



# Progress and challenges of clinical trials registration in Latin America and the Caribbean's

Ninth Regional Congress on  
Health Sciences Information – CRICS9

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**Health Systems Strengthening**  
**Pan American Health Organization**

# Content

- Introduction
- Progress in the Americas
- Monitoring Trial registration in the Americas
- Result reporting

Prevention

Diagnosis

Treatment



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High methodological quality

Full text available

Published after 5-10 years of terminated

Approved by ethic committees

# Introduction

The mission of the WHO International Clinical Trials Registry Platform is to ensure that a complete view of research is accessible to all those involved in health care decision making. This will improve research transparency and will ultimately strengthen the validity and value of the scientific evidence base.



WHO

WHO standards

FDAAA

Joint position  
EFPIA-  
PHRMA-  
IFPMA-  
JPMA

FDA  
Informed  
Consent



1998

2004

2005

2006

2007

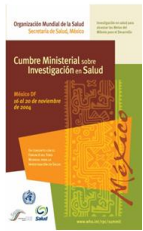
2008

2009

2010

2011

2012



Cumbre  
Ministerial  
México

CIHR  
Policy

ICMJE

Reglamento



SciELO

Scientific Electronic Library Online



Helsinki  
declaration



# Why is Trial Registration Important?

- There is a need to ensure that decisions about health care are informed by all of the available evidence
- The [Declaration of Helsinki](#) states that "Every clinical trial must be registered in a publicly accessible database before recruitment of the first subject".
- Describing clinical trials in progress can make it easier to identify gaps in clinical trials research
- Registries checking data as part of the registration process may lead to improvements in the quality of clinical trials by making it possible to identify potential problems (such as problematic randomization methods) early in the research process

# What is a clinical trial?

For the purposes of registration, a **clinical trial** is any research study that prospectively assigns human participants or groups of humans to one or more health-related interventions to evaluate the effects on health outcomes.

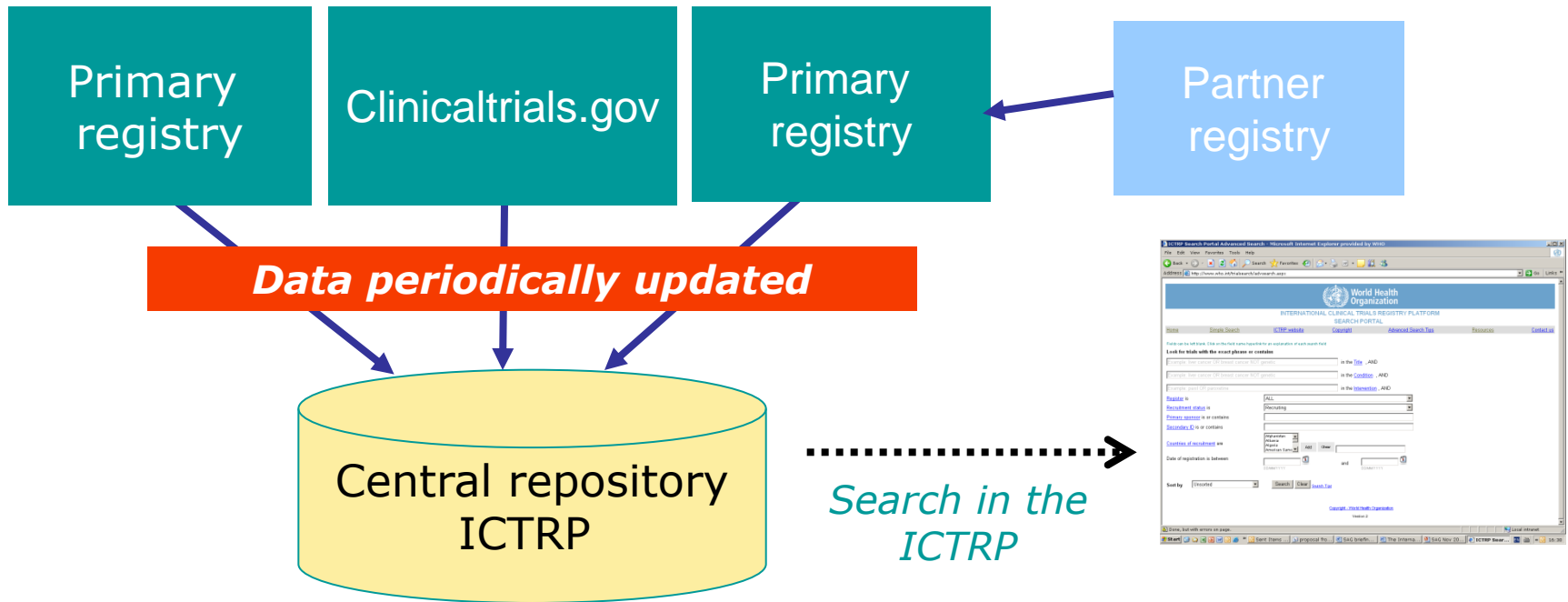
**Clinical trials** may also be referred to as interventional trials. Interventions include but are not restricted to drugs, cells and other biological products, surgical procedures, radiologic procedures, devices, behavioural treatments, process-of-care changes, preventive care, etc. This definition includes Phase I to Phase IV trials.



# International Clinical Trials Registry platform (ICTRP)

- The minimum information that must be registered is specified in the [WHO Trial Registration Data Set](#)
- A [Primary Registry](#) in the [WHO Registry Network](#) is a clinical trial registry with at least a national remit that meets WHO Registry Criteria for content, quality and validity, accessibility, unique identification, technical capacity and governance and administration

# ICTRP model



October 2012: more than 175.140 clinical trials; 15 primary registries and clinicaltrials.gov

# INTERNATIONAL CLINICAL TRIALS REGISTRY PLATFORM

## SEARCH PORTAL

[Home](#)   [Advanced Search](#)   [Search Tips](#)   [ICTRP website](#)   [Contact us](#)

[Back to Results](#)

### Main

*Note: This record shows only the 20 elements of the WHO Trial Registration Data Set. To view changes that have been made to the source record, or for additional information about this trial, click on the URL below to go to the source record in the primary register.*

**Register:** ClinicalTrials.gov  
**Last refreshed on:** 17 March 2009  
**Main ID:** NCT00862004  
**Date of registration:** 13/03/2009  
**Primary sponsor:** The First Affiliated Hospital of Guangzhou Medical College  
**Public title:** Video-Assisted Thoracoscopic Surgery (VATS) Major Pulmonary Resection With Systematic Node Dissection (SND) for Stage IIIA Non-Small Cell Lung [Cancer](#)  
**Scientific title:** Feasibility of VATS(Video-Assisted Thoracoscopic Surgery) Major Pulmonary Resection With SND for Clinical Stage IIIA Non-Small Cell Lung [Cancer](#)  
**Date of first enrolment:** December 2008  
**Target sample size:** 30  
**Recruitment status:** Recruiting  
**URL:** <http://clinicaltrials.gov/show/NCT00862004>  
**Study type:** Interventional  
**Study design:** Non-Randomized, Open Label, Safety Study, Single Group Assignment, Treatment, Uncontrolled

### Countries of recruitment

China

### Contacts

**Name:** Jianxing He, MD, FACS

**Address:**

**Name:** Jianxing He, MD, FACS

**Address:**

**Name:** Daoyuan Wang, MD

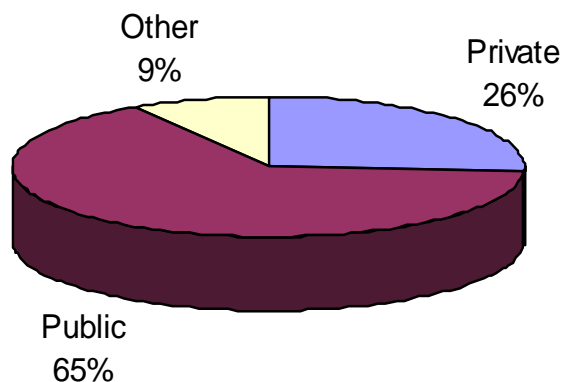
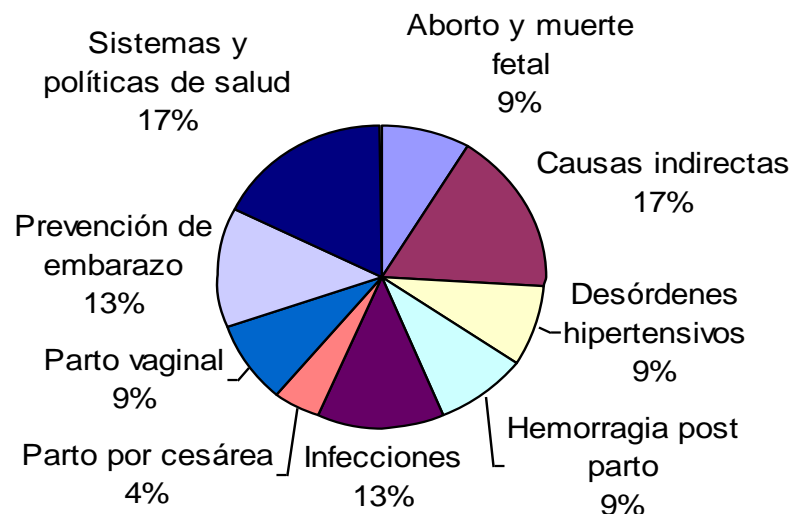
**Address:**

# Examples

Assessment of clinical trials registered from LAC in 2010 related with maternal mortality and neglected diseases/ HIV/ Malaria

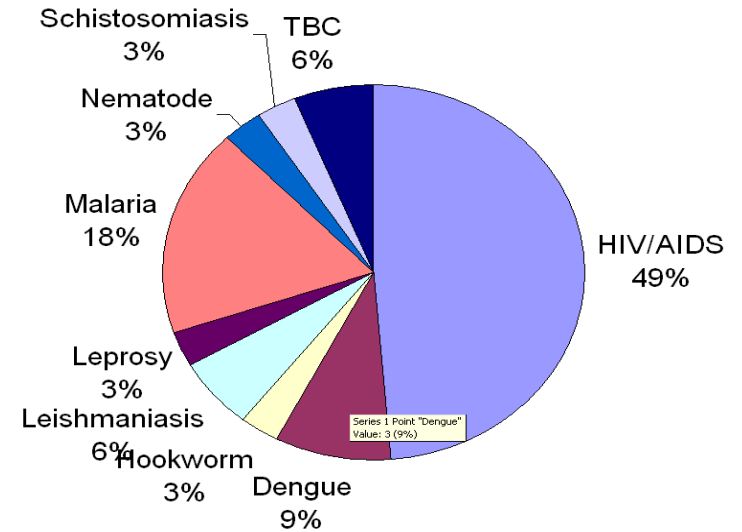
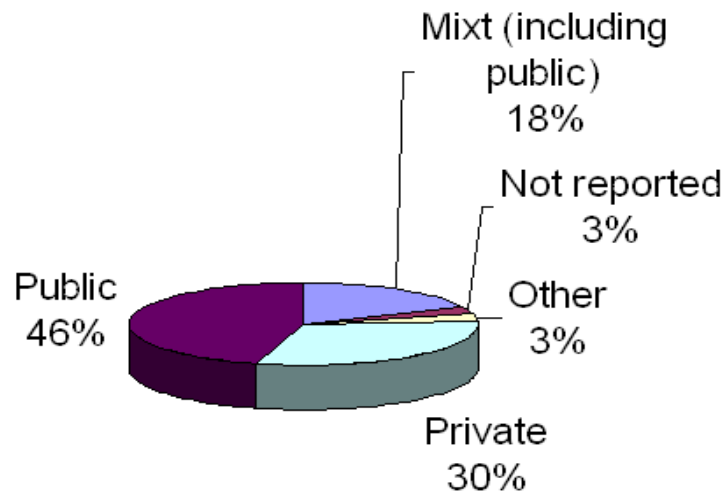
# Maternal mortality

- 950 clinical trials
- 23 (2.4%) related with maternal mortality
- 65% from Brazil
- 13% multinational



# HIV/SIDA, malaria, tuberculosis, dengue, lepra, leishmamiasis y otras enfermedades desatendidas

- 950 clinical trials
- 33 (3.5%) EC
- 46% from Brazil
- 21% multinational (private)



# Progress in the Américas

RPCEC  
Registro Público Cubano de Ensayos Clínicos  
Primary registry of RPPCEC

Registro generado de: 14 08/2010  
Primary registry of: 08/14/2010

Bienvenido al Registro Público Cubano de Ensayos Clínicos

El RPCEC es una base de datos de ensayos clínicos de cobertura nacional establecido en 2007, bajo la dirección del Centro Nacional Coordinador de Ensayos Clínicos (CENCEC), y con la colaboración de RPPCEC.

El CENCEC es una entidad sin ánimo de lucro que se creó en noviembre de 1991 de acuerdo a la Resolución No. 627 de la Comisión Nacional del sistema de Dirección de la Economía, en la que se otorga la creación de dicho Centro como entidad subordinada al Ministerio de Salud Pública.

Este sitio Web constituye la interfaz mediante la cual los promotores de ensayos clínicos pueden aplicar con éxito a:

- Completar y enviar el formulario de aplicación
- Obtener un número o código RPCEC.

El portal fue diseñado con el fin de proveer acceso a la información exhaustiva sobre ensayos clínicos en curso o a los resultados de ensayos finalizados realizados por los Centros de Investigación y Desarrollo de Medicamentos.

En este sitio usted podrá:

- Registrar un ensayo clínico.
- Ver los ensayos clínicos registrados.

PERU Ministerio de Salud Instituto Nacional de Salud

## Registro de Ensayos Clínicos

INFORMACIÓN GENERAL

**SOLICITUDES EN LÍNEA**

NOTA: Todos los documentos deben ser llenados, presentados al Instituto Nacional de Salud en un folio A4, en formato electrónico y en físico, cumpliendo con los requisitos indicados en los nombres de cada uno de ellos mediante el sistema.

• **Autorización de un Ensayo Clínico**

Todo ensayo clínico que va a ser ejecutado dentro del territorio nacional debe ser sometido para su evaluación a la Oficina General de Investigación y Transferencia Tecnológica del Instituto Nacional de Salud. Se cumplió técnica y administrativamente con la regulación vigente (D.S. 00562-2006-SA) se autoriza su ejecución a través de una Resolución Directoral.

**Costos:**  
El costo por concepto de trámite es el siguiente:  
50 % IGV \* 3.450.00  
= 1.725.00

**Registros:**

1. Solicitud de autorización del ensayo clínico acompañada del registro de inscripción como centro autorizado para realizar ensayos clínicos. (Ingresar los datos según el formato electrónico en el Registro Nacional de Ensayos Clínicos, usando el nombre y contraseña de usuario asignado y adjuntar el formato impreso)
2. Aprobación del ensayo clínico emitido por la autoridad máxima de la(s) institución(es) de investigación donde se realizará el ensayo clínico.
3. Protocolo de investigación, en versión en español y en idioma original si es diferente al español, según [anexo 5](#).
4. Aprobación ética del ensayo clínico emitido por un Comité Institucional de Ética en Investigación registrado en el Instituto Nacional de Salud.
5. Manual del Investigador actualizado, en versión en español y en idioma original (si es diferente al español) según el [anexo 6](#).
6. Declaración jurada según [anexo 7](#), firmada por la organización/institución ejecutora y el investigador principal, estableciendo que no existe conflicto de interés financiero en la ejecución del ensayo clínico.
7. Presupuesto del Ensayo Clínico según [anexo 8](#).
8. Póliza del seguro vigente que permita cubrir los daños al sujeto de investigación asociados con el ensayo clínico, excepto cuando el ensayo clínico se realice en un área de investigación en salud pública y el patrocinador es una

**REGISTRO DE SOLICITUDES INGRESANDO AL REGISTRO NACIONAL DE ENSAYOS CLÍNICOS**

**INGRESO DE USUARIOS**

Si aún no cuenta con un nombre de usuario y una contraseña registrada [ACCESAR](#)

**TRÁMITES Y SOLICITUDES**

**LISTA DE ENSAYOS CLÍNICOS**

**Manual de Procedimientos de Ensayos Clínicos**

INVIAMA  
Instituto Venezolano de Investigaciones Científicas

## INSPECCIÓN VIGILANCIA Y CONTROL

Libertad y Orden

BUENAS PRÁCTICAS CLÍNICAS

Ústed está aquí: [Inspección, Vigilancia y Control](#) > Buenas Prácticas Clínicas

**Farmacovigilancia**

- Normatividad
- ABC de Buenas Prácticas Clínicas
- Formatos para la evaluación operativa y administrativa de documentos relacionados con protocolos de Investigación SIMPO
- Formatos de presentación y evaluación de la SEMPO de la Comisión Revisora
- Lista de verificación de documentos relacionados con Protocolos de Investigación
- Formato Publicación enmiendas al protocolo nuevas versiones
- Registro de Protocolos de Investigación Clínica
- Registro para publicación de información de documentos relacionados con protocolos de Investigación
- Evaluación de documentos relacionados con protocolos de Investigación



ENSAYOS CLÍNICOS  
**ANMAT**

Ministerio de Salud  
Presidencia de la Nación

OPS

Buscar:  BUSCAR

**Acera de:** Base de Consultas acerca de los Estudios en Farmacología Clínica

**Normativa**  
EFC  
Funcionamiento  
Base de consulta

La ANMAT interviene que la sistematización y disponibilidad de la información de los estudios en farmacología clínica constituye una herramienta fundamental para dar a conocer la actividad y características de la investigación clínica farmacológica que se desarrolla bajo su competencia.

Para ello, zone a disposición pública la presente base informativa sobre los estudios en farmacología clínica a fin de favorecer la transparencia de la actividad y contribuir al conocimiento, vigilancia y monitoreo de los estudios en farmacología clínica por parte de los actores principales (sujetos que prueban la droga o ensayar; equipo de investigación, patrocinantes y comités de ética) de esta actividad.

Para ello, esta Autoridad Nacional considero imperioso ofrecer a la comunidad esta Base de Datos desde su página Web, la que se irá ampliando con el correr de los días con la incorporación de mayor información, así como abarcando mayores períodos de tiempo.

Ante cualquier duda, consulta y/o sugerencia, por favor escribir a [responde@anmat.gov.ar](mailto:responde@anmat.gov.ar)

WEB LISTADO COMPLETO CONSULTA PUNTUAL

Sistema  
Instituto de Salud

REGISTRO BRASILEIRO DE  
**Ensaíos Clínicos**

USUARIO:  PASSWORD:   [Forgot password? Register](#)

PT | ES | EN

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HOME / FAQ

**Scoreboard**

There are 4 clinical trials registered, and 0 of those are under recruitment.

**Recruiting**

PREVER Study: Efficacy of Chlorzhalidone associated with Amiloride versus Losartan in reducing blood pressure of...

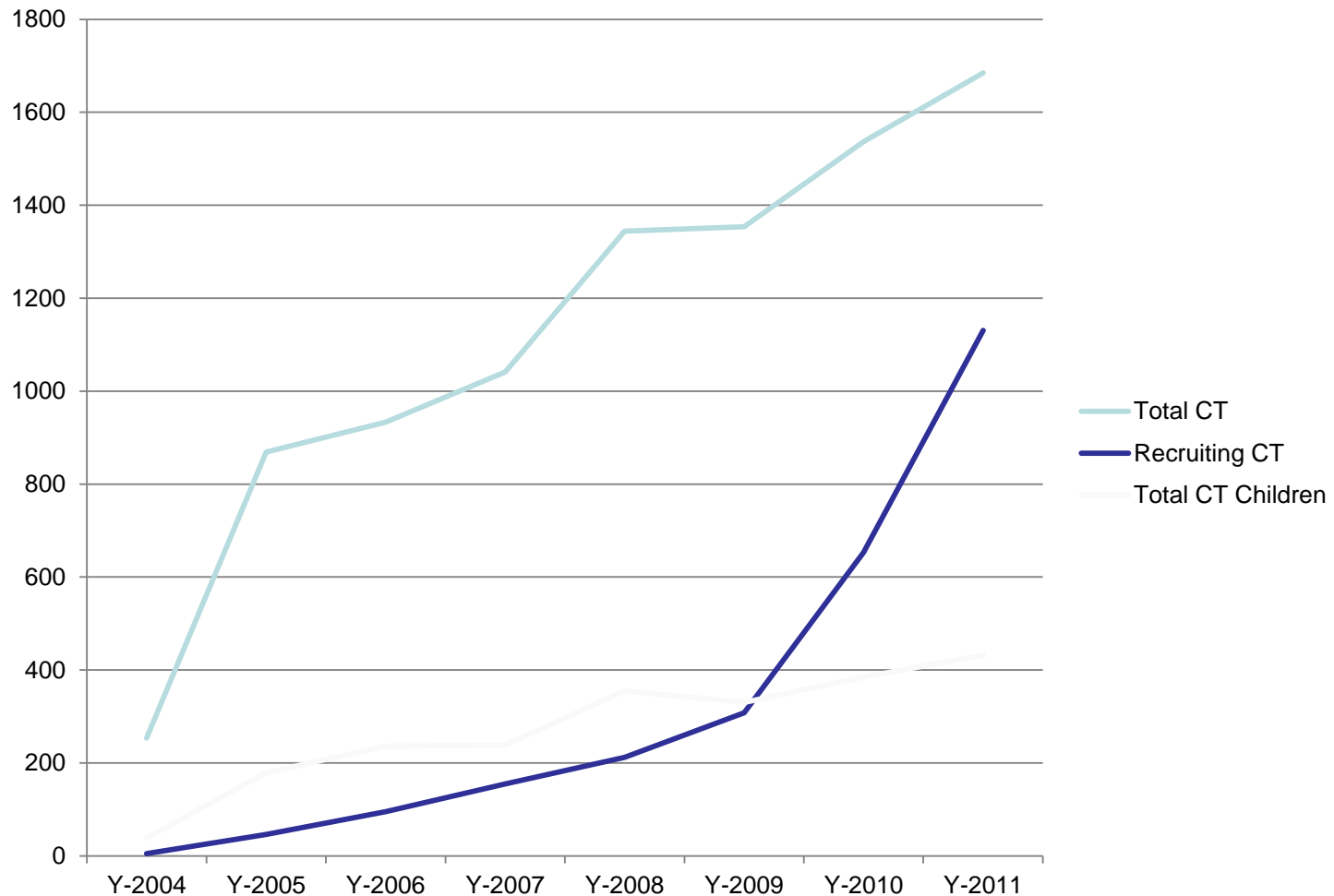
PREVER Study: Efficacy of the combination of Chlorzhalidone and Amiloride versus placebo in the prevention of...

Chemist Therapy for Asthmatic Children

1. What studies need to be registered?
2. When should studies be registered?
3. Who is responsible for registering a trial?
4. How do I register a trial?
5. How to cite a record on a clinical trials register
6. When to cite a record on a clinical trials register
7. Is it mandatory to register all clinical trials at REBEC, the Brazilian Clinical Trials Registry, to obtain the approval of ANVISA for the conduct of clinical research?
8. What are the objectives of the Brazilian Clinical Trials Register?

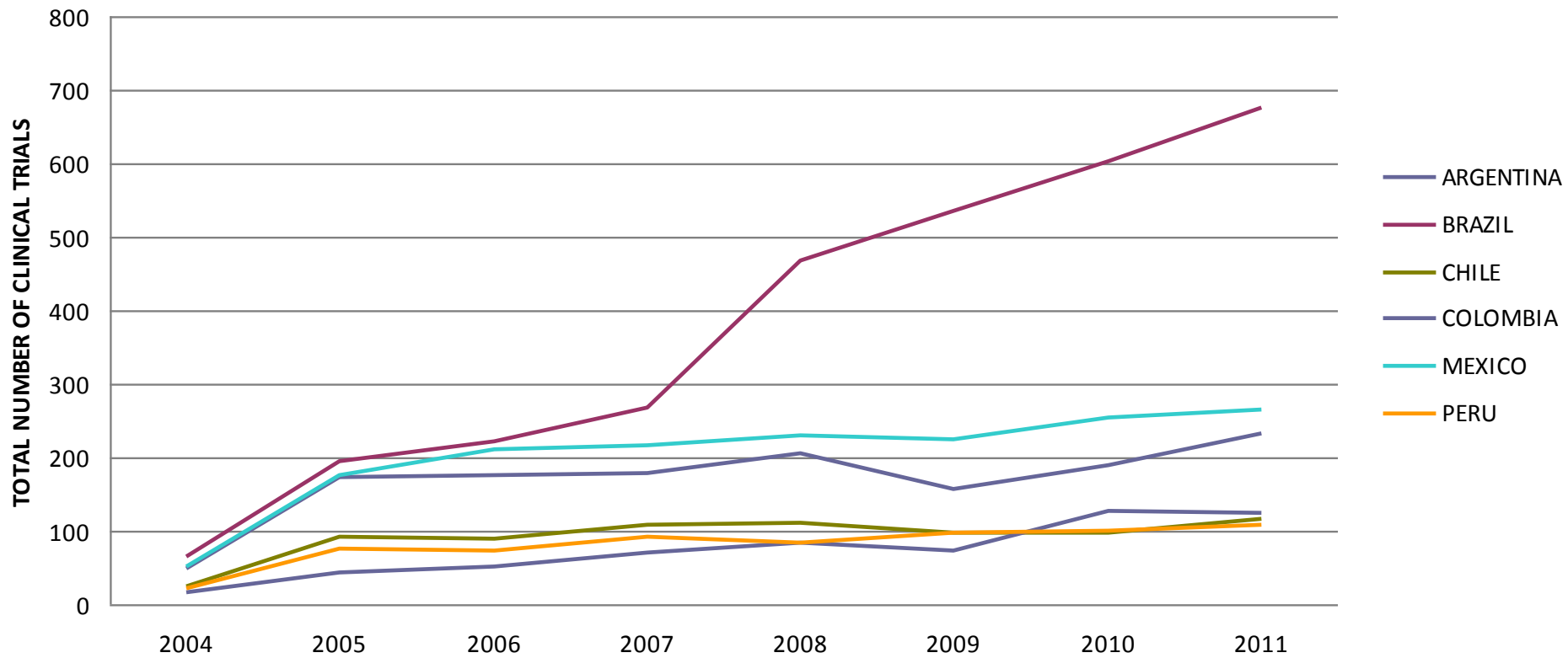


# Number of Clinical trials from LAC





# TOTAL NUMBER OF REGISTERED CLINICAL TRIALS IN LATIN AMERICA FROM 2004-2011



# Monitoring trial registration 2011

*Objective* \*: To determine to what extent LAC biomedical journals have endorse and implement clinical trial registration and reporting guidelines

## *Methods*:

- We identified randomized controlled trials published in 2011 from journals indexed in LILACS;
- From the online author instructions we extracted information regarding endorsement of trial registration
- We check for compliance (Trial registration in the ICTRP and mention of using CONSORT) in published RCT of those journals

\*Revez L. Endorsement of the clinical trial registration initiative and reporting guidelines by biomedical journals. Unpublished data.

# Monitoring trial registration 2011

## *Results*

- 477 controlled trials were identified by the search. A random sample of 240 were assessed and finally 101 RCT published in 56 journals (10 countries) were included
- Prospective trial registration was explicitly required by 20/56 journals (36%)
- Trial registration was reported in the abstract of 9 RCT (9%) and in 20% of manuscripts. Overall, prospective registration was done in 7 RCT (7%).
- 11/56 journals (20%) had at least one RCT reporting trial registration

# Monitoring trial registration 2010

*Objective*\*: To determine the prevalence of trial registration in randomized controlled trials (RCTs) from LAC researchers and assess methodological characteristics

## *Methods*:

- We identified and assessed randomized controlled trials published in 2010 from LAC authors in PUBMED/LILACS;
- Data were independently extracted by two authors
- We also check in the International Clinical Trials Registry platform (ICTRP)

Revez L et al. Trial registration in Latin America and the Caribbean's: study of randomized trials published in 2010

Revez L et al. Characteristics of randomized trials published in Latin America and the Caribbean according to funding source

# Monitoring trial registration 2010

## *Results*

### *Trial registration*

- 526 RCTs from 19 countries were finally included (70% Brazil).
- 17% (89/526) of RCTs were registered in the ICTRP
- Only 4.0% were prospectively registered.
- 16% RCT were published in LAC journals; only 15% of them were registered
- Overall, registered RCTs were multinational, had larger sample size and longer follow-up, and reported more frequently information on funding, conflict of interests, and ethic issues
- 21% of publicly funded RCTs were registered compared to 36% of non-publicly funded RCTs (private, NGOs).

# Informed consent

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

#### 21 CFR Part 50

[Docket No. FDA-2009-N-0592]

RIN No. 0910-AG32

#### Informed Consent Elements

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Final rule.

**SUMMARY:** The Food and Drug Administration (FDA) is amending the current informed consent regulations to require that informed consent documents and processes for applicable drug (including biological products) and device clinical trials include a specific statement that clinical trial information will be entered into a databank. The databank referred to in this final rule is the clinical trial registry databank maintained by the National Institutes of Health/National Library of Medicine (NIH/NLM) which was created by statute. The submission of clinical trial information to this data bank also is required by statute. This amendment to the informed consent regulations is required by the Food and Drug Administration Amendments Act of 2007 (FDAAA) and is designed to promote transparency of clinical research to participants and patients.

**DATES:** *Effective date:* This rule is effective March 7, 2011.

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**TO THE EDITOR:** The ICMJE supports a solution to the selective reporting of clinical studies. Although efforts have been made to encourage investigators to register their trials, registration is still voluntary. Several major barriers to the development of a comprehensive registry of clinical trials have been described.<sup>1</sup> Research involving human subjects poses complex ethical issues. As stated by the ICMJE, patients who volunteer to participate in clinical trials deserve to know that their contribution to the improvement of human health will be available to inform health care decisions. Therefore, prospective trial registration is an ethical obligation and should be a legally required component of written informed consent.

\*Revez L, et al. Clinical trial registration. N Engl J Med. 2005;352(2):198-9.

# Mapping ethic review committees



# Result reporting

“The ClinicalTrials.gov results database was launched in September 2008 to implement Section 801 of the [Food and Drug Administration Amendments Act of 2007 \(FDAAA 801\)](#), which requires the submission of "basic results" for certain clinical trials, generally not later than one year after the Completion Date”



[Full Text View](#)[Tabular View](#)[Study Results](#)[Disclaimer](#)[? How to Read a Study Record](#)

Results First Received: April 2, 2012

Study Type:	Interventional
Study Design:	Allocation: Randomized; Endpoint Classification: Safety/Efficacy Study; Intervention Model: Parallel Assignment; Masking: Open Label; Primary Purpose: Treatment
Condition:	Meconium Aspiration
Interventions:	Drug: Lucinactant Other: Standard Care

**More Information**[Hide More Information](#)**ertain Agreements:**

Principal Investigators are NOT employed by the organization sponsoring the study.

There IS an agreement between Principal Investigators and the Sponsor (or its agents) that restricts the PI's rights to discuss or publish trial results after the trial is completed.

The agreement is:

- The only disclosure restriction on the PI is that the sponsor can review results communications prior to public release and can embargo communications regarding trial results for a period that is less than or equal to 60 days. The sponsor cannot require changes to the communication and cannot extend the embargo.
- The only disclosure restriction on the PI is that the sponsor can review results communications prior to public release and can embargo communications regarding trial results for a period that is more than 60 days but less than or equal to 180 days. The sponsor cannot require changes to the communication and cannot extend the embargo.
- Other disclosure agreement that restricts the right of the PI to discuss or publish trial results after the trial is completed.

**imitations and Caveats****Limitations of the study, such as early termination leading to small numbers of participants analyzed and technical problems with measurement leading to unreliable or uninterpretable data**

Early termination led to a small number of subjects analyzed. Results should be interpreted with caution.

**Results Point of Contact:**

Name/Title: Dr. Robert Segal  
 Organization: Discovery Laboratories, Inc.  
 Phone: 215-488-9300  
 E-mail: rsegal@discoverylabs.com

**Publications provided**

Responsible Party: Discovery Laboratories  
 ClinicalTrials.gov Identifier: NCT00004500 History of Changes  
 Other Study ID Numbers: KLA-MAS-03, FD-R-001938  
 Study First Received: October 18, 1999  
 Results First Received: April 2, 2012  
 Last Updated: May 1, 2012

**Baseline Characteristics**[Hide Baseline Characteristics](#)**Reporting Groups**

	Description
Lucinactant	Lucinactant via bronchoalveolar lavage
Standard Care	Standard Care included the use of oxygen, CMV, sedation, paralysis, vasopressors, and/or alkalization

**Baseline Measures**

	Lucinactant	Standard Care	Total
<b>Number of Participants</b> [units: participants]	38	31	69
<b>Age</b> [units: participants]			
<=18 years	38	31	69
Between 18 and 65 years	0	0	0
>=65 years	0	0	0
<b>Gender</b> [units: participants]			
Female	16	15	31
Male	22	16	38
<b>Region of Enrollment</b> [units: participants]			
United States	38	31	69
<b>Gestational Age</b> [units: weeks] Mean ± Standard Deviation	40.0 ± 1.30	39.7 ± 1.09	39.9 ± 1.21

1. Primary: Number of Days Receiving Mechanical Ventilation (MV) [ Time Frame: 28 days ]

[Hide Outcome Measure 1](#)

<b>Measure Type</b>	Primary
<b>Measure Title</b>	Number of Days Receiving Mechanical Ventilation (MV)
<b>Measure Description</b>	A patient is not receiving MV if he/she is removed from the mechanical ventilator for ≥ 24 hours. If a patient subsequently requires intubation and MV, the additional time will count as days receiving MV.
<b>Time Frame</b>	28 days
<b>Safety Issue</b>	No

**Population Description****Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.**

Data from the initial Phase 1/2 trial were used to estimate the number of subjects required for testing the null hypothesis of no difference between treatment groups. A sample size of 100 subjects per group is required to test the hypothesis at a significance level of 0.05 with a power of 80%.

All enrolled infants were analyzed (intent-to-treat).

**Reporting Groups**

	Description
Lucinactant	Lucinactant via bronchoalveolar lavage
Standard Care	Standard Care included the use of oxygen, CMV, sedation, paralysis, vasopressors, and/or alkalization

**Measured Values**

	Lucinactant	Standard Care
<b>Number of Participants Analyzed</b> [units: participants]	38	31
<b>Number of Days Receiving Mechanical Ventilation (MV)</b> [units: days] Mean ± Standard Deviation	10.2 ± 9.96	8.1 ± 8.62

No statistical analysis provided for Number of Days Receiving Mechanical Ventilation (MV)



# Thanks

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