

Synopsis of the NIHR Oxford Biomedical Research Centre (BRC) and Unit (BRU) Directors' 6 Organisational Recommendations regarding clinical trial registration and publication & how these have been implemented in an Oxford Clinical Trials Unit.

A report by Professor Sallie Lamb, Co-Director of the Oxford Clinical Trials Unit (OCTRU) and Vicki Barber, OCTRU Hub Manager, June 2016.

1 Organisational Recommendations

The BRC/U Directors made 6 organisational recommendations following an audit of registration and publication of clinical trials commissioned by the BRC/U Patient and Public (PPI) working group led by Sophie Petit-Zeman, published in BMJ Open (<http://bmjopen.bmj.com/content/6/3/e009285.full>) The 6 recommendations were:

Include clinical trial registration numbers in internal records and on websites to facilitate easy linkage for greater transparency and openness.

Due to the difficulties classifying trials, err on the side of caution when registering trials. If in doubt register the trials (for example pilot / feasibility studies of non-pharmaceutical interventions).

Local project-specific NHS research and development approval to conduct a trial should emphasise the HRA requirements for registration and include a commitment to publish results within a year of the registered completion date.

Improve the accuracy of the information provided by investigators on clinical trial registries i.e. trial status and completion date. Encourage investigators to be realistic and to update this information if any delays are incurred, or if trials are stopped early.

Contact investigators of trials overdue publication to investigate reasons for non-publication and together agree an action plan.

Make investigators aware of the facility to upload summary results to clinicaltrials.gov and [ISRCTN](http://isrctn.com) if the publication of the full results in a journal is proving difficult and will be delayed more than 12 months from trial completion.

As one of the six registered clinical trials units in Oxford, the Oxford Clinical Trials Research Unit (OCTRU) has made their unit compliant with these recommendations – this document details how the unit became compliant.

2 OCTRU's implementation

OCTRU is one of the 6 UKCRC fully registered Clinical Trials Units in Oxford. The CTU has over 30 trials on its portfolio including trials in oncology, surgery, orthopaedics and gene therapy. The trials are mainly led by Chief Investigators from either the Nuffield Departments of Surgical Sciences or Orthopaedics, Rheumatology and Musculoskeletal Sciences or the Department of Oncology.

This document lists how OCTRU has implemented the 6 recommendations put forward by the Oxford BRC/U Directors.

Include clinical trial registration numbers in internal records and on websites to facilitate easy linkage for greater transparency and openness.

OCTRU's trials are internally identified by the study acronym and an OCTRU Study ID in the format CTUxxxx. However a document has been created that is accessible to all those in the OCTRU Hub that lists each project and its OCTRU Study ID and its trial registration numbers – this took the unit admin officer an hour to populate.

On the OCTRU website – all trials that are open to recruitment, in follow-up or completed – have had a link inserted that takes a user to the specific trial page on one of the trial registries either the [ISRCTN registry \(www.isrctn.com\)](http://www.isrctn.com) or [ClinicalTrials.gov \(www.clinicaltrials.gov\)](http://www.clinicaltrials.gov) – this took the unit web administrator 2 hours.

Due to the difficulties classifying trials, err on the side of caution when registering trials. If in doubt register the trials (for example pilot / feasibility studies of non-pharmaceutical interventions).

All trials on the OCTRU trials register are registered on an international registry. Every trial before it opens to recruitment undergoes through review by the CTU Quality Assurance team – as part of this review, the trial master file is checked to ensure that the trial has been registered on either the [ISRCTN registry](http://www.isrctn.com) or [ClinicalTrials.gov](http://www.clinicaltrials.gov) - this took no time as this was already part of standard practice for the CTU.

Local project-specific NHS research and development approval to conduct a trial should emphasise the HRA requirements for registration and include a commitment to publish results within a year of the registered completion date.

As a CTU, OCTRU cannot influence what information/conditions are included in a NHS approval letter, however OCTRU is signed up to the All Trials campaign. As a member of All Trials, OCTRU has signed up and agreed to the ethos of that organisation – that all past and present clinical trials are registered and their results are published within a year of the registered completion date. OCTRU tracks its completed trials to ensure that all of our trials publish their results - this took no time as this was already part of standard practice for the CTU. BRC/U PPI Director and the BRC Clinical Trials Subcommittee are promoting the ideal across Oxford trials, that summary results are placed on trial registers within 12 months, or where this is not possible, to update the registry to include an estimate of when summary results will be available.

Improve the accuracy of the information provided by investigators on clinical trial registries i.e. trial status and completion date. Encourage investigators to be realistic and to update this information if any delays are incurred, or if trials are stopped early.

OCTRU have set up a system where every 4 months, the registry entries for all our trials are checked with the specific trial teams to ensure that the information is current – this process is overseen by our unit admin officer: contacting trials, collating replies and ensuring the registries are contacted to make any updates - in total we estimate that this takes a maximum of 2 days each time this exercise is undertaken. See also above.

Contact investigators of trials overdue publication to investigate reasons for non-publication and together agree an action plan.

OCTRU have no trials that fall into this category – of our completed trials – the only one not to have published has just had its primary outcome paper accepted. OCTRU, as a matter of routine, monitors all those trials completed to ensure that the trials are published after final analysis – therefore this task took no time as this was already part of standard practice for the CTU. The BRC/U PPI Director and the BRC Clinical Trials Subcommittee are now working together to investigate reasons for, and remedy where possible, non-published non-OCTRU trials.

Make investigators aware of the facility to upload summary results to clinicaltrials.gov and ISRCTN if the publication of the full results in a journal is proving difficult and will be delayed more than 12 months from trial completion.

OCTRU has noted this functionality, however we would hope never to have a trial that has not published more than 12 months from trial completion. See also above.

In addition to these 6 recommendations, the BMJ Open paper also stated:

“Given the provenance of this study (the patient co-led and focused Patient Involvement Working Group of the NIHR Oxford BRC and BRU), it is important to note: while timely publication of trials on registries and in professional publications is paramount, we are also working to identify how best to create lay-friendly information for those seeking information about trials and their outcomes, and how best to ensure it is made available to them.”

OCTRU and the PPI working group are also working together to address this within OCTRU trials.