

# Returning Individual Research Results and Data: Digging Deeper

A 3-part webinar series about the specific ethical, operational, and technical challenges to returning individual research results and data to participants.

**Return of Individual Results Case Study**

**Implementing a Robust, Scalable Participant Data Return Solution**

This case study details the experience of a research team returning individual research results to participants in a genetic testing study.

**Background**

A university was creating a program to offload the significant to make more information. In addition, experience, and to wa

**Approach**

The IRB weighed the risks of wa CLIA regulation if they were to Due to the unique circumstance risks associated with the virus, following:

- A "potential unconfirmed fi
- Samples being re-test
- The CLIA-certified results mandatory reporting to hea

**Return of Individual Results Case Study**

**Returning Non-Validated Test Results**

This case study details the experience of a research team returning secondary findings to participants in a genetic testing study.

**Background**

This case details the experience of a research team studying a group of serious disorders, termed Inherited Bone Marrow Failure Syndrome (IBMFS), characterized by the failure of bone marrow to produce blood. IBMFS has a significant risk of progressing to cancer (such as leukemia and lymphoma) and typically has an underlying inherited genetic cause. A study was designed to identify underlying inherited genetic causes of IBMFS in families with multiple affected members.

**Approach**

During the design of the study, the research team planned to return individual genetic testing results of IBMFS-related genes to participants. As a consequence of genetic sequencing, the team anticipated that they might discover unrelated but important genetic findings that may need to (or should) be returned to participants. During the research study, genetic sequencing revealed that an adult female patient had a previously undiscovered pathogenic variant in BRCA1, a gene that can (but may not) cause disease. Pathogenic variants in BRCA1 can lead to Hereditary Breast and Ovarian Cancer syndrome, an adult-onset disorder with increased risk of breast and ovarian cancer in females, male breast cancer, and several other cancer risks.

**Approach**

Participating unrelated but potentially important genetic findings, the research team was able to implement the following structured approach to return secondary findings to participants. The plan outlined a clear path for the research team to implement when secondary findings arose, reducing the need for ethical and legal consultations while the study was ongoing. Not only did the planning save time and resources, but most importantly, it protected the rights, health, and wellbeing of the research participants. Based on experience, the research team advised that any plan for the return of secondary genetic findings include detailed guidance on:

**Researcher Roadmap to Returning Individual Results**

This case study focuses on the pre- and on-study parts of the timeline illustrated by the green circles and red triangles.

**Background**

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Pfizer's Participant Data Return Solution – Thursday, July 27, 12–1pm EDT  
IRB and HRPP Responsibility – Thursday, August 17, 12–1pm EDT  
Genetic Testing – Thursday, September 21, 12–1pm EDT



**MULTI-REGIONAL  
CLINICAL TRIALS**

THE MRCT CENTER of  
BRIGHAM AND WOMEN'S HOSPITAL  
and HARVARD

# Returning Individual Research Results and Data: Digging Deeper into Genetic Testing

**Return of Individual Results Case Study**

**Responsibly Returning Secondary Findings**  
This case details the experience of a research team returning secondary findings to participants in a genetic testing study.

**Researcher Roadmap to Returning Individual Results**

The roadmap above shows steps for researchers to consider when planning to return individual results to participants. This case study focuses on the pre- and on-study parts of the timeline, illustrated by the green circles and red triangles.

**Background**

This case details the experience of a research team studying a group of serious disorders, termed inherited Bone Marrow Failure Syndrome (BMFS), characterized by the failure of bone marrow to produce blood. BMFS has a significant risk of progressing to cancer (such as leukemia and lymphoma) and typically has an underlying inherited genetic cause. A study was designed to identify underlying inherited genetic causes of BMFS in families with multiple affected members.

During the design of the study, the research team planned to return individual genetic testing results of BMFS-related genes to participants. As a consequence of genetic sequencing, the team anticipated that they might discover unrelated but important genetic findings that may need to (or should) be returned to participants. During the research study, genetic sequencing revealed that an adult female participant had a previously undiscovered pathogenic variant in BRCA1, a gene that can (but may not) cause disease. Pathogenic variants in BRCA1 can lead to hereditary breast and ovarian cancer syndrome, an adult-onset disorder with increased risk of breast and ovarian cancer in females, male breast cancer, and several other cancer risks.

**Approach**

Anticipating unrelated but potentially important genetic findings, the research team was able to implement the following structured approach to return secondary findings to participants. The plan outlined a clear path for the research team to implement when secondary findings arose, including the specific ethical and legal considerations while the study was ongoing. Not only did the planning save time and resources, but most importantly, it protected the rights, health, and wellbeing of the research participants. Based on experience, the research team advised that any plans for the return of secondary genetic findings include detailed guidance on:

- Secondary findings are genetic test results that provide information about variants in genes unrelated to the primary purpose of the testing.
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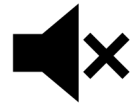
**Megan Frone**

**Board-certified  
Genetic Counselor  
at the National Cancer Institute**

# Welcome!



You are part of a community of people that cares about returning individual results and data to participants!



To limit disruptions, please keep yourself muted.



Questions can be submitted via the chat function.



Closed Captioning is available.



The recording will be available within a few days of this session.

# Disclaimer

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- The MRCT Center is supported by voluntary contributions from foundations, corporations, international organizations, academic institutions and government entities (see [www.MRCTCenter.org](http://www.MRCTCenter.org)) and well as by grants.
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- There are no personal financial conflicts of interest to disclose.



# The Multi-Regional Clinical Trials Center (MRCT Center)

## Our Vision

Improve the integrity, safety, and rigor of global clinical trials.

## Our Mission

Engage diverse stakeholders to define emerging issues in global clinical trials and to create and implement ethical, actionable, and practical solutions.



# Return of Individual Research Results (IRR) Project - Timeline

## November 2017

- Original IRR toolkit and guidance documents released



## January 2021

- Taskforce to create updated operational and implementation-oriented tools and resources



## March 2022

- Release of updated IRR resources, guidance, and project-specific website



## April-May 2023

- Launch of IRR case studies and webinar detailing experience from the field



## July-Sep 2023

- IRR Digging Deeper meeting series to continue the conversation



# MRCT Center Return of Individual Research Results

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## RETURN OF INDIVIDUAL RESEARCH RESULTS

ABOUT | GETTING STARTED | HOW TO RETURN IRR | RESOURCES | TOPICS



### Return of Individual Research Results

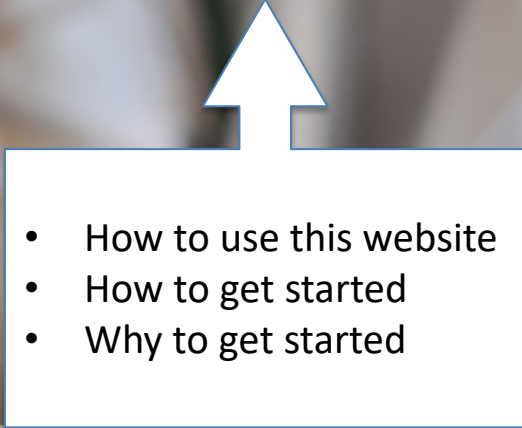
The MRCT Center is proud to release these updated resources. The guidance, recommendations, and tools on this website can further enable researchers to return individual research results (IRR) to participants

Learn More



# RETURN OF INDIVIDUAL RESEARCH RESULTS

[ABOUT](#) | [GETTING STARTED](#) | [HOW TO RETURN IRR](#) | [RESOURCES](#) | [TOPICS](#)

- 
- How to use this website
  - How to get started
  - Why to get started


## Return of Individual Research Results

The MRCT Center is proud to release these updated resources. The guidance, recommendations, and tools on this website can further enable researchers to return individual research results (IRR) to participants



# RETURN OF INDIVIDUAL RESEARCH RESULTS

ABOUT | GETTING STARTED | HOW TO RETURN IRR | RESOURCES | TOPICS

- 
- Stakeholder Roadmaps
  - Determining what to return
  - How to return (who/when/how/etc.)
  - Result-specific guidance

## Return of Individual Research Results

The MRCT Center is proud to release these updated resources. The guidance, recommendations, and tools on this website can further enable researchers to return individual research results (IRR) to participants

# RETURN OF INDIVIDUAL RESEARCH RESULTS

ABOUT | GETTING STARTED | HOW TO RETURN IRR | RESOURCES | TOPICS



# IRR Case Studies: Experiences from the Field

## Return of Individual Results Case Study

### Supporting Participant Decision-Making

This case study shares an example of how one tool to support decision making for potential participants.



The roadmap above shows steps for researchers to consider when planning to return individual results to participants. This case study focuses on the pre-study part of the timeline.

### Jamie's Story

While in her mid-20s, Jamie was diagnosed with Multiple Sclerosis (MS). With time, her symptoms changed. Unable to explain her condition, her neurologist questioned the diagnosis. As her symptoms continued to wax and wane, it became difficult not to have a diagnosis or possible treatment options.

At the age of 49, 14 years ago, Jamie had an opportunity to participate in a genetic study that she felt would help put the pieces of this medical puzzle together. The study investigated whether people would change their behaviors if they knew they were genetically at higher risk for certain diseases.

Jamie was motivated to participate because of her MS symptoms, and even though Alzheimer's disease (AD) was also being tested, her family history of AD simply wasn't on her radar screen. As an interventional genetic study, Jamie should have received interactive genetic counseling before, during, and after the study. Surprisingly, Jamie received her results electronically while alone, without having any counseling to support or advise her.

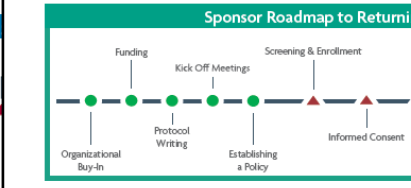
Jamie's results showed that she had two copies of the Apolipoprotein E4 (apoE4) allele, the most prevalent genetic risk factor of AD. At that time, it was estimated that she had a 91% lifetime risk of succumbing to the disease.

Jamie informed from this investigation that she should and take responsibility for her own health. She would advocate that in support genetic testing.

## Return of Individual Results Case Study

### Returning Routine Lab Results to Participants

This case study demonstrates how an industry sponsor returned routine laboratory results to participants during a clinical trial.



The roadmap above shows steps for sponsors to consider when planning to return individual results to participants. This case study focuses on the pre-study part of the timeline.

### Background

An industry sponsor conducted a pilot study as part of an effort to provide participants with select routine laboratory results. Research results would enable participants to partake in many ways with their healthcare provider. The pilot was an element of a larger study across multiple geographic locations, subject to Federal and State regulations, including the Act of 1996 (HIPAA) privacy rule.

### Approach

The sponsor recognized the need to be proactive in planning participants during the pilot. The sponsor's goal was to identify participants and design practical solutions before the larger clinical trial.

### Convening a Leadership Group

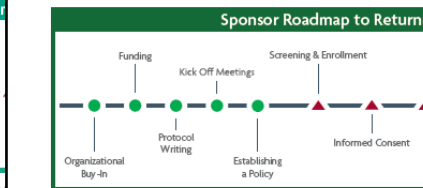
The sponsor formed a group of key internal and external stakeholders to convene relevant technical, operational, ethical, and legal expertise.

Group Member	Key Roles in Group
Project Lead	<ul style="list-style-type: none"> <li>Highlight importance of returning individual research results (IRR)</li> <li>Identify other key stakeholders to involve in IRR process</li> <li>Provide operational resources to support clinical teams in IRR efforts</li> </ul>

## Return of Individual Results Case Study

### Implementing a Robust, Scalable Process

This case study outlines how an industry sponsor returned routine laboratory results to participants during a clinical trial.



The roadmap above shows steps for sponsors to consider when planning to return individual results to participants. This case study focuses on the post-study part of the timeline.

### Background

Research participants have expressed the desire to access their personal information and to inform their medical care of their own. Investigators have a responsibility to provide more transparent information and other barriers have been identified. In addition, it is predicted that returning participant data in a consistent manner.

To address this need and work towards a more patient-centered program to offer clinical trial participants the option to receive significant time, resources, and information that participants make more informed healthcare decisions, and may facilitate trial. In addition, it is predicted that returning participant data experience, and optimize trial adherence and retention.

### Approach

Before the planning could begin, buy-in from the Executive Leadership to secure funding for this multi-year initiative. This required a significant demand from study participants to have access to their individual fulfilling this goal. Once funding was secured, it was also essential who would be involved or impacted by the introduction of a new program.

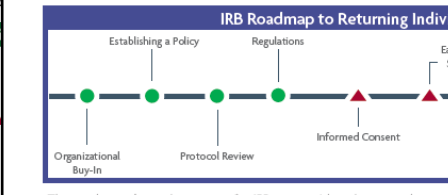
Pfizer followed a rigorous 4-step process to plan, build, operate, and participant data return:

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## Return of Individual Results Case Study

### Returning Non-Validated Test Results

This case study describes how an IRB navigated returning non-validated test results from a non-CLIA-certified lab during a clinical trial.



The roadmap above shows steps for IRBs to consider when a study proposes to return individual results to participants. This case study focuses on the on-study part of the timeline.

### Background

A university was creating a repository for current and future research on epidemiology and pathogenesis of emerging viral infections including COVID-2. A secondary aim was to validate a university-developed assay for COVID-19.

Samples were collected from hospital inpatients and outpatients exposed to COVID-19 or exhibiting symptoms of infection. Samples were then re-tested in a CLIA-certified lab to validate the results.

The IRB and researchers considered whether to return unvalidated test results from the new assay immediately to treating physicians or participants for CLIA lab confirmation, or to wait for validation.

### Approach

The IRB weighed the risks of waiting to get the samples re-tested in a CLIA-certified lab if they were to return non-CLIA-certified results to participants.

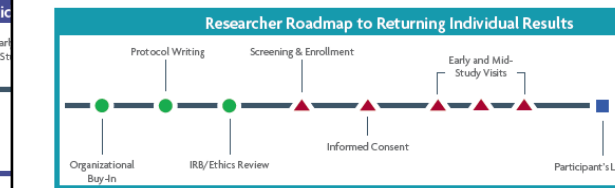
Due to the unique circumstances posed by the COVID-19 pandemic and the risks associated with the virus, the IRB determined that it was an ethical decision to return the results.

- A "potential unconfirmed finding" of a positive COVID-19 test result.
- Samples were being re-tested in a CLIA-certified lab for confirmation.
- The CLIA-certified results would be returned to the providers for mandatory reporting to health authorities and hospital infection control.

## Return of Individual Results Case Study

### Responsibly Returning Secondary Findings

This case details the experience of a research team returning secondary findings to participants in a genetic testing study.



The roadmap above shows steps for researchers to consider when planning to return individual results to participants. This case study focuses on the pre- and on-study parts of the timeline illustrated by the green circles and red triangles.

### Background

This case details the experience of a research team studying a group of serious disorders, termed Inherited Bone Marrow Failure Syndrome (IBMFS), characterized by the failure of bone marrow to produce blood. IBMFS has a significant risk of progressing to cancer (such as leukemia and lymphoma) and typically has an underlying inherited genetic cause. A study was designed to identify underlying inherited genetic causes of IBMFS in families with multiple affected members.

During the design of the study, the research team planned to return individual genetic testing results of IBMFS-related genes to participants. As a consequence of genetic sequencing, the team anticipated that they might discover unrelated but important genetic findings that may need to (or should) be returned to participants. During the research study, genetic sequencing revealed that an adult female patient had a previously undiscovered pathogenic variant in BRCA1, a gene that can (but may not) cause disease. Pathogenic variants in BRCA1 can lead to Hereditary Breast and Ovarian Cancer syndrome, an adult-onset disorder with increased risk of breast and ovarian cancer in females, male breast cancer, and several other cancer risks.

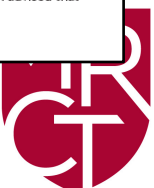
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Anticipating unrelated but potentially important genetic findings, the research team was able to implement the following structured approach to return secondary findings to participants. The plan outlined a clear path for the research team to implement when secondary findings arose, reducing the need for ethical and legal consultations while the study was ongoing. Not only did the planning save time and resources, but most importantly, it protected the rights, health, and wellbeing of the research participants. Based on experience, the research team advised that any plan for the return of secondary genetic findings include detailed guidance on:

Secondary findings are genetic test results that provide information about variants in genes unrelated to the primary purpose of the testing.



<https://mrctcenter.org/return-of-individual-results/resources/case-studies/>



# Special thanks!

Thank you to the taskforce members who contributed to the IRR update in 2021 and our other Case Study authors:

- Barbara Bierer
- Anna Kang Liu
- David Leventhal
- Megan McBride
- Lisa Murray
- Nancy Levitan Poorvu
- Sandra Prucka
- Kate Robins
- Jessica Scott
- Carol Weil
- Sarah White



**Jamie Tyrone**  
Patient Advocate



**Doris Zallen**  
Virginia Tech



**Paula Boyles**  
Pfizer



**Linda Coleman**  
Yale University



# Digging Deeper: Responsibly Returning Secondary Findings



**Megan Frone**  
National Cancer Institute

**Return of Individual Results Case Study**

**MRCT** MULTI-REGIONAL CLINICAL TRIALS  
THE MRCY CENTER AT BRIGHAM AND WOMEN'S HOSPITAL AND HARVARD

### Responsibly Returning Secondary Findings

*This case details the experience of a research team returning secondary findings to participants in a genetic testing study.*

**Researcher Roadmap to Returning Individual Results**

The diagram shows a horizontal timeline with several stages: Organizational Buy-In, Protocol Writing, IRB/Ethics Review, Screening & Enrollment, Informed Consent, Early and Mid-Study Visits, Participant's Last Visit, and End of Study. Green circles are placed under 'Organizational Buy-In', 'Protocol Writing', and 'IRB/Ethics Review'. Red triangles are placed under 'Informed Consent' and 'Early and Mid-Study Visits'. A blue square is placed under 'Participant's Last Visit'.

*The roadmap above shows steps for researchers to consider when planning to return individual results to participants. This case study focuses on the pre- and on-study parts of the timeline illustrated by the green circles and red triangles.*

#### Background

This case details the experience of a research team studying a group of serious disorders, termed Inherited Bone Marrow Failure Syndrome (IBMFS), characterized by the failure of bone marrow to produce blood. IBMFS has a significant risk of progressing to cancer (such as leukemia and lymphoma) and typically has an underlying inherited genetic cause. A study was designed to identify underlying inherited genetic causes of IBMFS in families with multiple affected members.

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**Secondary findings are genetic test results that provide information about variants in genes unrelated to the primary purpose of the testing.**

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Anticipating unrelated but potentially important genetic findings, the research team was able to implement the following structured approach to return secondary findings to participants. The plan outlined a clear path for the research team to implement when secondary findings arose, reducing the need for ethical and legal consultations while the study was ongoing. Not only did the planning save time and resources, but most importantly, it protected the rights, health, and wellbeing of the research participants. Based on experience, the research team advised that any plan for the return of secondary genetic findings include detailed guidance on:



Disclaimer: Today's content represents the work and opinions of the presenter and does not constitute official positions of the National Institutes of Health (NIH), National Cancer Institute (NCI) or the U.S. Department of Health & Human Services (HHS).