

Trust me I'm a Doctor! Why this isn't working and how to fix it

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'What's the Problem?'

THE

LIFF

MMORTAL

HENRIETTA

Doctors took her cells without asking

Their lives would never be the same

More than twenty years later, her children found out.

REBECCA SKLOO

LACKS

Those cells never died They launched a medical revolution and a multimillion-dollar industry.

- Biobanks & medical research are highly valued
- Biobanks & medical research are highly trusted
- Medical information is highly sensitive
- > My grandfather was a Patient
 - BUT I am a Health Consumer
- > And underlying fears:
 - Internet & Re-identification
 - Surveillance Society
 - Brave New World α -β-γ-δ
 - What's done can't be undone
 - Even if it could, who will do it?

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 - Anonymous Volunteers In DNA What's done can't be undone
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Building trust and inno

Study A Harvard professor has re-identified the names of more than 40% of a sample of anonymous participants in a high-profile DNA study, highlighting the dangers that ever greater amounts of personal data available in the Internet era could unravel personal secrets.

Harvard Professor Re-Identifies

THE IFE ΟF LACKS

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SKLOO

The Solution's Obvious

More Legislation



- Researchers and biobankers follow the laws
 - BUT laws are broken by bad people with malicious intent
 - And even the good guys make mistakes

More Guidelines



- Provide guidance about what is the right thing to do
 - YET constantly evolving as technology and society evolves
 - And even the good guys make mistakes
- More Infrastructure
 - Locks on filing cabinets, passwords, encryption
 BUT any system can be broken into with enough determination
 And even the good guys make mistakes



'There has to be a better way'

But we have to structure the problem properly

First, winners and losers:

	Research Value	Privacy, Safety etc
Public Interest	\checkmark	?
Private Interest	?	

Implication: the economics of externalities

'There has to be a better way'

Second, risk management has 3 components:

- Prevention Detection Response
- Response has 3 components:
 - o Learn Restore Punish
- Third, there's a big difference between reversible adverse events & those that aren't
- Fourth, all systems degrade, even governance

EROSio

2nd Law of Thermodynamics

Building trust and innovati

So, what is the better way?



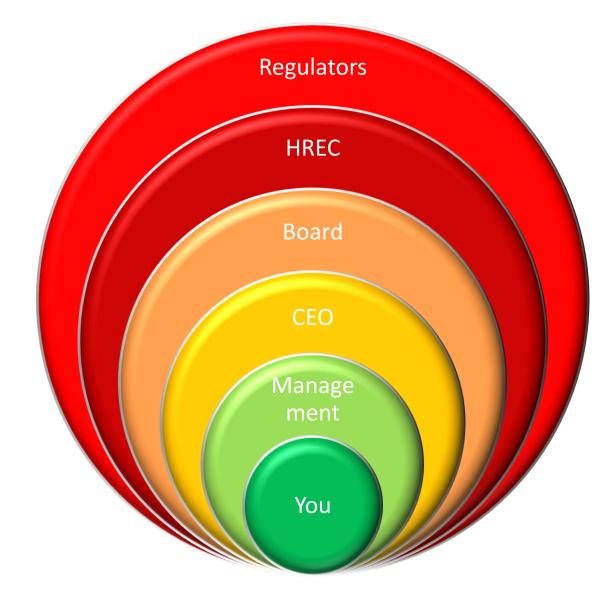
- Ethical, Effective, Efficient
- Fit for purpose
- Start with what works

Improve it or add to it



Remember governance is like an onion

≻Eg:



Now let's apply all this to Prevention

- Where would you like the balance to lie?
 - With you!
- Where is the balance now?
 - Too far towards the outer circles?
- So how to re-balance?
 - National Statement, HRECs etc enough?

Change Idea No 1:

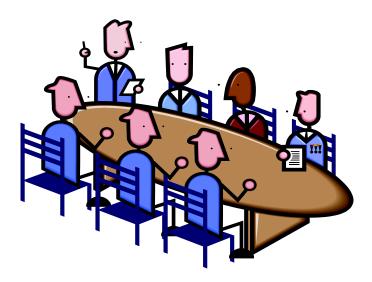
- Strengthen: education, guidance, leadership
- Evaluate, publish, share, <u>community</u> input Building trust and innovative privacy solutions



But also!

>The externality problem

- Real or perceived
- Hence Ethics Committees
 - Research merit
 - AND stand in the shoes of research subject
 - Challenge is process and efficiency



BB Bb Bellberry Limited bB supporting research and ethics bb

But one more thing ... Response when it all goes wrong

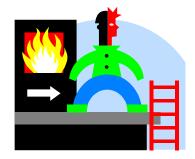
Not if, WHEN

- Plan and Practice!
- Fire drill; data back up; ...
- Research equivalent?
 - For researcher AND for research subjects?

> Change Idea No 2

- Detection & Response plans MUST
 - o Maximise learning
 - Ensure recovery
 - Minimise need for punishment
 - Provide public assurance!









Yes, the patient perspective

- First, it will depend on whether the adverse event is reversible or irreversible
- Some events genuinely irreversible
 - If you are dead, you are dead
 - Others less so, even reputation and discrimination with effort

> Change Idea No 3

- For the reversible, the better the recovery the greater the acceptable levels of risk
- What's your plan? How to spread the risk? Insurance?

The 2nd Law of Thermodynamics

So your prevention and recovery strategies address patient risk

>There's still the 2nd Law...

- Laziness/negligence/malfeasance
- Times change
 - People move on and get old
 - O Corners cut
 - New people come in
 - New technologies & practice

> Change idea No 4

- Plan for this too Review or be reviewed!
- Publish, engage, be up front, be honest





Yes, change is needed

Change Idea No 1:

- Strengthen with education, guidance, leadership
- Evaluate, publish, share, seek external views & input

Change Idea No 2

- Focus your Detection & Response plans to
 - Maximise learning
 - Ensure recovery
 - Minimise need for punishment

Yes, change is good

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