



Better health through
laboratory medicine.

PEARLS OF LABORATORY MEDICINE

Ethical Issues in Biobanking

Ann M. Gronowski & Gwen Clarke

Washington University, School of Medicine

On behalf of the IFCC Task Force on Ethics

DOI: 10.15428/CCTC.2017.274217



Biobank

Definition

- An entity that receives, stores, processes and/or distributes specimens, as needed. It encompasses the physical location as well as the full range of activities associated with its operation¹

Types

- Medical & academic research
- Clinical studies
- Clinical laboratory collection
- Biotechnology domain
- Judiciary domain
- Commercial

Importance (examples)

- Discovery of heterogeneity of acute leukemias
- Breast cancer genes
- Association of *Helicobacter pylori* infection & gastric carcinoma
- Discovery of genetic basis of human blood group variability

Fundamentals of Biomedical Ethics

Respect for Persons:

Protecting the autonomy of all people & treating them with courtesy & respect & allowing for informed consent. Researchers and clinical laboratory professionals must be truthful and conduct no deception & tolerate no deception.

Beneficence:

Doing good. Maximizing benefits for the research project & minimizing risks to the research subjects and patients.

Non-maleficence = do no harm

Justice:

Ensuring reasonable, non-exploitative, & well-considered procedures are administered fairly — the fair distribution of costs & benefits to *potential* research participants and to patients — & equally.

Why do Biobanks Cause Ethical Challenges?

- Specimens may be stored for long time
- Specimens may be used for multiple studies
- At the time of consent, unclear how many studies a specimen may be used for
- A multitude of private health information may be collected
- Depending on the biobank, specimens may be sold



Outline

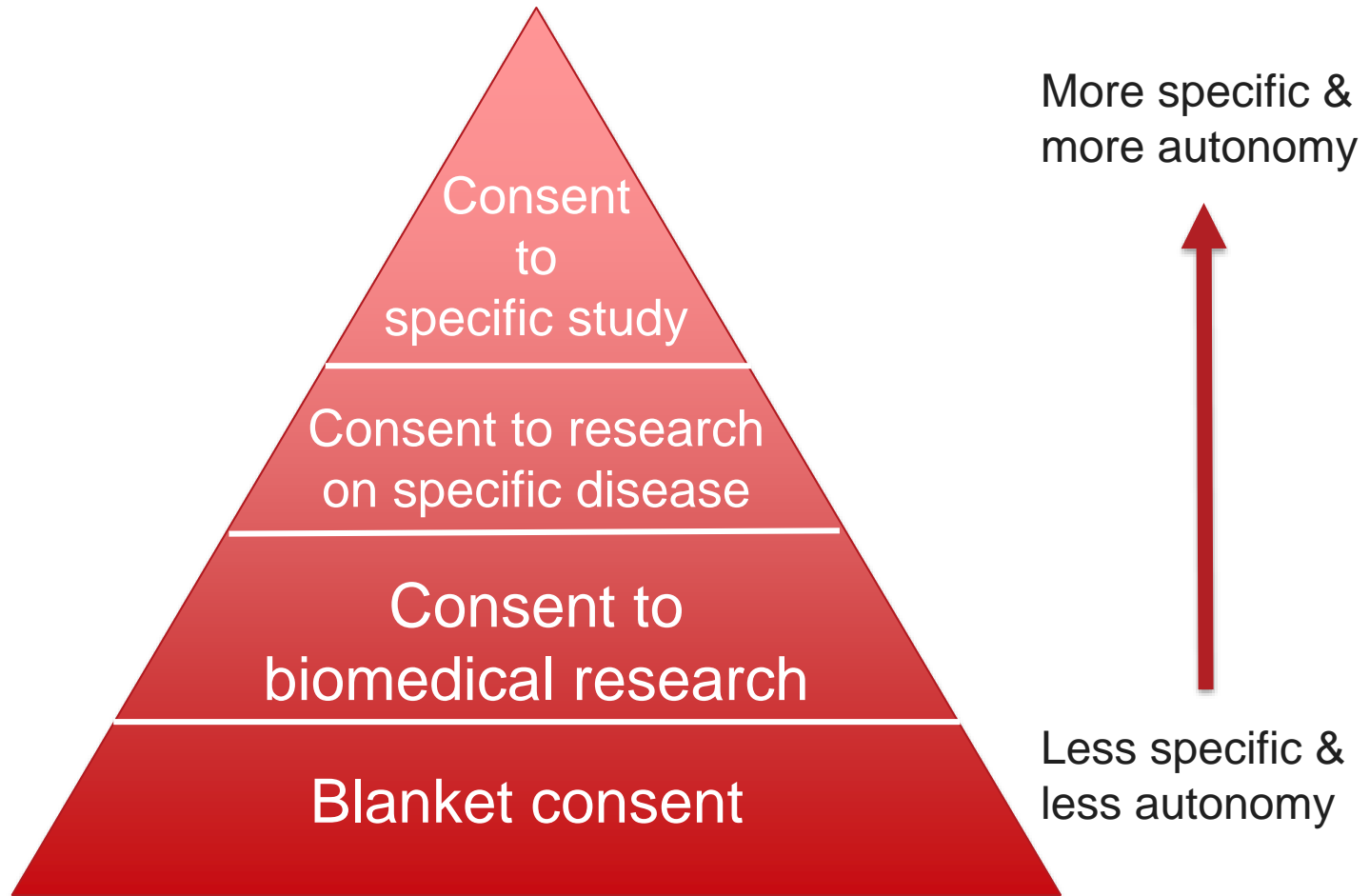
- Consent
- Privacy
- Return of results
- Governance & public trust
- Data sharing & exchange
- Ownership & commercialization

Consent

- According to Belmont Report & Common Rule, Subjects must be informed
- However, Biobanks are unique
- Impossible to fully “inform” subjects
 - Nature of future research unknown
 - Can’t consent for each & every future project
- Subjects have decreased autonomy



Continuum of Consent



Havasupai Tribe v. Arizona State University

The New York Times

U.S.

WORLD | U.S. | N.Y. / REGION | BUSINESS | TECHNOLOGY | SCIENCE | HEALTH | POLITICS | EDUCATION | BAY AREA | CHICAGO

Native American tribe donated samples for diabetes research. Samples were used for studies on schizophrenia, alcoholism & other.

Settled out of court. Arizona regents to pay \$700,000 to tribe, and return blood samples.

Indian Tribe Wins Fight to Limit Research of Its DNA



Jim Wilson/The New York Times

Edmond Tilousi, 56, who can climb the eight miles to the rim of the Grand Canyon in three hours. [More Photos »](#)

By AMY HARMON
Published: April 21, 2010

SUPAI, Ariz. — Seven years ago, the [Havasupai Indians](#), who live amid the turquoise waterfalls and red cliffs miles deep in the Grand Canyon, issued a “banishment order” to ban Arizona State

[f](#) RECOMMEND

[t](#) TWITTER

[in](#) LINKEDIN

Beleno v. Texas Dept of State Health Services

Parents sued state for use of residual samples collected for newborn blood screening & used in research for which parents had not given consent.

Settled out of court. State destroyed ~5 million residual specimens.

★ THE TEXAS TRIBUNE

TribBlog

Lawsuit Alleges DSHS Sold Baby DNA Samples

by [Becca Aaronson](#) | December 8, 2010

[Print](#)
[Republish](#)
[Share](#)
[Comment](#)
[Email](#)
[Tweet](#)
[Recommend](#)



[Enlarge](#)

The baby blood battle continues with a second lawsuit against the Department of State Health Services for not only storing, but allegedly unlawfully distributing, baby blood samples. With the help of the Texas Civil Rights Project, two parents have filed a new class action lawsuit against DSHS and Commissioner David Lakey for allegedly selling, distributing and bartering blood samples collected from their children and others as part of the mandatory newborn screening program.

At a press conference in Austin today, plaintiff John Higgins and his attorney, Jim Harrington, accused DSHS of deception in selling blood samples to commercial pharmaceutical companies and sending blood samples to the Armed Forces DNA Identification laboratory. "My wife and I both were extremely upset when we found out about the data bank and the potential that [my daughter's] DNA was going to be used or stored in some police, or military or Interpol, eventually, data bank," Higgins said.

Carrie Williams, a spokeswoman with DSHS, said the agency has not yet seen the lawsuit. But based on what they're hearing, she said, the lawsuit is nothing new. "The Texas Civil Rights Project sued us before about bloodspot storage and use, and that issue was resolved and settled last year, with the Texas Civil Rights Project receiving funds for legal fees," she said. "...Unfortunately, based on media reports, it appears they have decided they want to double dip back into this issue with baseless assertions, including the false assertion that there is DNA in a federal database."

Consent

- Impossible to fully “inform” subjects
 - Nature of future research unknown
 - Can’t consent for each & every future project
- Subjects in effect loose autonomy
- Right to withdraw-but may not be able to get samples already distributed
- Genetic information affects not only patient but also other people (relatives, spouses, etc)



Privacy

- Terms:
 - **Identified**-samples are linked to subject in a way that is immediately identifiable
 - **Coded** (traceable)-direct link to subject usually through random set of numbers
 - **Double code**-to link sample & data to individual requires 2 codes
 - **Encrypted**-further level of protection, code is transformed & requires a third party to link
 - **Anonymized**-link to subject has been irreversibly cut
 - **Anonymous**-there was never a link between subject and sample/data



Privacy

- Problem with genetic information is that it is always possible to identify donor & relatives
 - In 2008, geneticists showed that they could easily identify individuals within pooled, anonymized data sets if they had a small amount of identified genetic information for reference ([N. Homer et al. PLoS Genet 4, e1000167; 2008](#)).
- Confidentiality cannot be fully guaranteed despite all efforts
- Full confidentiality should never be promised



Return of Results

Incidental findings/individual research result

Has potential health importance & discovered in during research:

- & is in the stated aims of the research- **Individual research result (IRR)**
- But is unrelated to the research- **Incidental finding (IF)**¹

However biobanks complex due to:

- Number of results very large
- Results generated over long period of time
- Actionable genetic results unclear
- Research labs often do not meet standards for clinical lab (e.g. CLIA)
- Genetic results very personal
- Genetic finding may have family implications²

¹Wolf SM et al. Genet Med 2012;14:361-84

²Brothers KB. Personalized Medicine 2011;8:71-9

Governance & Public Trust

Who owns & finances the biobank?

- University
- Government
- Industry
- Hospital

Who has access to the specimens and data?

What legal/ethical rules does biobank have to abide?

- Varies by country
- Varies by type of bank (identified, de-identified, residual etc)



Data Sharing and Exchange

- National laws and regulations
- Anonymization
- Informed consent
- Access to biobank
 - What conditions must be met
 - Fees required
- On line tools



Ownership and Commercialization

- Who can make money off specimens? Who has to pay for specimens?
- Should subjects be paid if researcher makes money
- General principle that subjects have no property in their samples (*res nullis*, 'no one's thing')
- In a few cases this has been challenged

Greenberg v. Miami Children's Hospital Research Institute

TUESDAY, MAR 7, 2000 11:00 AM CST

Who owns your DNA?

Genetic research that can save lives is often stymied by biotech companies' greedy patent claims.

BY ARTHUR ALLEN



TOPICS: HEALTH



For years, the parents of children suffering from an implacable genetic disorder called Canavan disease dutifully packed off their blood and tissue samples to Dr. Reuben Matalon, a researcher at Miami Children's Hospital. These shipments were an altruistic, volunteer effort by a devastated group of people — their own children were dead or dying, but they hoped to prevent the births of more children

Donated samples that led to development of new diagnostic test. Sued after learning University licensed test.

Patients have no property right in tissue voluntarily donated for medical research.

Summary

In order to uphold principles of ethics, biobanks must:

- 1) Abide by all national/local laws & association guidelines & relevant standards
- 2) Obtain informed consent or use de-identified
- 3) Handle personal information safely & confidentially
- 3) Allow subjects to withdraw at any time
- 4) Require recipients of samples/data to undergo review by an ethics or human research protection committee



References

1. International Society for Biological and Environmental Repositories Best Practices for Repositories: Collection, Storage, Retrieval and Distributions of Biological Materials for Research. 3rd edition (2012)
www.isber.org
2. Hansson MG. Ethics and Biobanks. Br J Cancer 2009;100:8012.
3. Hansson MG, Dillner J, Bartram CR, Carlson JA, Helgesson G. Should donors be allowed to give broad consent to future biobank research? Lancet Oncology 2006;7:266-69.
4. Cambon-Thomsen A. The social and ethical issues of post-genomic human biobanks. Nature Rev Genetics 2004;5:866-73.
5. Widdows H and Cordell S. The ethics of biobanking: Key issues and controversies. Health Care Anal 2011;19:207-19.
6. Allen MJ et al Human tissue ownership and use in research: What laboratorians and researchers should know. Clin Chem 2010;56:1675-82.
7. Brothers KB. Bioanking in Pediatrics: The human nonsubjects approach. Personalized Medicine 2011;8:71-9.
8. Wolf SM et al. Managing incidental findings and research results in genomic research involving biobanks & Archived datasets. Genet Med 2012;14:361-84.



Disclosures/Potential Conflicts of Interest

Upon Pearl submission, the presenter completed the Clinical Chemistry disclosure form. Disclosures and/or potential conflicts of interest:

- **Employment or Leadership:** *Clinical Chemistry* Editorial Board
- **Consultant or Advisory Role:**
Church and Dwight Co, Inc., Theranos
- **Stock Ownership:** None
- **Honoraria:** None
- **Research Funding:** Abbott Laboratories, BioRad
- **Expert Testimony:** None
- **Patents:** None

*****This slide will be completed by CCJ Staff based on disclosure form completed electronically in the submission site.*****



Thank you for participating in this
Clinical Chemistry Trainee Council
Pearl of Laboratory Medicine.

Find our upcoming Pearls and other
Trainee Council information at
www.traineecouncil.org

Download the free *Clinical Chemistry* app
on iTunes today for additional content!

Follow us:

