

Primer on the Oversight System

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Reasons for concern about oversight

- Many new genetic tests
- Many complexities
 - Technology
 - Who to test
 - Interpretation of results
- Most clinicians have limited knowledge about genetics



Sources of oversight

- Statutory regulation
- Public leadership
- Decisions about health care funding
- Professional leadership



Statutory regulation of genetic testing - federal

- Federal agencies
 - CMS - CLIA
 - FDA
- Primary focus of efforts
 - Laboratory oversight
 - Pre-market review



Laboratory oversight: Well established regulatory approach

- CLIA certification for laboratories providing test results for clinical use
- Oversight of:
 - Laboratory procedure
 - Training of laboratory personnel
 - Credentials needed for test interpretation
- Genetic testing specialty?



Laboratory oversight: Results obtained in research

- NBAC /NHLBI criteria for disclosure
 - Validated
 - Significant to health
 - Intervention available
- Responsibility of researcher if not CLIA-certified?



Clinical test oversight: NIH-DOE Task Force (1997)

Called for evidence-based entry of new genetic tests into clinical practice

- Criteria to identify tests requiring “validation and clinical utility data”
 - independent external review
 - professional organizations
- Consideration of role for FDA beyond per-market review of test kits



Secretary's Advisory Committee on Genetic Testing (SACGT) 1999-2002

- SACGT effort to categorize tests focused on reason for testing, eg, diagnostic vs. predictive - but
 - Many genetic tests have multiple uses
 - Different definitions - eg, of "diagnostic"
 - Incentives to seek review under least problematic test category



SACGT recommendation for pre-market review

- All tests, including “home brew”
 - Streamlined process, using template
 - Primary goal: accurate labeling - “Tell us what you know and what you don’t know”
- HHS Secretary charged FDA to consider implementation



Recent FDA efforts: Focus on pharmacogenomics

- Draft guidance documents related to pharmacogenomics
 - Voluntary submission of data
 - Creation of “safe harbor in which to explore interesting data”
- Intent to change clinical pharmacology labeling section of drug label
 - Would place relevant pharmacogenomic information in prominent location



Recent FDA efforts (cont.)

- Approval of several genetic test kits - eg, Roche AmbliChip, Invader UGT1A1 Molecular Assay
- Draft guidance document extending oversight to in vitro diagnostic multivariate index assays (IVDMIAs)
 - Tests that utilize laboratory data and analytic tool to generate result - eg, gene expression profiling to predict cancer prognosis



Direct to consumer

GAO Report:

- “Nutrigenetic Testing: Tests Purchased from Four Web Sites Mislead Consumers”

<http://www.gao.gov/new.items/d06977t.pdf>



Prevention of genetic discrimination

- Unclear role of ADA in genetic discrimination
 - EEOC action in Burlington Northern case - claimed discrimination under ADA for workers with work-related health claims who were secretly tested
- GINA
 - Now before both houses
 - Considered likely to pass after many failed attempts



Statutory regulation at state level

- Laboratory oversight - some state oversight more rigorous than CLIA
- Genetic non-discrimination
- Newborn screening



Role of statutory regulation?

- Not resolved
- Effective method to ensure standard labeling
- Potential protection against unsafe testing practices
- Not route to standard of practice



Public leadership

- Promotion of best practices
- Education and training
- Practice guidelines
- Research



Division of Laboratory Sciences, CDC

Multiple contributions in genetics

- QC/QA, technology & practice improvement
 - QA/proficiency testing for newborn screening
 - Genetic test reporting
- Education & training
- Research
- Policy development
 - Contributions toward standard setting

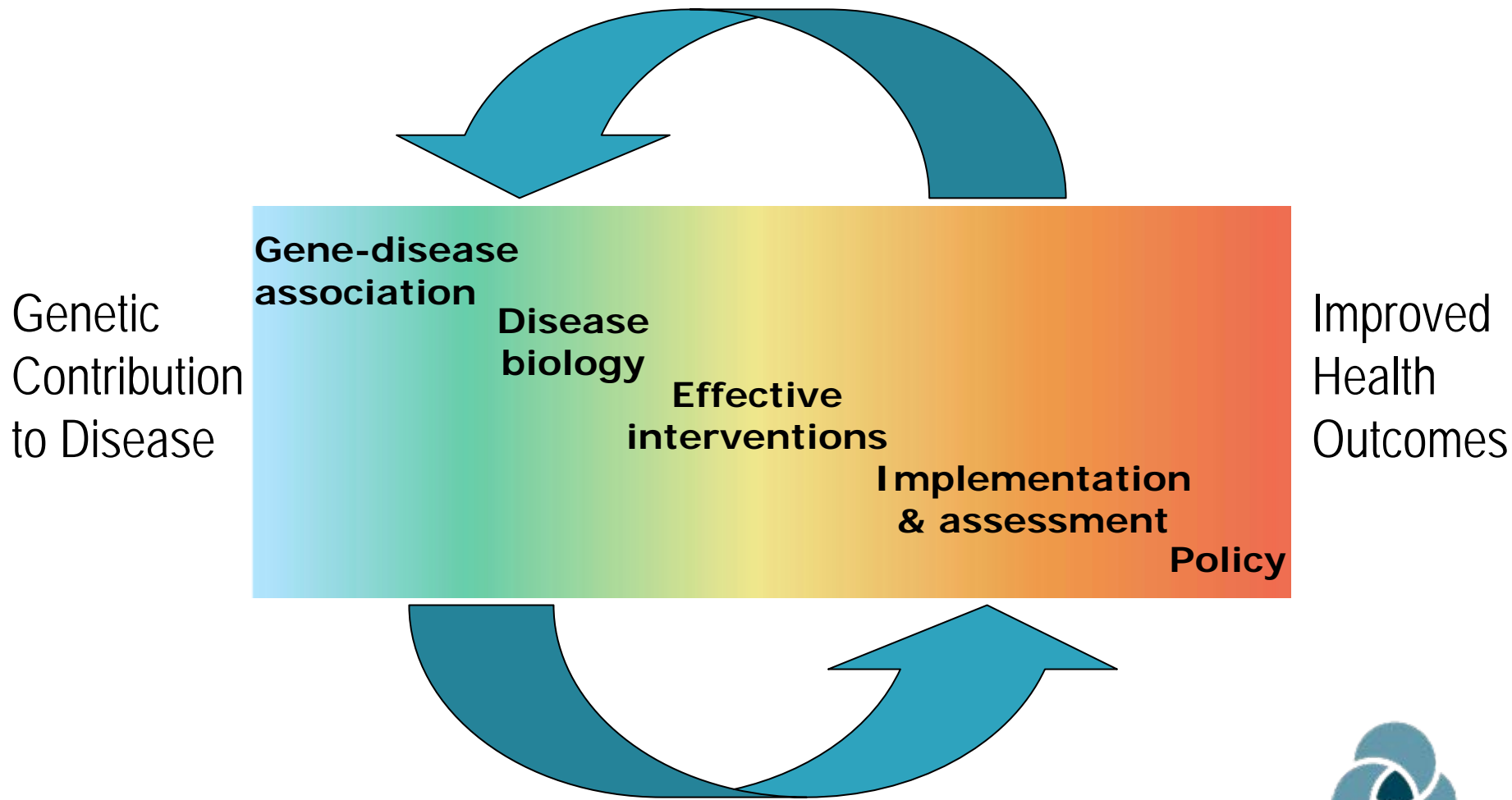


Public support of test evaluation and practice guideline development

- EGAPP
- US Preventive Services Task Force
- Secretary's Advisory Committee on Heritable Disorders and Genetic Diseases in Newborns and Children



The translational pathway for genomic health care



Federal research support: important potential for enhancing oversight

- Educational interventions & resources
- Clinical utility
- ELSI / policy



Funding decisions as alternative to statutory regulation

Powerful impact on test use

Challenges:

- Adequate framework for defining service needs
- Fair and rational procedures for decision-making
- Lack of evidence



Problematic issues

- Coverage of genetic counseling
- Inflexible rules for defining test candidacy
- Inequitable access



Key role of professional organizations & collaborations

- Leadership
 - Identification of issues
 - Education
- Laboratory oversight
- Practice guidelines & standards



Practice guidelines - Current realities

- Diverse sources & processes
 - Professional, personal or financial interests may influence process
 - Methodologies vary, not always specified
 - Evidence often lacking
- ↓
- Importance of public & professional leadership



Standard of practice as an evolving concept

Change over time in

- Technology – for example, genetic testing options
- Quality of evidence about health outcomes
- Case law



Health professional education

- Potential to enhance other efforts
- Challenges
 - Traditional methods generally have little impact
 - Many genetics curricula “sit on the shelf, collecting dust”
 - Focus on relevance / health outcomes



Are different approaches complementary?

- How can different mechanisms best complement each other to close gaps?
- How best to build on existing partnerships?
- How to create the right forums and processes for discussing controversial issues?

