DEPARTMENT OF HEALTH & HUMAN SERVICES

Office of the Secretary
Office of Public Health and Science

Office for Human Research Protections
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October 23, 2001

Michael F. Collins, M.D.
President
St. Elizabeth's Medical Center of Boston
736 Cambridge Street
Boston, MA 02135

**RE: Human Subject Research Protections Under Multiple Project Assurance (MPA) M-1460**

**Research Activities: Gene Therapy Research Protocols**
**Principal Investigator: Dr. Jeffrey Isner**

Dear Dr. Collins:

The Office for Human Research Protections (OHRP) has reviewed the October 1, 2001 report from Mr. Marc Sheineson in response to OHRP's letter dated July 12, 2001. OHRP finds that the following corrective actions taken by the St. Elizabeth's Medical Center (SEMC) adequately addresses the findings and required actions stipulated by OHRP in its July 12, 2001 letter:

(1) OHRP acknowledges the progress made by SEMC in implementing the recommendations made by its outside legal and medical counsel as part of its February 28, 2000 report. As noted in OHRP's earlier letter these recommendations include:

(a) Enhancement of the responsibilities of the Institutional Review Board (IRB) especially with respect to reviewing and reporting of adverse events.

(b) Development of a training program for all investigators and IRB members relating to reporting of adverse events.

(c) Updating of all adverse events associated with all ongoing research involving gene therapy by Dr. Isner.

(d) Simplification of the documentation of IRB policies and procedures.

(e) Commitment of adequate administrative resources to the IRB to enable it to fulfill its responsibilities.

(2) SEMC has committed to adhere to the HHS regulations at 45 CFR 46.110 related to expedited review of research and amendments to research. The SEMC IRB policies and procedures have been revised to explicitly require adherence to these regulations.

(3) SEMC has adequately revised its IRB policies and procedures in response to the findings and concerns raised in OHRP's July 21, 2001 letter. Revisions to the SEMC IRB policies and procedures include the following:

(a) Review and reporting of research, including (i) procedures for initial and continuing review of research; (ii) procedures for determining which projects require review more often than annually and which projects need verification from sources other than the investigator that no material changes have occurred since previous IRB review; and (iii) procedures for ensuring prompt reporting to the IRB of proposed changes in a research activity.

(b) Reporting to the IRB, institution and regulatory agencies of unanticipated problems involving risks to subjects or others and suspension or termination of research.

(c) IRB approval of research contingent upon substantive modifications or clarifications.

As a result of the above determination, there should be no need for further involvement of OHRP in this matter. Of course, OHRP must be notified should new information be identified which might alter this determination

OHRP appreciates the commitment of your institution to the protection of human subjects of research. Please contact me if you have any questions regarding this matter.

Sincerely,

Patrick J. McNeilly, Ph.D.
Compliance Oversight Coordinator
Division of Compliance Oversight

cc: Dr. Alan B. Ashare, Chair SEMC IRB
Dr. Jeffrey Isner, Principal Investigator, SEMC
Mr. Marc Scheineson, Reed Smith LLP
Dr. Greg Koski, OHRP

Dr. Melody Lin, OHRP
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Mr. George Gasparis, OHRP
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Mr. Barry Bowman, OHRP
Commissioner, FDA
Dr. David Lepay, FDA
Dr. James McCormack, FDA