

## Glossary of Terms

### A

**Adverse Drug Reaction (ADR):** In the preapproval clinical experience with a new medicinal product or its new usages, particularly as the therapeutic dose(s) may not be established, all noxious and unintended responses to a medicinal product related to any dose should be considered adverse drug reactions. The phrase "responses to a medicinal product" means that a causal relationship between a medicinal product and an adverse event is at least a reasonable possibility, i.e., the relationship cannot be ruled out.

**ADR (regarding Marketed Medicinal Products):** A response to a drug that is noxious and unintended and that occurs at doses normally used in man for prophylaxis, diagnosis, or therapy of diseases or for modification of physiological function.

**Adverse Event (AE):** An AE is any untoward medical occurrence in a patient or clinical investigation subject administered a pharmaceutical product and that does not necessarily have a causal relationship with this treatment. An AE can therefore be any unfavorable and unintended sign (including an abnormal laboratory finding), symptom, or disease temporally associated with the use of a medicinal (investigational) product, whether or not related to the medicinal (investigational) product.

**Amendment (to the Protocol):** See Protocol Amendment.

**Applicable Regulatory Requirement(s):** Any law(s) and regulation(s) addressing the conduct of clinical trials of investigational products of the jurisdiction where trial is conducted.

**Approval (in relation to Independent Ethics Committees (IECs) / Institutional Review Boards (IRBs)):** The affirmative decision of the IEC / IRB that the clinical trial has been reviewed and may be conducted at the institution site within the constraints set forth by the IEC / IRB, the institution, good clinical practice (GCP), and the applicable regulatory requirements.

**Audit:** A systematic and independent examination of trial-related activities and documents to determine whether the evaluated trial-related activities were conducted, and the data were recorded, analyzed, and accurately reported according to the protocol, sponsor's standard operating procedures (SOPs), good clinical

practice (GCP), and the applicable regulatory and ethical requirement(s).

## **B**

**Baseline-controlled studies:** In so-called baseline-controlled studies, the patient's state over time is compared with their baseline state. Although these studies are sometimes thought to use "the patient as his own control", they do not in fact have an internal control. Rather, changes from baseline are compared with an estimate of what would have happened to the patients in the absence of treatment with the test drug.

**Blinding / Masking / Open-label:** A procedure in which one or more parties to the trial are kept unaware of the treatment assignment(s). Single blinding usually refers to the subject(s) being unaware, and double blinding usually refers to the subject(s), investigator(s), monitor, and, in some cases, data analyst(s) being unaware of the treatment assignment(s). In an open-label trial the identity of treatment is known to all.

## **C**

**Case Report Form (CRF):** A printed, optical, or electronic document designed to record all of the protocol-required information to be reported to the sponsor on each trial subject.

**Clinical Trial / Study:** Any investigation in human subjects intended to discover or verify the clinical, pharmacological, and/or other pharmacodynamic effects of an investigational product(s), and/or to identify any adverse reactions to an investigational product(s), and/or to study absorption, distribution, metabolism, and excretion of an investigational product(s) with the object of ascertaining its safety and/or efficacy. The terms clinical trial and clinical study are synonymous.

**Clinical Trial / Study Report:** A written description of a trial/study of any therapeutic, prophylactic, or diagnostic agent conducted in human subjects, in which the clinical and statistical description, presentations, and analyses are fully integrated into a single report.

**Comparator (Product):** An investigational or marketed product (i.e., active control), or placebo, used as a reference in a clinical trial.

**Compliance (in relation to trials):** Adherence to all the trial-related requirements, good clinical practice (GCP) and ethical

requirements, and the applicable regulatory requirements.

**Confidentiality:** Prevention of disclosure, to other than authorized individuals, of a sponsor's proprietary information or of a subject's identity and personal data.

**Contract:** A written, dated, and signed agreement between two or more involved parties that sets out any arrangements on delegation and distribution of tasks and obligations and, if appropriate, on financial matters. The protocol may serve as the basis of a contract.

**Contract Research Organization (CRO):** A person or an organization (commercial, academic, or other) contracted by the sponsor to perform one or more of a sponsor's trial-related duties and functions.

**Coordinating Committee:** A committee that a sponsor may organize to coordinate the conduct of a multicenter trial.

**Coordinating Investigator:** An investigator assigned the responsibility for the coordination of investigators at different centers participating in a multicenter trial.

## **D**

**Direct Access:** Permission to examine, analyze, verify, and reproduce any records and reports that are important to evaluation of a clinical trial. Any party (e.g., domestic and foreign regulatory authorities, sponsors, monitors, and auditors) with direct access should take all reasonable precautions within the constraints of the applicable regulatory requirement(s) to maintain the confidentiality of subjects' identities and sponsor's proprietary information.

**Documentation:** All records, in any form (including, but not limited to, written, electronic, magnetic, and optical records; and scans, x-rays, and electrocardiograms) that describe or record the methods, conduct, and/or results of a trial, the factors affecting a trial, and the actions taken.

## **G**

**Good Clinical Practice (GCP):** A standard for the design, conduct, performance, monitoring, auditing, recording, analyses, and reporting of clinical trials that provides assurance that the data and reported results are credible and accurate, and that the rights, integrity, and confidentiality of trial subjects are protected.



**IFPMA**

International Federation of Pharmaceutical  
Manufacturers & Associations

## **I**

**Impartial Witness:** A person, who is independent of the trial, who cannot be unfairly influenced by people involved with the trial, who attends the informed consent process if the subject or the subject's legally acceptable representative cannot read, and who reads the informed consent form and any other written information supplied to the subject.

**Independent Data Monitoring Committee (IDMC) / Data and Safety Monitoring Board (DSMB) / Monitoring Committee / Data Monitoring Committee:** An independent data monitoring committee that may be established by the sponsor to assess at intervals the progress of a clinical trial, the safety data, and the critical efficacy endpoints, and to recommend to the sponsor whether to continue, modify, or stop a trial.

**Independent Ethics Committee (IEC) / Institutional Review Board (IRB):** An independent body (a review board or a committee, institutional, regional, national, or supranational), constituted of medical / scientific professionals and nonmedical / nonscientific members, whose responsibility it is to ensure the protection of the rights, safety, and well-being of human subjects involved in a trial and to provide public assurance of that protection, by, among other things, reviewing and approving/providing favorable opinion on the trial protocol, the suitability of the investigator(s), facilities, and the methods and material to be used in obtaining and documenting informed consent of the trial subjects. The legal status, composition, function, operations, and regulatory requirements pertaining to IECs / IRBs may differ among countries, but should allow the IECs / IRBs to act in agreement with good clinical practice (GCP).

**Informed Consent:** A process by which a subject voluntarily confirms his or her willingness to participate in a particular trial, after having been informed of all aspects of the trial that are relevant to the subject's decision to participate. Informed consent is documented by means of a written, signed, and dated informed consent form.

**Inspection:** The act by a regulatory authority(ies) of conducting an official review of documents, facilities, records, and any other resources that are deemed by the authority(ies) to be related to the clinical trial and that may be located at the site of the trial, at the sponsor's and/or contract research organization's (CROs) facilities,

or at other establishments deemed appropriate by the regulatory authority(ies).

**Institution (Medical):** Any public or private entity or agency or medical or dental facility where clinical trials are conducted.

**Interim Clinical Trial / Study Report:** A report of intermediate results and their evaluation based on analyses performed during the course of a trial.

**Investigational Product:** A pharmaceutical form of an active ingredient or placebo being tested or used as a reference in a clinical trial, including a product with a marketing authorization when used or assembled (formulated or packaged) in a way different from the approved form, or when used for an unapproved indication, or when used to gain further information about an approved use.

**Investigator:** A person responsible for the conduct of the clinical trial at a trial site. If a trial is conducted by a team of individuals at a trial site, the investigator is the responsible leader of the team and may be called the principal investigator.

**Investigator's Brochure:** A compilation of the clinical and nonclinical data on the investigational product(s) that is relevant to the study of the investigational product(s) in human subjects.

## L

**Legally Acceptable Representative:** An individual or juridical or other body authorized under applicable law to consent, on behalf of a prospective subject, to the subject's participation in the clinical trial.

## M

**Monitoring:** The act of overseeing the progress of a clinical trial, and of ensuring that it is conducted, recorded, and reported in accordance with the protocol, standard operating procedures (SOPs), good clinical practice (GCP), and the applicable regulatory requirement(s).

**Monitoring Report:** A written report from the monitor to the sponsor after each site visit and/or other trial-related communication according to the sponsor's standard operating procedures (SOPs).

**Multicenter Trial:** A clinical trial conducted according to a single

protocol but at more than one site, and, therefore, carried out by more than one investigator.

## **P**

**Pharmacodynamic (PD) Study:** A study of a pharmacological or clinical effect of the medicine in individuals to describe the relation of the effect to dose or drug concentration. A pharmacodynamic effect can be a potentially adverse effect (anticholinergic effect with a tricyclic), a measure of activity thought related to clinical benefit (various measures of beta-blockade, effect on ECG intervals, inhibition of ACE or of angiotensin I or II response), a short term desired effect, often a surrogate endpoint (blood pressure, cholesterol), or the ultimate intended clinical benefit (effects on pain, depression, sudden death).

**Pharmacokinetic (PK) Study:** A study of how a medicine is handled by the body, usually involving measurement of blood concentrations of drug and its metabolite(s) (sometimes concentrations in urine or tissues) as a function of time. Pharmacokinetic studies are used to characterize absorption, distribution, metabolism and excretion of a drug, either in blood or in other pertinent locations. When combined with pharmacodynamic measures (a PK/PD study) it can characterize the relation of blood concentrations to the extent and timing of pharmacodynamic effects.

**Primary and Secondary Variables / Primary and Secondary Endpoints:** The *primary* variable ('target' variable, primary endpoint) should be the variable capable of providing the most clinically relevant and convincing evidence directly related to the primary objective of the trial. There should generally be only one primary variable. This will usually be an efficacy variable, because the primary objective of most confirmatory trials is to provide strong scientific evidence regarding efficacy. Safety/tolerability may sometimes be the primary variable, and will always be an important consideration. The primary variable should be specified in the protocol, along with the rationale for its selection. Redefinition of the primary variable after unblinding will almost always be unacceptable, since the biases this introduces are difficult to assess. When the clinical effect defined by the primary objective is to be measured in more than one way, the protocol should identify one of the measurements as the primary variable on the basis of clinical relevance, importance, objectivity, and/or other relevant characteristics, whenever such selection is feasible. *Secondary* variables are either supportive measurements related to the primary objective or measurements of effects related to the

secondary objectives. Their predefinition in the protocol is also important, as well as an explanation of their relative importance and roles in interpretation of trial results. The number of secondary variables should be limited and should be related to the limited number of questions to be answered in the trial.

**Protocol:** A document that describes the objective(s), design, methodology, statistical considerations, and organization of a trial. The protocol usually also gives the background and rationale for the trial, but these could be provided in other protocol referenced documents. Throughout the ICH good clinical practice (GCP) guideline, the term protocol refers to protocol and protocol amendments.

**Protocol Amendment:** A written description of a change(s) to or formal clarification of a protocol.

## **Q**

**Quality Assurance (QA):** All those planned and systematic actions that are established to ensure that the trial is performed and the data are generated, documented (recorded), and reported in compliance with good clinical practice (GCP) and the applicable regulatory requirement(s).

**Quality Control (QC):** The operational techniques and activities undertaken within the quality assurance system to verify that the requirements for quality of the trial related activities have been fulfilled.

## **R**

**Randomization:** The process of assigning trial subjects to treatment or control groups using an element of chance to determine the assignments in order to reduce bias.

**Regulatory Authorities:** Bodies having the power to regulate. In the ICH good clinical practice (GCP) guideline, the expression "Regulatory Authorities" includes the authorities that review submitted clinical data and those that conduct inspections. These bodies are sometimes referred to as competent authorities.

## **S**

### **Serious Adverse Event (SAE) or Serious Adverse Drug**

**Reaction (Serious ADR):** Any untoward medical occurrence that at any dose:

- Results in death,
- Is life-threatening,
- Requires inpatient hospitalization or prolongation of existing hospitalization,
- Results in persistent or significant disability/incapacity, or
- Is a congenital anomaly/birth defect.

**Source Data:** All information in original records and certified copies of original records of clinical findings, observations, or other activities in a clinical trial necessary for the reconstruction and evaluation of the trial. Source data are contained in source documents (original records or certified copies).

**Source Documents:** Original documents, data, and records (e.g., hospital records, clinical and office charts, laboratory notes, memoranda, subjects' diaries or evaluation checklists, pharmacy dispensing records, recorded data from automated instruments, copies or transcriptions certified after verification as being accurate and complete, microfiches, photographic negatives, microfilm or magnetic media, x-rays, subject files, and records kept at the pharmacy, at the laboratories, and at medico-technical departments involved in the clinical trial).

**Sponsor:** An individual, company, institution, or organization that takes responsibility for the initiation, management, and/or financing of a clinical trial.

**Standard Operating Procedures (SOPs):** Detailed, written instructions to achieve uniformity of the performance of a specific function.

**Subject / Trial Subject:** An individual who participates in a clinical trial, either as a recipient of the investigational product(s) or as a control.

**Subject Identification Code:** A unique identifier assigned by the investigator to each trial subject to protect the subject's identity

and used in lieu of the subject's name when the investigator reports adverse events and/or other trial-related data.

## **T**

**Trial Site:** The location(s) where trial-related activities are actually conducted.

## **U**

**Unexpected Adverse Drug Reaction:** An adverse reaction, the nature or severity of which is not consistent with the applicable product information (e.g., Investigator's Brochure for an unapproved investigational product or package insert/summary of product characteristics for an approved product).

## **V**

**Vulnerable Subjects:** Individuals whose willingness to volunteer in a clinical trial may be unduly influenced by the expectation, whether justified or not, of benefits associated with participation, or of a retaliatory response from senior members of a hierarchy in case of refusal to participate. Examples are members of a group with a hierarchical structure, such as medical, pharmacy, dental, and nursing students, subordinate hospital and laboratory personnel, employees of the pharmaceutical industry, members of the armed forces, and persons kept in detention. Other vulnerable subjects include patients with incurable diseases, persons in nursing homes, unemployed or impoverished persons, patients in emergency situations, ethnic minority groups, homeless persons, nomads, refugees, minors, and those incapable of giving consent.

## **W**

**Well-being (of the Trial Subjects):** The physical and mental integrity of the subjects participating in a clinical trial.

*Source: ICH Guidelines (<http://www.ich.org>)  
Glossary dated 20 July 2005*