

UNITED NATIONS INTERNATIONAL CHILDREN'S FUND

Medicine and vaccine testing on children



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Student Officer: Athanasia Eleftherakoudi

Position: Deputy President

Introduction

Tens of thousands of children's lives are saved or extended each year thanks to discoveries in clinical research. Many more people's illnesses and disabilities are prevented or reduced, and the quality of life for countless more is improved. For instance, vaccinations against tetanus, pertussis, measles and several other illnesses have been developed by researchers and these vaccines have significantly reduced the amount of disabilities and suffering from these diseases saving millions of lives every year.

Scientists have suggested that children and teenagers have not benefited equally from breakthroughs in clinical research as adults have. Many medications, in particular, that may be used in children, have not been examined in research including children. Inferring based on adult drug doses and children's weight or age can be dangerous and result in underdosing or specific adverse effects that aren't noticeable in adults because children and adults differ physiologically in a variety of ways that can affect how drugs work in the body.

The Food and Drug Administration (FDA), the National Institutes of Health (NIH), and the U.S. Congress have taken action in recent years to increase research involving children. Children typically lack the legal capacity as well as the mental and emotional maturity to agree to study involvement on their own behalf, unlike the majority of adults. Their fragility necessitates extra care on the part of researchers and decision-makers, as well as additional safeguards above and beyond those offered to mentally competent adult study participants.

To enhance the health of present and future generations of children and adults throughout the world, clinical research involving children must be carefully planned and carried out. International standards and guidelines for clinical research involving children must be created.

Definition of Key Terms

Clinical trials: Prospective biomedical or behavioural research projects involving human subjects created to address certain issues with biomedical or behavioural interventions, including new therapies (such as innovative vaccinations and medications).

Clinical research: A field of medical science that evaluates the efficacy and safety of drugs, equipment, diagnostic tools, and treatment regimens designed for use in people. These can be used for illness prevention, treatment, diagnosis, or symptom relief.

Immunisation: treatment (as by vaccination) for the purpose of making an organism immune to a disease or pathogenic agent : the administration of an immune-producing substance.

Biomedical research: the study of specific diseases and conditions (mental or physical), including detection, cause, prophylaxis, treatment and rehabilitation of persons.

Vaccine: a preparation that is administered (as by injection) to stimulate the body's immune response against a specific infectious agent or disease.

World Health Organisation (WHO): the United Nations agency that connects nations, partners and people to promote health, keep the world safe and serve the vulnerable – so everyone, everywhere can attain the highest level of health.

Institutional review board (IRB): an administrative body established to protect the rights and welfare of human research subjects recruited to participate in research activities conducted under the auspices of the institution with which it is affiliated.

General Overview

Children's clinical trials are crucial because they aid in the discovery of the most effective paediatric treatments. Children are not just little adults; they have quite diverse physiological processes going on as they transition from infancy through adolescence and maturity. Instead of just altering adult dosages and therapies for children since their bodies function differently, it's necessary to develop child-specific medications and treatments.

The International Clinical Trials Registry Platform (ICTRP) is dedicated to advancing access to guidelines, regulations, and trial registration information in order to foster the conduct of moral and pertinent clinical trials in children. When planning, carrying out, and assessing these clinical studies and their results, certain ethical and clinical considerations must also be made. Children are a special group, and they present unique ethical and clinical challenges. The development of safe drugs, paediatric formulations, therapeutic treatments, and best practice recommendations all depend heavily on clinical research. When weighing the hazards of research against the requirement for secure and verified remedies, the fragile nature of this group must be taken into account. Children often cannot give legally binding permission to participate in clinical research in various countries. By facilitating access to policies, rules, and registered trial information, the ICTRP is dedicated to encouraging the conduct of moral and pertinent clinical trials in children.

The ideas of parental permission and child assent have been created as criteria for moral research with children since children lack the legal ability to give informed consent. When asked to provide their consent for a child to take part in clinical research, parents are frequently under a lot of stress and time constraint. Investigators must be extremely aware of their effect while speaking with parents of sick or damaged children since some prefer to believe the doctor's diagnosis rather than form their own. A sizable number of parents may not grasp the goal of the study, as is also the case for individuals thinking about their own involvement in it, particularly when the research examines a treatment for a serious medical condition. However, the objective of informed consent by parents continues to be a crucial safeguard for kids, both at the start of a study and all the way through it. Involving kids in conversations and decisions about study involvement should be a priority, as appropriate for their level of cognitive and emotional development and psychological well-being. Children should be included in debates and decision-making processes because it respects their developing maturity, helps them become ready for research engagement, offers them a chance to voice their worries and objections, and may even give them the chance to affect what happens to them. Moreover, Investigators should provide and IRBs should review protocol descriptions of who will request permission and assent, how and when permission and assent will be requested, and who should be contacted if parents have questions or concerns about the research in order to draw attention to the process of asking for parents' permission and children's assent to research participation.

The first rules controlling federally funded or carried out child research were released by DHHS

in 1983. These rules call for the risk to research participants to be kept to a minimum, for the risks to be reasonable given the benefits expected, for the selection of research participants to be fair, and for participants to give their informed consent., children must, in the majority of cases, have parental consent before participating in research. Additionally, it specifies that kids should provide their positive consent or agreement to taking part in research when it is acceptable. The issues with the regulations are related to inadequate government advice on how to interpret and apply them, data gaps about implementation and compliance.

Unfortunately, there are some risks in clinical research that include children. One of the most difficult and arbitrary duties for individuals tasked with assessing research involving minors is categorising, analysing, and ranking the dangers of proposed studies. Investigators and reviewers of research protocols should take the age of the children to be examined into account when assessing the risk of hazards or discomfort offered by a research program that includes children.

All countries must recognize the great importance of clinical research and clinical trials that include children, take some measures and create international standards in the name of science and humanity

Major Parties Involved

United States of America

In order to safeguard both adult and child research participants, the U.S. Department of Health and Human Services (DHHS) now has a uniform set of rules that apply to any research that is financed, carried out, or governed in the country. Nevertheless, flaws in how human research is carried out—most of which are rather small, but some of which have fatal or devastating consequences—remain to be found. The Institute of Medicine (IOM) report, which was requested in the Best Pharmaceuticals for Children Act of 2002, was prompted by worries about the mechanism for safeguarding children who participate in research and the public commitment to increasing clinical research including children. The study, which was created by a 14-member committee of the Institute of Medicine, largely focuses on clinical research that involves direct encounters with children and preventative, diagnostic, therapeutic, or similar treatments. It emphasises certain major concepts. Firstly, protecting research subjects who are children in particular requires a strong framework for protecting human subjects in general and at all phases of the design, review, and execution of such research, sufficient child health expertise is necessary for the effective application of rules to protect research subjects who are minors.

The Russian Federation

In 2019, 66 approvals for IMCTs involving minors (21% of all MCTs) were awarded, of which 47 were for IMCTs involving exclusively the paediatric population. This information was provided in the ACTO's final bulletin for 2019. At the same time, the Ministry of Health increased the minimum age requirement for clinical trial participants from 1-6 years old to at least 12 years old in around a fourth of the trials mentioned above. This is a result of both the specifics of Russian law governing the conduct of clinical trials involving minors as well as the desire of the Russian Ministry of Health to ensure patient safety.

Germany

By enhancing clinical trials in children and adolescents, the GermanNetPaeT seeks to enhance the safety and efficacy of pharmacotherapy for paediatric patients. The ultimate objective is to equip toddlers and teenagers with extremely strong medications. A crucial requirement for conducting clinical trials is greater communication between the pharmaceutical industry and paediatric clinical study facilities.

Possible Solutions

Investigators and reviewers of research protocols should focus on the equivalence of potential harms or discomfort anticipated in research with the harms or discomfort that average, healthy, normal children may encounter in their daily lives or experience in common physical activities when assessing the potential harms or discomfort posed by a research protocol that includes children.

Moreover, researchers and reviewers of research protocols should interpret minimal risk in relation to the typical experiences of average, healthy, normal children and concentrate on the similarity between potential harms or discomfort anticipated in research and the harms or discomfort that average, healthy, normal children may encounter in their daily lives or experience in common physical activities.

Furthermore, investigators and reviewers of research protocols should define minor increase over minimal risk as a slight increase in the potential for harms or discomfort above minimal risk when assessing the potential harms or discomfort posed by a research protocol that includes children who have a disorder or condition but no chance of benefiting from participation and consider the risks of harms or discomfort in relation to the ages of the children to be studied and assess the duration as well as the probability of the research procedures or interventions to determine whether they present experiences that are commensurate with, that is, reasonably comparable to, experiences already familiar to the children being studied based on their past tests or treatments or their knowledge and understanding of the treatments that they may undergo in the future.

Bibliography