1 PURPOSE

To provide procedures to follow when unblinding a participant in a blinded, randomized clinical research trial. Unblinding or breaking the blind, refers to the process by which the treatment assigned to a research participant is revealed.

2 GENERAL PROCEDURES AND RESPONSIBILITIES

Blinding is a method used in a clinical trial to prevent participants and/or researchers from knowing whether the participant is receiving the experimental or control treatment in a trial. Single blinding is when only the patient does not know, whereas double blinding is when neither the researcher nor the participant knows which arm of the study they are on. This information is usually kept with the sponsor to prevent bias in the treatment or reporting of results.

Unblinding is the process by which a randomization code is broken so that the investigator, clinical staff and/or the trial statistician becomes aware of the intervention a research participant receives during the conduct of a randomized clinical trial.

Great care should be taken to ensure that participants are not unblinded unnecessarily and the study results compromised, and should only occur in “emergencies when the treatment and care of a participant is dependent on knowing what treatment they received.”

3 SPECIFIC PROCEDURES

Before a participant is randomized and treated in a clinical research trial, code breaking procedures should be clearly established in the protocol and must strictly be adhered to.

1. Prior to the start of the study, 24 hour sponsor contact information should be obtained including names, telephone numbers, and email addresses of the medical officer, monitor
and other relevant safety personnel. This information should be easily accessible and readily available to the research staff.

2. In general, the code should only be broken in cases of:
   a. Immediate medical care of an adverse event in one of the participants where it is necessary for the PI to know which treatment the participant is receiving before clinical treatment decisions can be made
   b. A non-research participant using the investigational agent
   c. An unmasked analysis in accordance with the study analysis plan
   d. A request made by the Data Safety Monitoring Board
   e. Study closure to determine the effects of the intervention (per sponsor instruction)

3. The protocol must first be consulted to verify the necessary unblinding procedures.
   a. Contact will be made with the investigational pharmacy and the following details provided: caller name and position, study site, principal investigator, name of research participant, protocol number and study ID.
   b. The Principal Investigator at the site, in consultation with the study team and the pharmacist at the local institution, will assess the need for unblinding.

4. The following groups will also need to be notified immediately:
   a. The sponsor via telephone, email or fax and written permission obtained. The rationale for breaking of the blind should be clearly documented and the instructions provided by the sponsor.
   b. The Medical Monitor via telephone and/or email.
   c. The IRB via reporting an unanticipated problem (when associated with the management of an Adverse Event)
   d. FDA if the PI is the Investigator-sponsor for a study under an IND/IDE.

5. If the code is broken for a research participant, the date, time and reason for unblinding should be clearly documented in the Case Report Form and the participant’s study binder.

6. When the blind is broken, the data collected for that participant must be excluded from the study.

While the safety of the participant should always come first, it is important to seriously consider if unblinding the study therapy is necessary in order to ensure the participant’s safety.

4 REFERENCES TO OTHER APPLICABLE SOPS

- SOP 605 – Adverse Event Recognition and Reporting
- SOP 501 - Communication

5 ATTACHMENTS

None

6 APPLICABLE REGULATIONS AND GUIDELINES

- ICH E6
- FDA Guidance for Clinical Trial Sponsors: Establishment and Operation of Clinical Trial Data Monitoring Committees, March 2006