

Guidance Document	Study Registration
Effective Review	HSREB Delegated & Full Board
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1. PURPOSE

The Health Sciences Research Ethics Board (HSREB) requires that all Clinical Trials* are registered (and strongly recommends that all other studies be registered) in a publicly accessible registry prior to the release of the Ethics Approval notice.

2. BACKGROUND

The REB is governed by regulatory policies and guidelines. The purpose of these policies/guidelines is to establish principles to guide the design, ethical conduct, and ethics review process of research involving humans. The Tri-council Policy Statement: Ethical Conduct for Research Involving Humans (Chapter 11), the World Health Organization, and the International Committee of Medical Journal Editors require ALL Clinical Trials to be registered. Clinical Trial registries allow public access to information about the status of a clinical trial and their results.

Apart from regulatory reasons, there are many important reasons to register a study. Many of these reasons are directly linked to the key principles of research ethics.

Purpose of registering studies:

- To fulfill ethical obligations to research participants and the research community by conducting high quality studies with low risks of bias
- To provide information about ongoing or completed studies to potential participants and referring clinicians
- To reduce publication bias (i.e., not publishing study results depending on the study's findings)
- To help readers to understand the context of study results
- To help Research Ethics Boards to determine the appropriateness of a research study
- To promote more efficient allocation of research funds
- To provide a public record of basic study results in a standardized format
- To facilitate systematic reviews and other analyses of the research literature (a societal benefit)

Most of the reasons above have a common underpinning — bias reduction. Furthermore, we consider bias reduction to be congruent with the HSREB's regulatory requirement to ensure research participants are treated with respect (TCPS Article 1.1) and are protected. *Protection* here does not simply mean participants are protected from physical and/or psychological harm, but



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rather that they are protected from changes to study protocols that may increase bias (and would therefore not respect their research participation as much as a study with lower bias).

When studies are not registered ahead of their conduct, many changes in methodology, intervention(s), outcomes, and analytical techniques (amongst others) can be changed without anyone knowing. These changes may increase bias. When a study is registered, changes made after registration are transparently available to anyone reading the study's report (including the research participants themselves). The HSREB anticipates that study registration will result in better participant protection.

Registration does not impede an investigator from making post-hoc changes to any aspect of the study. Instead, it simply requires the investigator to explain why the changes were made so that people reading the study report can interpret the findings in that context. Note that the bias reduction inherent with registration also means that study registration may be beneficial even for studies using data that was collected retrospectively.

3. RESPONSIBILITY

For Clinical Trials

It is the responsibility of the Sponsor (and overseen by the HSREB) to ensure that a clinical trial is registered before recruitment of the first trial participant. In order to ensure that no participants are enrolled in a study prior to the registration of the trial the REB requires that the site provide the name of the registry and the clinical trials registration number before the initial approval notice is issued.

The REB will review a clinical trial that has not been registered but will require that the study be registered as part of the recommendations from the REB. Responses to recommendations from the REB can be submitted and will be processed without the registration number but the approval notice will be held until the registration number is received.

For all other studies

The HSREB strongly recommends Sponsors (this is the local PI if a study is self-sponsored) register all other studies before the study begins.

4. PROCEDURE

- The HSREB accepts any study registration site that is free to use and publicly available. Clinical Trials and clinical studies in general are best registered at <u>clinicaltrials.gov</u> (they allow registration of randomized clinical trials as well as observational studies).
- Western University-based research can also use other options like Open Science Framework (OSF osf.io). It is important to note that many sites may allow the uploading of study documents (e.g., a study's protocol) but that this may not unto itself be registration. Sites, like OSF, sometimes require an additional step to provide a time-stamped, immutable version of the documents. The HSREB only considers the latter to constitute registration. It is possible to embargo registrations (OSF allows up to four



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years) so that, although the registered documents are immutable, they are also invisible to the public until the embargo date is met. This deals with the concern some researchers have of others taking their research ideas.

- Information on the registry site must be current. Information must be updated immediately following REB approval of any amendment and following close-out of the study.
- Registry information for each study should be reviewed and updated at minimum annually while the study is ongoing.
- For clinical trials, results should be posted one year after close of the study, or as per funding or regulatory requirements.
- For hospital-based research, approval from the privacy office of the institution where the research is being conducted may be required prior to registration on a platform other than clinicaltrials.gov. Please check with your institutional research approval office for more information.

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*WHO Definition of a Clinical Trial: 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.