

Adrian: [00:00:04] Hey, this is Adrian Hernandez, and welcome to the NIH Collaboratory Grand Rounds podcast. We're here to give you some extra time with our speaker and ask some of the tough and interesting questions you want to hear most. If you haven't already, we hope you'll watch the full Grand Rounds webinar recording to learn more. All of our Grand Rounds content can be found at [Rethinkingclinicaltrials.org](https://rethinkingclinicaltrials.org). Thanks for joining.

Adrian: [00:00:27] Hi there. This is Adrian Hernandez and I'm hosting today's podcast from the Collaboratory Grand Rounds, and today we're here with Dr. Jeff Botkin and Dr. Consuelo Wilkins who'll be reflecting on returning individual research results to participants, guidance for a new research paradigm. Jeff and Consuelo, thanks for joining us.

Jeff: [00:00:48] Thank you.

Consuelo: [00:00:48] Thanks for having us.

Adrian: [00:00:49] Jeff, let me start with you and can you tell us a little bit about the context here? Why did this topic come up about returning individual research results?

Jeff: [00:01:00] I think probably the single largest instigator for the trial has been the conflict in the regulations, the CLIA prohibition against returning research results, unless they're done in a CLIA lab in conflict with the HIPAA access right where participants have the right to access their results regardless of whether they were generated from a CLIA certified lab.

Jeff: [00:01:26] So this has been a significant issue, particularly in the genetics field, but I think folks really realized that this was a larger set of issues and in a context of a real cultural evolution towards more transparency with research participants, I think folks felt it was timely to take a more comprehensive look at these issues.

Adrian: [00:01:47] And Consuelo, is this is a real problem? Do participants actually want their research results? I thought this was research.

Consuelo: [00:01:55] Well, it definitely is a problem. I think that over the last decade or even more, we're seeing that more individuals expect to receive their research results. People are engaged and interested in this area and they really feel that their data belongs to them. And there's no reason that they shouldn't be able to access their research results.

Adrian: [00:02:21] Jeff, I know that you all, as part of the National Academy of Medicine, really thought about a lot of the ethical issues here. Kind of weighing the benefits and risk of returning individual research results. What was the final equation or kind of summary of benefits and risks here?

Jeff: [00:02:41] Well, I think we recognized that the sort of two paradigms that are out there that I sort of mentioned, CLIA and HIPAA, are regulations that have sort of looked at either end of that spectrum. CLIA wants to say that unless you have high quality standards in your laboratory, then there's too much risk to disclosing results, whereas

HIPAA has said it's up to people themselves to help make those sorts of choices and to work through the challenges of uncertain results.

Jeff: [00:03:11] So I think what we wanted to do with our report is to a certain extent, strike a balance somewhere in the middle there and not by coming down with any clear resolution about these sorts of results ought to be returned or these sorts of results should not be returned, but rather foster a process by which people can look at the variables on an individual project and make a decision and if it's a high risk set of information that may have a real impact on people's lives, but yet you don't have a good quality circumstance in the lab, then that's one where the investigators should rightly say this is not appropriate to be returning to folks.

Jeff: [00:03:48] On the other hand, if it's a high value result and you can have some confidence in the quality of the laboratory, then that maybe a circumstance on a study-by-study basis where reasonable people would say, let's be transparent with folks and go ahead and reveal these results. So we're really sort of process-oriented as a way of trying to accommodate all the variables that are important for making these decisions.

Adrian: [00:04:13] That's great. And Consuelo, I imagine, you know, a lot has been built from the work in the field of genetics and sharing results regarding that, but nowadays it seems like there's a lot of different data that could be shared, and, for instance, biomarkers. So tests that are being done to say, predict the onset of cardiovascular disease or even Alzheimer's. What, how would that be considered? So it's being researched to see if it's predictive of something in the future.

Consuelo: [00:04:51] Well, I think an important piece is that people do want to receive their research results, and while for some of them, genetic and genomic results might be more valuable, they actually really just want their results. And so I think, certainly there are many who lean towards more results that have some clinical use, but it's also beyond that. So people want their results because they belong to them, and that alone is a sign of, brings some value.

Consuelo: [00:05:29] It's also a sign of respect for people when the researchers think enough of them to return or share information with them. So I think we have to begin to think more broadly about how to share information. What information to share. And getting the voice of those involved, those participants is really going to be important to that.

Adrian: [00:05:52] So Jeff, as things move forward, do you think that it will be important to incorporate participant preferences for this? Or is this going to be kind of a process where everyone gets everything? How's this going to work?

Jeff: [00:06:08] Oh, I think the big emphasis for the report was to try to assess the values of the participants or participant communities themselves about this kind of information. Because I think the tradition's very much been one of the investigators making choices for people to say, well this is clinically, this has clinical utility or this doesn't have clinical utility, which is really a doctor's view of the world.

- Jeff: [00:06:34] And so what we wanted to try to break down, break that down to a certain extent to have much more engagement with the, and dialogue with the individuals and the communities who had participated in this kind of research.
- Jeff: [00:06:45] Now, I don't think that means every project has to have a set of focus groups and working directly in the community because sometimes this work will have been done already. There will be organized groups who have something to say about this already. And Consuelo has a tremendous amount of experience and thoughts about this aspect.
- Jeff: [00:07:06] But the whole notion of the report was that we ought to be assessing value to the participants from their own perspective. And that ought to be a guide, and that's not conclusive of course. People may want things that for other reasons, the decisions would be made not to be, not to disclose those results. But nevertheless, a big element of the report was that point of view.
- Adrian: [00:07:32] And Consuelo, how did the committee consider incorporating participant preferences and whether that everyone will have the context of what research results will mean? For example, I think there could be scenarios where people may say, "Yes, sure, I'd like to understand that," but then they may get a result and they may not understand how to take action or think they could need to take action. So how does that line up in terms of preferences and then real results and what actions should be taken?
- Consuelo: [00:08:11] Yeah, it's a great question, and I think the committee gave a lot of thought to all of those issues around how do we balance what the participant preferences are or will be, and certainly the variability amongst the participants in that regard, as well as with the ability to return information to them in a way that they can understand it and use it and it not cause more confusion.
- Consuelo: [00:08:47] And I think certainly the discussions around what uncertainty means to us as researchers and health care providers as opposed to what it means for participants and their families. We did have a lot of discussions about that, and I think that gets to really some of our key recommendations around getting the input of the participants and thinking about what should be or could be offered based on what they prefer, recognizing that we might not always be able to return everything that they want, but still having, hopefully, opportunities for them to request their results, if they'd like them.
- Consuelo: [00:09:35] So, what to offer everyone versus what to be prepared to make available to them when they request it, is I think an important decision point when you're planning to return the results.
- Adrian: [00:09:48] Okay, great. Now Jeff, what considerations did you all think about from the health system side or the clinician side in terms of this approach? I know one thing that's come up, especially some of our colleagues, say in primary care, where they're already starting to get all sorts of results and then having to manage that. What's, any

consequences there for our health systems or clinicians around this issue that people need to be prepared for?

Jeff: [00:10:25] Well, yeah. So, you know, that's such an important question and it's just a piece that we didn't have the time or bandwidth to try to focus on at any great length because it's so important to try to establish a good solid communication between the investigators and the clinician of the participant. Now obviously with the permission of the participant, but that's oftentimes going to be the individual who's going to help interpret what these results might mean.

Jeff: [00:10:56] Try to help with any health care decisions that might flow from that information. And so I think it's a huge issue now, just with the direct to consumer genomics companies and patients who bring in their results to the clinician and they, you know, so what now and the clinicians really are not very well prepared in many circumstances to deal with that.

Jeff: [00:11:16] So I think that that same problem is going to be part of this landscape and has to be part of the additional thinking and additional research that's going to hopefully flow from our report and other people's interest in this particular domain. I don't think there's any easy answers there because it's just an understandable challenge for clinicians to be at the forefront of information in these different domains of research for which their patients may be engaged. So, that's not a very good answer, but I think it's an important area for much more work to be done.

Adrian: [00:11:59] So Consuelo, I'm going to give you the last word here. Predict the future. What's this look like in five years?

Consuelo: [00:12:08] So in five years, I'm hoping that we will see everyone in the research enterprise really well prepared to return results to participants. I think that's going to certainly require that the IRBs have more policies and strategies to evaluate the plans for returning results and include the preferences of the participants in the decision making. I think that researchers will be more adept at finding ways to integrate the participant voice into the planning for the return of results. And I hope that that will certainly spill over into other aspects of the study design so that it's more relevant to the participants in general.

Consuelo: [00:13:02] I imagine that funders will think about how they'll pay for the return of results, and began to require that it's included in the budgets for studies that are generating data that could be returned in a meaningful way to participants. And I think really important to me is that we will no longer be using the word subjects when we refer to research volunteers, but we're calling them participants and respecting them for the time and the value that they bring to the research itself.

Adrian: [00:13:46] Well, that's terrific and I certainly hope it's sooner than five years for all of this to happen so hopefully everyone will do their very best and actually reach this new model here.

Adrian: [00:14:01] So with that, let me thank you for joining us for today's podcast and especially thank Jeff and Consuelo for sharing their insights about returning individual research results and a new report about a roadmap forward. Please join us for our next podcast as we continue to highlight fascinating and informative changes in the research world. Thanks a lot.

Consuelo: [00:14:25] Thank you.

Jeff: [00:14:26] Thank you.

Adrian: [00:14:28] Thanks for joining today's NIH Collaboratory Grand Rounds podcast. Let us know what you think by rating this interview on our website and we hope to see you again on our next Grand Rounds, Fridays at 1:00 p.m., Eastern time.