Health and Disability Ethics Committees
Ministry of Health
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Ethics reference: 2024 FULL 19276

13 February 2024

Dr Alexander Semprini

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Tēnā koe Dr Semprini

APPROVAL OF APPLICATION

Study title: A First-in-Human, Phase 1, Double-Blind, Randomised, Placebo-Controlled, Single and Multiple Ascending Dose Study to Evaluate the Safety, Tolerability, and Pharmacokinetics of Ginger Tincture extract (Carelwon®; zingerone 12.5 mg/mL) in Healthy Volunteers.

I am pleased to advise that your application was **approved** by the Central Health and Disability Ethics Committee (the Committee) with non-standard conditions. This decision was made through the full review pathway.

Summary of resolved ethical issues

The main ethical issues considered by the Committee and addressed by the Researcher are as follows.

1. The Researcher confirmed the study would offer a flat rate for reimbursement that could be increased if participants incurred higher travel costs and that tax would be withheld.

Summary of outstanding ethical issues

The main ethical issues considered by the Committee which require addressing by the Researcher are as follows.

1. The Committee queried why people with HIV or Hepatitis C would be excluded from the study. The Researcher agreed to discuss this with the Sponsor.
2. The Committee requested the Researcher upload the Coordinating Investigator's renewed indemnity certificate. *(National Ethical Standards for Health and Disability Research and Quality Improvement, para 17.6).*

The Committee requested the following changes to the Participant Information Sheet and Consent Form (PIS/CF):

1. Please make it clear that reimbursement includes tax that will be deducted before payment.
2. Please specify that only the ethical aspects of the study have been approved by the Central Health and Disability Ethics Committee.
3. Please undertake a general revision of technical terms to be lay-friendly.
4. Please revise the statement regarding no vegetarian form of nutrition to specify participants will be provided with meals as part of the study.
5. Please specify whether blood samples will be returned as it currently states they may or may not.
6. Please remove the reference to Māori data in the risks section and discuss it with the Māori data sovereignty statement.
7. Please revise the conflicting information in page 15 which states participants will not be informed whether they receive the drug (under the 'Change my mind' section) and page 3 which states participants can find out at the end of the study whether they received the active drug or placebo.
8. Please revise 'you should not' incur any costs with 'you will not'.
9. Please advise participants of any physical examinations and whether undressing or the removal of clothing will be necessary.
10. Please specify on page 5 that vaccination includes the COVID-19 vaccine.
11. Please clarify the reference to chocolate to specify this includes solid chocolate and not just drinks.
12. Please remove gendered language from the sheet. The HDEC reproductive risks template may be adapted for gender-neutral language.
13. Please remove the 'yes / no' option for GP notification as this should be a mandatory component of study participation. *(National Ethical Standards for Health and Disability Research and Quality Improvement, para 7.15 – 7.17).*

Conditions of HDEC approval

HDEC approval for this study is subject to the following conditions being met prior to the commencement of the study in New Zealand. It is your responsibility, and that of the study's sponsor, to ensure that these conditions are met. No further review by the Central Health and Disability Ethics Committee is required.

Standard conditions:

- Before the study commences at *any* locality in New Zealand, all relevant regulatory approvals must be obtained.
- Before the study commences at *any* locality in New Zealand, it must be registered in a clinical trials registry. This should be a registry approved by the World Health Organization (such as the Australia New Zealand Clinical Trials Registry, www.anzctr.org.au or https://clinicaltrials.gov/).
- Before the study commences at *each given* locality in New Zealand, it must be authorised by that locality in Ethics RM. Locality authorisation confirms that the locality is suitable for the safe and effective conduct of the study, and that local research governance issues have been addressed.

Non-standard conditions:

- please address all outstanding ethical issues raised by the Committee
- please update the Participant Information Sheet and Consent Form, taking into account the feedback provided by the Committee. *(National Ethical Standards for Health and Disability Research and Quality Improvement, para 7.15 – 7.17).*
- please supply evidence of professional indemnity for the coordinating investigator *(National Ethical Standards for Health and Disability Research and Quality Improvement, para 17.6).*

Non-standard conditions must be completed before commencing your study, however, they do not need to be submitted to or reviewed by HDECs.

If you would like an acknowledgement of completion of your non-standard conditions you may submit a post approval form amendment through the Ethics Review Manager. Please clearly identify in the amendment form that the changes relate to non-standard conditions and ensure that supporting documents (if requested) are tracked/highlighted with changes.

For information on non-standard conditions please see paragraphs 125 and 126 of the *Standard Operating Procedures for Health and Disability Ethics Committees (SOPs)*.

After HDEC review

Please refer to the *SOPs* for HDEC requirements relating to amendments and other post-approval processes.

Your next progress report is due by 13 February 2025.

As your study is an intervention study involving a new medicine, all progress reports **must** be accompanied by an annual safety report. While there is no prescribed format for annual safety reports, they must be no longer than two pages in length, written in lay language, and include a brief description and analysis of:

- new and relevant findings that may have a significant impact on the safety of participants
- the safety profile of the new medicine and its implications for participants, taking into account all safety data as well as the results of any relevant non-clinical studies
- the implications of safety data to the risk-benefit ratio for the intervention study, and whether study documentation has been or will be updated
- any measures taken or proposed to minimise risks. (Where such a proposed measure would be a substantial amendment, it must be submitted for HDEC review in the normal way).

For the avoidance of doubt, Development Safety Update Reports may serve as annual safety reports to HDECs provided that they contain the information outlined above. These summaries should be accompanied by comment from the New Zealand coordinating investigator of the study.

Please refer to paragraphs 206 to 208 of the *SOPs* for further information.

Participant access to compensation

This clinical trial is to be conducted principally for the benefit of the manufacturer or distributor of the medicine or item being trialled. Section 32 of the Accident Compensation Act 2001 provides that participants injured as a result of treatment received as part of this trial will **not** be eligible for publicly-funded compensation through the Accident Compensation Corporation.

Further information and assistance

Please contact the HDECs Secretariat at hdecs@health.govt.nz or visit our website at www.ethics.health.govt.nz for more information, as well as our General FAQ and Ethics RM user manual.

Nāku noa, nā

Mrs Helen Walker

Chair

Central Health and Disability Ethics Committee

Encl: Appendix A: documents submitted

Appendix B: statement of compliance and list of members

Appendix A: Documents submitted

Document Type	File Name	Date	Version
Evidence of CI Indemnity	Schedule - Dr Alex Semprini[53]	01/02/2023	1.0
Protocol	Carelwon_v1.0_Final protocol_5Dec23_clean	05/12/2023	1.0
CV for Coordinating Investigator	HRC CV July 2023	04/01/2024	1.0
Evidence of Sponsor Insurance	20231220 POLICY BSM0039841482	05/01/2024	1
PIS/CF	EVITHE PISCF v1_SAD fed	09/01/2024	1.0
PIS/CF	EVITHE PISCF v1_SAD fasted	09/01/2024	1.0
PIS/CF	EVITHE PISCF v1_MAD	09/01/2024	1.0
Surveys/questionnaires	Diary version 1.0	09/01/2024	1.0
Other	Participant Card_v1	09/01/2024	1.0
Advertisement	1.0 Advertising guidelines for HDEC final	09/01/2024	1.0
Advertisement	1.0 EVITHE Advertising phrases for HDEC final	09/01/2024	1.0
Scientific Peer Review	EVITHE_Carelwon peer review_TH	09/01/2024	1.0
Data and Tissue Management Plan	Final DTM Plan 09012024	09/01/2024	1.0

Appendix B: Statement of compliance and list of members

Statement of compliance

The Central Health and Disability Ethics Committee

- is constituted in accordance with its Terms of Reference
- operates in accordance with the *Standard Operating Procedures for Health and Disability Ethics Committees*, and with the principles of international good clinical practice (GCP)
- is approved by the Health Research Council of New Zealand's Ethics Committee for the purposes of section 25(1)(c) of the Health Research Council Act 1990
- is registered (number 00008712) with the US Department of Health and Human Services' Office for Human Research Protection (OHRP).

List of members

Mrs Helen Walker (Lay (consumer/community perspectives)), Dr Cordelia Thomas (Lay (the law)), Ms Sandy Gill (Lay (consumer/community perspectives)), Dr Patries Herst (Non-lay (intervention studies)),Ms Jessie Lenagh-Glue (Lay (ethical and moral reasoning)), Mx Albany Lucas (Non-lay (observational studies)), Mr Barry Taylor (Non-lay (observational/intervention studies)).

Unless members resign, vacate or are removed from their office, every member of HDEC shall continue in office until their successor comes into office (HDEC Terms of Reference).

http://www.ethics.health.govt.nz