- or
3. Where remaining research activities are limited to data analysis.

Continuing review of research, not conducted under investigational new drug application or investigational device exemption, where the other permitted expedited categories do not apply, but the IRB has determined and documented at a convened meeting that the research involves no greater than minimal risk and no additional risks have been identified may be conducted through expedited procedures.

Purpose

The Purpose of this policy is to provide guidance on the continuing review.

Procedures

Upon initial review of a protocol, the IRB determines the time interval for the next continuing review notice. Review must occur within one year of the last approval date in order for a protocol to remain active; however, the Committee may decide more frequent review is necessary. For a protocol reviewed by the full committee continuing review must occur within 1 year of the protocol being approved at a convened meeting. For a study approved under expedited review, continuing review must occur within 1 year of the date the IRB Chair or designated IRB member(s) provide initial approval. More frequent review may be based on a specific time interval, or based on a requirement to report back after a specified number of patients have been studied. In making the determination that more frequent review is required, the IRB takes into consideration the risk of the protocol, and the type of information the Committee would like to receive in order to assure appropriate oversight on an ongoing basis. Criteria used to consider whether more frequent review is required include the following:

- High-risk protocols where there is concern about significant adverse events that may be permanent, irreversible, or disabling, or that may significantly compromise the research subject.
- Protocols where the potential risks are completely unknown, unless the minutes document that approval is granted for one year.
- Protocols that involve newborns that include conditions for which it is not possible to perform studies in older children.
- Protocols submitted with data from preliminary studies that raise concern regarding the possibility of serious adverse events.

If more frequent review is required, the investigator will be informed in the approval notification and the database will be set to notify the investigator at the required time.

The IRB administrative office is responsible for tracking continuing reviews, and for notifying investigators when review is required. The Continuing Review form must be submitted and approved prior to the protocol's expiration date, and ample time must be allowed for the IRB to address any needed questions to the Principal Investigator (PI).

Three months before the protocol's expiration, the CHeRP System will send an automated notice to the PI and research team. A second and third notice may also be sent (two months and one month before expiration date, respectively) if the Continuing Review form is not received.

If a continuing review is not approved before the expiration date, the protocol will be expired. No work may continue on the protocol at that time. If there are individual patients on a protocol that may be placed at harm if the research does not continue, the investigator must obtain permission from the IRB Chairperson for individual subjects to continue.

Continuing Review – Expedited Review:

Continuing reviews which qualify for expedited review as described by the Secretary of DHHS in the Federal Register, 45 CFR46.110(a), and by the FDA in the Federal Register, 21 CFR 56.110(a) may be reviewed through the procedures described in the Expedited Review policy.

Continuing Review of protocols meeting one of the following categories may be reviewed and approved by an IRB analyst in their capacity as an IRB member.

- permanently closed to the enrollment of new subjects and all the subjects have completed all research-related interventions; and the research remains active only for long term follow-up of subjects; or
- where no subjects have been enrolled and no additional risks have been identified ;or
- Where remaining research activities are limited to data analysis.

Continuing Review – Full Board:

All continuing reviews which do not qualify for expedited review are placed on the agenda for full IRB review at a convened meeting. One IRB reviewer is assigned to each Continuing Review. No member with a conflict of interest may serve as a reviewer. All members receive a copy of the Continuing Review form. The Form includes:

- The number of subjects accrued:
 - enrolled (signed consent form)
 - withdrawn due to subject request
 - withdrawn due to toxicity/adverse events
 - lost to follow-up
 - completed study (without events leading to early termination)
 - currently active on study
 - other category
 - removed for ineligibility
- A summary of adverse events and any unanticipated problems that involve risks to subjects or others, and any withdrawal of subjects from the research or complaints about the research since the last IRB review.
- If applicable, a summary of any relevant recent literature and interim findings;
- If applicable, data and safety monitoring reports may be submitted.
- Any relevant multi-center trial reports.
- If applicable, monitoring reports from sponsors.
- Any other relevant information, particularly information about risks associated with the research.
- Links to the currently approved protocol, recruitment documents, and informed consent documents.

IRB members have electronic access to the complete IRB protocol file and relevant IRB minutes, including: amendments/revisions, unanticipated problems, and previous continuing approvals. IRB members are provided with a continuing review worksheet to complete.

When reviewing the current informed consent document, the IRB ensures that:

- The currently approved or proposed consent document is still accurate and complete; and,
- Any significant new findings that may relate to the subject's willingness to continue to participate are provided to the subject.

The IRB may request and rely on a current statement from the DSMB or the sponsor that indicates that it has reviewed study-wide adverse events, interim findings, and any recent literature that may be relevant to the research, in lieu of requiring that this information be submitted directly to the Committee.

The IRB will use the same criteria and take the same actions described in the policy "Review Procedures: Full Committee.

In general when taking an action of conditional approval at the time of continuing review, any noted conditions need to be satisfied before an investigator may continue particular research activities related to those conditions. However the IRB may at the time of continuing review make determinations that currently enrolled subjects may continue, but no new subjects may be enrolled until a designated IRB member reviews a revised protocol or response to verifies that the conditions are met.

After the meeting the investigator is sent notification of the action taken. When approved, the informed consent dates are modified to reflect the new period of approval and expiration.

Expiration/Lapse of IRB Approval:

If an investigator fails to provide continuing review information to the IRB, or the Committee has not reviewed and approved a research study by the specified continuing review date, the research must stop, unless the IRB Chair finds that it is in the best interests of an individual subject to continue participating in the research interventions or interactions.

Related Content

Document Attributes

Title	Continuing Review		
Author	Susan Kornetsky	Dates Reviewed/ Revised	04/01/05, 03/23/07
Reviewed/ Revised by	Susan Kornetsky		07/17/07 07/23/07 05/14/09 06/02/2011
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Approved	<hr/> Susan Kornetsky, MPH Director of Clinical Research Compliance <hr/> August Cervini, MBA Vice President for Research Administration		