SCTO PLATFORMS

Revision of the HRA ordinances – Impact on projects approved before 01.11.2024

The revised HRA ordinances came into force on 01.11.2024, with the new transparency rules following on 01.03.2025. For projects approved before 01.11.2024, the impact of the revised ordinances is illustrated in Figure 1, which outlines three possible scenarios depending on the project's timeline and whether amendments are required. Projects that continue beyond 31.10.2025 must update their protocols to comply with the revised requirements regarding safety documentation and reporting (Figure 1, Scenario 3). In addition, sponsors of IMP trials may request an optional re-categorization until 31.10.2025. Revised ordinances apply regardless of whether the protocol has been amended in time or not.

Some new provisions have 2-year deadlines to be met. These are:

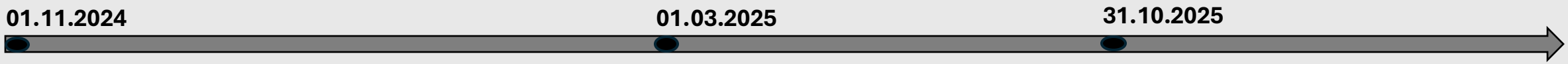
- Submission to the second approving authority
- Inclusion of the first participant
- Maximum permitted interruption of a trial

For projects approved before 01.11.2024, these deadlines do not start with the approval date but only on 01.11.2024 (Figure 2).

The liability, liability coverage and retention duties for research projects under ClinO, ClinO-MD and HRO will continue to be governed by the provisions in force prior to the revisions. Revised provisions in these areas apply only for projects approved after 01.11.2024, and for projects with a time-limited approval that require an extension of the approval.

This overview is provided by the SCTO Regulatory Affairs Platform as a practical aid for sponsors and investigators. For legally binding requirements, always refer to the ordinances and swissethics templates. For project-specific questions, please contact your local CTU, the competent ethics committee, and, where relevant, Swissmedic.

Figure 1: Revision of the HRA ordinances – Impact on projects approved before 01.11.2024



Revised HRA ordinances in force (expect transparency):

- Reporting deadlines for study end (incl. premature and global study end)
- 2-year deadlines: submission to both authorities, FPFV and trial interruption (see Figure 2 for details)

Transparency provisions in force:

- Trial results must be published within 1 year

Deadline for protocol amendments:

- Applies to projects continuing beyond 31.10.2025

Impact on your project? - 3 possible scenarios:

1 **Project approved before 01.11.2024 and completed before 01.03.2025**

No protocol amendment required
For an overview of applicable provisions see → **Table 1**

2 **Project approved before 01.11.2024 and completed between 01.03.2025 and 31.10.2025**

No protocol amendment required
But the obligation to publish trial results (transparency provisions) apply.
See→**Table 1 and Table 2**

3 **Project approved before 01.11.2024 and completed after 31.10.2025**

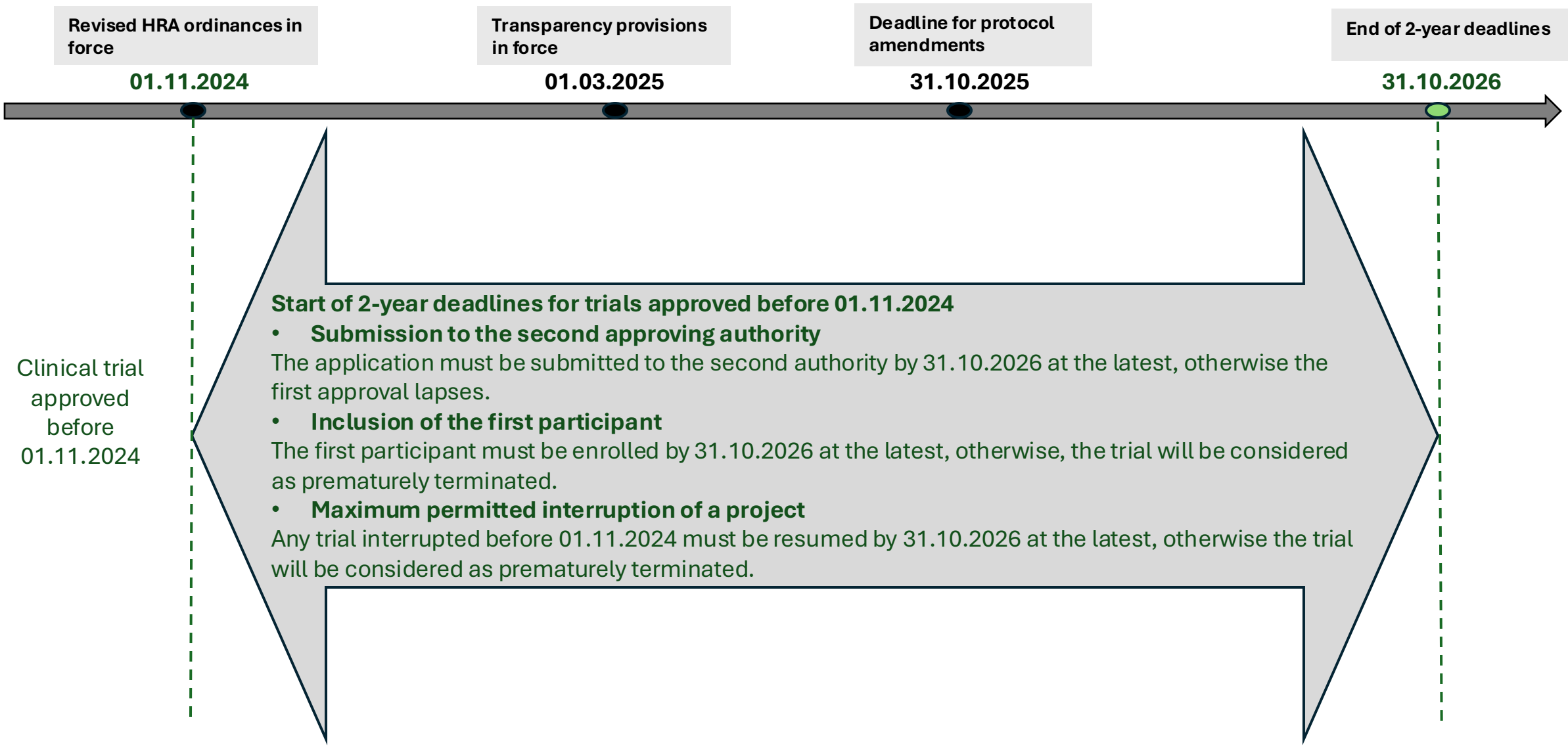
Protocol amendment may be required
Sponsors are responsible for reviewing and amending their protocols in line with the revised ordinances. See→ **Table 3** and →**Table 1 and Table 2** (if applicable)

For projects <u>approved after 01.11.2024,</u> the revised ordinances apply.

Please consult the current swissethics templates and the SCTO Education Platform "HRA Ordinance Revisions 1st Nov 2024: Compa ring old and new requirements" document for a complete list of modifications to the previous ordinances. (Soon to be published)

Figure 2: Application of 2-year deadline for clinical trials (under ClinO) approved before 01.11.2024

For clinical trials approved before 01.11.2024 under the ClinO, the 2-year deadlines for submission to the second authority, inclusion of first participant, and maximum permitted interruption all begin on 01.11.2024 (and not on the date of the approval) and run until 31.10.2026.



SCTO PLATFORMS

Table 1. Regulations that came into force on 01.11.2024

Study Start / End – Reporting	Reference	Chapter according to swissethics protocol templates
Two-year deadline for submitting an application to the second approving authority (see Figure 2) For Category B and C clinical trials, the application must be submitted to the second authority within two years after approval has been granted by the first authority.	*ClinO Art. 23, par. 1bis*	**Clinical trial with Investigational Medicinal Product (IMP)** 2.3 Competent Ethics Committee (CEC) 2.4 Competent Authorities (CA) for Cat. B and C trials
First Participant First Visit The first study participant must be enrolled in the trial within two years following the issuance of the last authorization, either from the Competent Ethics Committee (CEC) or from the Competent Authority (CA). If the first participating person is not included within two years following the issuance of the last authorization, the trial is considered interrupted. The clinical trial may not be commenced until an application for an extension of the time limit has been approved. The application for the extension is regarded as a substantial modification and must be submitted to the CEC, and to CA *(for category B and C trials).*	*ClinO Art. 23a*	**Clinical trial with Investigational Medicinal Product (IMP)** 2.3 Competent Ethics Committee (CEC) 2.4 Competent Authorities (CA) for Cat. B and C trials 7.2 Recruitment and Screening **Other clinical trial** 4.2 Recruitment, screening and informed consent procedure
Reporting of the first participant The first visit of the first participant in the clinical trial in Switzerland must be notified to the CEC within **30 days** and to CA (*for category B and C trials).*	*ClinO Art.38*	**Clinical trial with Investigational Medicinal Product (IMP)** 2.3 Competent Ethics Committee (CEC) 2.4 Competent Authorities (CA) for Cat. B and C trials **Other clinical trial** 6.7 Notification and reporting upon completion, discontinuation or interruption and resumption of the study
Regular Study End The completion of the clinical trial in Switzerland and the global completion of a multinational clinical trial must be notified to the CEC within **30** and **90 days**, respectively. CA must also be notified *(for category B and C trials)*.	*ClinO Art. 38*	**Clinical trial with Investigational Medicinal Product (IMP)** 2.3 Competent Ethics Committee (CEC) 2.4 Competent Authorities (CA) for Cat. B and C trials **Other clinical trial** 6.7 Notification and reporting upon completion, discontinuation or interruption and resumption of the study
Premature termination, interruption or resumption of the study	*ClinO Art. 38*	**Clinical trial with Investigational Medicinal Product (IMP)** 2.9 Premature termination of the study Other clinical trial

Premature termination, interruption or resumption of the clinical trial, including the reasons thereof, must be notified to the CEC within **15 days**. CA must also be notified *(for category B and C trials)*. (An interruption lasting more than two years is considered a premature termination.)		**Other clinical trial** 6.7 Notification and reporting upon completion, discontinuation or interruption and resumption of the study

Annual Safety and General Progress Trial Report	**Reference**	**Swissethics template**
An annual report on the safety of participants and the general progress of the clinical trial must be submitted to the CEC for all categories and to CA (*for category B and C trials*). The reporting period for the first progress report starts with the approval date of the clinical trial and ends after one full year. The last submitted annual report must cover the Last Trial Participant Last Visit (LPLV) in Switzerland. The progress report must be submitted to the CEC, even if no research centres in Switzerland or worldwide have enrolled participants in the trial.	*ClinO, Art. 43*	**Annual Safety and General Progress Trial Report for clinical trials according to ClinO**
	ClinO-MD, Art. 35 and 38	**Annual Safety and General Progress Trial Report for clinical trials according to ClinO-MD**

SCTO PLATFORMS

Table 2. Regulations on transparency that came into force on 01.03.2025

Publication of trial results	Reference	Chapter according to swissethics protocol templates
After completion or premature termination of the clinical trial the sponsor must ensure within one year that: - A summary of the trial results is entered in a primary register or clincaltrials.gov - A lay summary of the trial results is entered via BASEC in HumRes. The entry must be made at least in the national languages of Switzerland in which the trial participants were recruited. (An interruption lasting for more than two years is considered a premature termination.)	*ClinO, Art. 65a*	**Clinical trial with Investigational Medicinal Product** 13 Publication and dissemination policy
		Other clinical trial 10 Funding / Publication / Declaration of interest
	ClinO-MD, Art 42 (as previously)	**Clinical investigation concerning medical devices** 13 Publication and dissemination policy
		In vitro device clinical performance study 14 Publication and Communication policy
	HRO (n.a.)	Not applicable

SCTO PLATFORMS

Table 3. Adaptations required for projects approved before 01.11.2024 and continuing beyond 31.10.2025

Safety – Documentation and Reporting	Reference	Chapter according to swissethics protocol templates
Documentation of adverse events (AE) according to ClinO - In justified exceptional cases, standardized documentation of AEs may now be waived for clinical trials in category C. - Introduction of the terms 'critical/not critical for safety assessment' in clinical trials of categories B and C. - Safety-critical AEs in clinical trials of categories B and C must be documented in a standardized manner in all cases.	*ClinO Art. 39*	**Clinical trial with Investigational Medicinal Product (IMP)** 10.3 Exemption from the documentation requirements of AE
Reporting of SAEs (IMP/TpP) according to ClinO - A serious adverse event with fatal consequences that occurs at a trial site in Switzerland no longer needs to be reported to the CEC, unless it is a SUSAR.	*ClinO Art. 40*	**Clinical trial with Investigational Medicinal Product (IMP)** 10.1.2 Reporting of serious adverse events (SAE) and other safety related events
Reporting of SUSAR (IMP/TpP) according to ClinO - New: not only SUSARs resulting in death, but also life-threatening SUSARs must be reported to the CEC (and to the CA, if applicable) within **7 days**. - All other SUSARS must be reported to the CEC (and to the CA, if applicable) within **15 days**. - The reporting requirements now also apply when a SUSAR occurs in Switzerland after completion of the clinical trial, or when such a suspected case only becomes known after completion of the clinical trial.	*ClinO Art. 41*	**Clinical trial with Investigational Medicinal Product (IMP)** 10.1.2 Reporting of serious adverse events (SAE) and other safety related events
Reporting on the use of irradiation sources according to ClinO The sponsor and also the investigator (previously only the sponsor) can report exceeding the permissible dose guideline value of 5mSv within 7 days of the CEC and to the CA *(for category B and C trials)*.	*ClinO, Art. 36a*	**Clinical trial with Investigational Medicinal Product** 10.2 Assessment, notification and reporting on the use of radiation sources
Documentation and Reporting obligations according to ClinO-MD remain unchanged	*ClinO-MD, Art. 32-36* *ClinO-MD, Art. 66*	**No protocol adaptations required**
Documentation and Reporting obligations according to HRO remain unchanged	HRO, Art.20-23	**No protocol adaptations required**

Optional re-categorisation of trials with IMP	Reference	Chapter according to swissethics protocol templates
If researchers wish to apply for a study recategorization, applications for the reclassification of trials with IMP from category C to category B must be submitted to the CA by 31.10.2025 and, once approved, to the CEC. The full label also needs to be submitted according to Annex VI of the Regulation (EU) No 536/2014 of the European Parliament and of the Council of 16 April 2014 on clinical trials on medicinal products for human use.	*ClinO Art. 19*	**Clinical trial with an Investigational Medicinal Product (IMP)** Title page Study Synopsis 2.2 Categorisation of study 10.3 Exemption from the documentation requirements of AE