Office of Research Regulatory Affairs
4301 W. Markham, #813
Little Rock, AR 72205-7199
https://researchservices.uams.edu/

University of Arkansas for Medical Sciences

Department: UAMS Office of Research Regulatory Affairs
Effective Date: October 10, 2024

SUBJECT: Guidance When Submitting Single Patient, Non-Emergency Use Expanded Access Requests

POLICY

Expanded Access Programs ("EAPs") are potential pathways for patients with serious or immediately life-threatening diseases or conditions to gain access to an investigational medical product (drug, biologic) for treatment outside of clinical trials when no comparable or satisfactory alternative therapy options are available. The primary purpose is to diagnose, monitor, or treat diseases/conditions rather than to obtain the kind of information about the drug that is generally derived from clinical trials (i.e., safety and effectiveness data).

Per UAMS Administrative Guide Policy 16.1.10, UAMS will serve as Sponsor for Expanded Access Investigational New Drug applications ("INDs"), including Single Patient, Non-Emergency Use INDs ("SPINDs"; another term for single patient expanded access) by default. The Principal Investigator ("PI")/Treating Physician may be allowed to serve as the Sponsor-Investigator for SPINDs at the discretion of the Vice Chancellor of Research and Innovation ("VCRI") in consultation with the Office of Research Regulatory Affairs ("ORRA") and the UAMS Institutional Review Board ("IRB").

PROCEDURE

To use a drug in an EAP, the **first step is to ensure the manufacturer is willing to provide the investigational drug for expanded access use**, as this approval is needed before a physician can submit a request to the United States Food and Drug Administration ("FDA") or an IRB on behalf of a patient.

If UAMS will serve as Sponsor (per UAMS Administrative Guide Policy 16.1.10, UAMS will NOT serve as Sponsor of an Emergency IND), read the information below and involve ORRA as soon as possible in the process, as ORRA will act on behalf of UAMS to fulfill Sponsor responsibilities.

For a SPIND, a written request for individual patient use of an investigational drug must be submitted to the FDA. Upon receipt of the submission, FDA will review and either allow the treatment to proceed or place the IND on hold (FDA allows over 99% of single patient expanded access requests to proceed). FDA may contact the PI/Treating Physician and/or Sponsor (i.e., ORRA) to request more information or clarification in order to avoid placing the IND on hold.

Treatment may proceed 30 days after FDA receives the IND submission or upon notification of the PI/Treating Physician and/or Sponsor by FDA, whichever comes first. If the treatment use is not allowed to proceed (i.e., a clinical hold is placed on the submission), FDA will notify the PI/Treating Physician and/or Sponsor of this decision initially via a telephone call. The call will be followed by a written letter that provides the reason(s) for FDA's denial of the request.

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In addition to FDA approval, IRB approval and informed consent must be obtained before treatment begins.

Follow the steps below after obtaining manufacturer approval to use the drug for expanded access:

- Study team will work with manufacturer to determine what documents they will provide (e.g., protocol/treatment plan, consent, case report forms, contracts/agreements, letter of authorization, etc.).
    - ORRA will work with study team to create any documents not provided by manufacturer or revise those provided.
- Study team will obtain and present documents to UAMS/ACRI legal teams and any other UAMS/ACRI teams (e.g., intake, compliance, budget), as necessary, for preliminary review.
    - All stakeholders should add appropriate language.
    - If necessary, legal/compliance should draft an agreement for signature(s).
- Study team will forward all documents to ORRA for review.
    - ORRA will work with study team to revise documents for content, as necessary, including addition of Sponsor-specific language, FDA-required regulatory language, formatting, etc.
    - ORRA will return approved documents to study team for IRB submission.
- If IRB has contingencies, study team will address those and send back to ORRA for review and approval before re-submitting to IRB.
- ORRA will submit the necessary documents for the initial SPIND request to FDA, including Form FDA 3926 (which ORRA will complete, but PI/Treating Physician will sign).
- Study team will make initial submission to IRB, with type of IRB review based on information submitted on Form FDA 3926 (i.e., Field 10.b) -
    - IRB will review the expanded access use at a convened IRB meeting at which a majority of the members are present (full IRB review) (21 CFR 56.108(c)).
      OR
    - For SPINDs where the IRB chairperson or another designated IRB member provides concurrence before treatment use begins, the review would follow a different review pathway that is neither full board nor expedited, but rather one in which the IRB chair or designee reviews the relevant documents (as determined by the IRB).
- Once FDA grants permission to proceed, study team can move forward with requesting drug from the manufacturer.
    - Active INDs will be assigned an IND number. The drug supplier may request the IND number in order to ship the drug to the PI/Treating Physician.
- ORRA will provide several documents for PI/Treating Physician review and signature (e.g., Financial Disclosure Form, Sponsor-Site Agreement, Monitoring Plan) and discuss training, if necessary.
- Treatment with the drug may proceed:
    - 30 days after FDA receives the IND submission or upon notification of the PI/Treating Physician by FDA, whichever comes first; **and**
    - After IRB approves all documents; **and**
    - After drug is received from manufacturer; **and**
    - After consent from patient is obtained.

If the PI/Treating Physician would instead like to serve as Sponsor-Investigator of an SPIND, follow the steps listed below, involving ORRA as soon as possible in the process:

- Email a copy of current signed/dated CV and Medical License for PI/Treating Physician to RegulatoryAffairs@uams.edu. ORRA may request other materials, as necessary.
- Submit letter provided by ORRA (signed by VCRI) to IRB with study submission in CLARA, along with any materials from external company/Sponsor that may be assisting with the request, including information about the specific expanded access program being joined.

REFERENCES

https://www.fda.gov/news-events/expanded-access/expanded-access-information-industry

https://www.fda.gov/drugs/investigational-new-drug-ind-application/physicians-how-request-single-patient-expanded-access-compassionate-use

https://www.fda.gov/news-events/public-health-focus/expanded-access

https://www.fda.gov/regulatory-information/search-fda-guidance-documents/expanded-access-investigational-drugs-treatment-use-questions-and-answers-0

https://www.fda.gov/news-events/expanded-access/expanded-access-how-submit-request-forms#:~:text=A%20physician%20using%20Form%20FDA,of%20the%20members%20are%20present.

https://research.uams.edu/irb/emergency-use/

UAMS Administrative Guide Policy 16.1.10