Resolution No. 08-2004-176

RESOLUTION OF THE WHITE MOUNTAIN APACHE TRIBE OF THE FORT APACHE INDIAN RESERVATION

WHEREAS, members of the Tribal Council of the White Mountain Apache Tribe are duly elected representatives of the people of their respective districts, and among the many issues of concern to the Council are the health and well-being of its Tribal members ; and

WHEREAS, members of the Tribal Council of the White Mountain Apache Tribe support carefully designed research projects which aim to raise the level of health of all residents of the Reservation; and

WHEREAS, although much has been accomplished to prevent and cure a number of infectious diseases in the Apache population, other diseases continue to affect different segments of the population, especially those at most risk, such are very young infants; and

WHEREAS, Apache infants have high rates of lung infections caused by the respiratory syncytial virus (RSV), and every winter, many infants are hospitalized because of RSV disease, and are often transferred to off-reservation hospitals for specialized care; and

WHEREAS, there is no medicine that cures RSV disease, and treatment is limited to making the baby as comfortable as possible, such as giving medicines to help the baby breathe easier; and further, there is no licensed medicine that prevents RSV infection in healthy babies; and

WHEREAS, during the past 10 years, an immune globulin (Synagis®) has been used effectively to prevent RSV illness in infants at high-risk for lung infections, such as babies born prematurely, those with chronic lung disease, and congenital heart problems; and

WHEREAS, recently, another immune globulin (Numax®) was developed and tested in small-scale projects and was felt to be stronger than Synagis® to prevent RSV infection in very young babies, and Numax®, which is given like a vaccination every 30 days during the winter, also appears to not cause serious adverse effects; and

WHEREAS, this research project proposes to evaluate the effectiveness of Numax® to protect healthy Apache and Navajo infants against RSV infection, and this study will see if Numax® can also protect against wheezing, asthma, ear infections, other upper and lower respiratory illnesses, and additional safety information regarding the immune globulin will be collected; and

WHEREAS, this study will be conducted only during the winter season for four consecutive winters and will enroll, on a voluntary basis, a total of 1500 very young babies, and informed consent will be administered to the parents of each child, informing them all details of the study along with naming persons whom they can contact if they have questions or concerns about the study, and that they are free to withdraw from the study at any time without questions asked; and

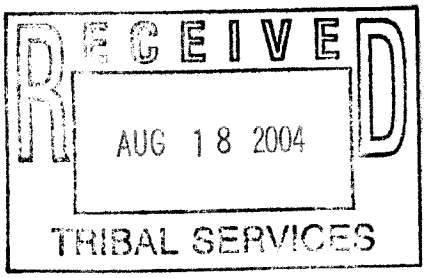
WHEREAS, enrolled infants will be randomized to receive Numax® or placebo in a double-blind manner (no one will know if Numax® or placebo is given any infant), and this same product will be given every 30 days for a maximum total of 5 injections during the RSV season; and

WHEREAS, all enrolled infants will be monitored for 24 months to check if they got sick with RSV disease, had wheezing, asthma, ear infections, upper and lower respiratory infections, and records in hospitals will be checked to see if study infants were seen in clinic or ER or were hospitalized for RSV or diseases previously mentioned, and the monitoring of each study participant will be done by review of infants' medical charts, hospital/clinic RPMS files, and other hospital logs and records; and

WHEREAS, information about participation of infants and their parents in this study will be kept confidential, and all other confidentiality considerations will be adhered to as they relate to the collection, use, and storage of information about each participant.

BE IT RESOLVED by the White Mountain Apache Tribe that approval is hereby given for the proposed research project entitled "Safety and Efficacy Study of an RSV Immune Globulin (Numax®) in Apache Infants to be conducted by the John Hopkins University Center for American Indian Health.

The foregoing resolution was on AUGUST 5, 2004 duly adopted by a vote of SEVEN for and ZERO against by the Tribal Council of the White Mountain Apache Tribe, pursuant to authority vested in it by Article IV, Section 1 (a), (s), (t), and (u) of the Constitution of the Tribe, ratified by the Tribe September 30, 1993, and approved by the Secretary of the Interior on November 12, 1993, pursuant to Section 16 of the Act of June 18, 1934 (48 Stat. 984).



Chairman of the Tribal Council

ACTING Mitchell Antonio
Secretary of the Tribal Council

July 19, 2004

SAFETY AND EFFICACY STUDY OF AN RSV IMMUNE GLOBULIN IN INFANTS

Johns Hopkins Programs Navajo & White Mountain Apache Reservations

INTRODUCTION

Infants on the Navajo and White Mountain Apache reservations have high rates of infections due to the respiratory syncytial virus (RSV). RSV diseases, which occur during the winter months, result in the hospitalization of many infants. The primary purpose of this double-blind placebo-controlled study is to determine how well an immune globulin, called Numax®, given each month during the winter season, can prevent RSV infection in very young infants. Information will also be collected to find out if the immune globulin might also prevent wheezing, asthma, ear infections, and other related diseases in infants.

BACKGROUND INFORMATION

The respiratory syncytial virus causes much illness in very young infants on the Navajo and White Mountain Apache reservations. The rate of RSV disease for Navajo babies less than one year old is 164/1000, and 115/1000 for babies less than 2 years old. Infants at greatest risk for RSV infection are those born prematurely, those with chronic lung disease, and those with congenital heart problems. However, most of those hospitalized are generally healthy babies who become infected with RSV. This disease is quite contagious (spreads quickly from baby to baby); hospital pediatric wards often overfill with RSV patients during the winter months and cannot accept any more patients.

Although hospitalized babies are very sick as they struggle to breathe, deaths due to RSV infection are rare in otherwise healthy infants. There is no medicine that can be given to cure RSV disease. Treatment is limited to making the baby as comfortable as possible, and to giving medicines that open up the airways. With proper care in the hospital, the RSV illness usually goes away in about 4-5 days.

If a baby who was born prematurely, or has chronic lung disease, or has a congenital heart problem gets RSV sickness, a medicine called Synagis® is often given to prevent serious complications, especially death. Recently, another new medicine was developed and has undergone testing to see how well it might protect babies from RSV disease. This medicine, which is an immune globulin called Numax® and is given as a shot (like a vaccination), is believed to have high potential to prevent RSV infection. Thus far, Numax® appears to be without adverse clinical effects. Besides being safe, it is believed to be stronger than Synagis®. Numax® has not yet been evaluated to see how well healthy babies can be protected from RSV infections.

OBJECTIVES OF THIS STUDY

The main objective of this study is to see how well the immune globulin (Numax®) can protect very young healthy infants from RSV infection and, thereby, reduce the severity of the problem of RSV infections and hospitalizations in Navajo and Apache infants. Another objective is to see how well the immune globulin protects against wheezing and asthma in infants. Information will also be collected to see if other related problems such as ear infections can be

reduced in severity. Although Numax® appears to be quite safe, another purpose of this study will be to thoroughly collect information regarding adverse effects.

PROCEDURES/METHODS

This study is a randomized, double-blind, placebo controlled study that will be conducted during the winter months, which is the "RSV season". This study will be conducted over 4 consecutive winters on the Navajo and White Mountain Apache reservations. Participation in this study is totally voluntary. In all, about 1500 healthy infants will be enrolled and randomized 2:1 to receive either Numax® or a placebo. Administration of Numax® or placebo will be determined by service unit of residence and month of enrollment to assure equal allocation of study product. Before the start of the RSV season, infants 3 months of age and younger will be enrolled for randomization. After the RSV season begins, infants 1 week of age or younger will be enrolled.

Each enrollee will receive either Numax® or placebo during two RSV seasons and with follow up for wheezing through 24 months of age. In this double-blind study, no one (parents, study personnel, hospital personnel) will know if any particular infant receives Numax® or placebo. Numax® or placebo will be given by injection every 30 days during the RSV season for a maximum of five injections.

Infants who have medical risk factors for serious RSV disease will be excluded from this study. These risk factors include prematurity, chronic lung disease, and congenital heart disease. Others to be excluded from enrollment are those having previously received Synagis®, being born at less than 35 weeks gestational age, having previously had RSV infection, those with liver and kidney disease, and those having any medical and social condition which, in the opinion of the investigator, would adversely affect monitoring of the infant.

All participants will be carefully monitored for RSV disease, wheezing illness, adverse effects, clinic/hospital visits for acute upper and lower respiratory infections including otitis media, and all hospitalizations. Study participants seen in outpatient clinic for respiratory illness plus those hospitalized for respiratory illness, or who develop a respiratory illness during hospitalization, will have their respiratory secretions assessed for RSV. The monitoring of participants will be done by home visits, review of hospital medical charts, review of logs for admissions and clinic/ER visits, and the review of hospital/clinic RPMS information pertaining to the aforementioned illnesses.

A sample of children will have blood collected immediately prior to the second dose of study product and immediately prior to the 5th dose for pharmacological studies and for testing of antibody levels.

RISKS & BENEFITS

One of the primary purposes of this study is to collect information regarding adverse effects. Preliminary tests have not shown any clinical systemic effects, such as allergic reactions. In prior small scale projects, administration of Numax® to healthy subjects has resulted only in one instance of local injection site reaction following the second dose.

Those who receive Numax® immune globulin may benefit by possibly being protected from RSV infection, or wheezing, or certain upper and lower respiratory infections, including ear infections.

INFORMED CONSENT

Informed consent will be obtained from all study participants prior to their participation in this study. Consent forms will describe in detail the purposes of this study, the methods and procedures to be used in this randomized double-blind placebo-controlled study, persons to contact for questions regarding their participation in the study, and other detailed information. Participation in this study is totally voluntary; participants are free to withdraw at any time without penalty. Prior to beginning the study, all required approvals will be obtained.

CONFIDENTIALITY

All information related to the participation of any individual in this study will be kept confidential to everyone outside the study. Only study personnel will have access to records pertaining to the enrollment of study subjects. Each subject will be assigned a unique coded study number which will be used in place of the study participant's name to identify the subject. Paper records and log books will be kept in locked file cabinets. All information about participants will be entered into computer files using study coded identifiers.

Johns Hopkins employees have all received training related to maintaining confidentiality of study participants. Each employee is required to take and pass an exam related to confidentiality of research subjects.

White Mountain Apache
Division of Health Programs
Donna Vigil, Executive Director

July 26, 2004

Raymond Reid, MD
The Johns Hopkins programs
PO Box 3770
Shiprock, New Mexico 87420

RE: Safety and Efficacy study of an RSV immune globulin (numax) in Apache and Navajo infants.

Dear Dr. Reid:

The health board of the White Mountain Apache Tribe appreciated your speaking with us about the proposed research study referenced above. This proposed study follows the RSV epidemiology study conducted among Apache infants by the Johns Hopkins program several years ago in which it was found that apache infants have higher rates of RSV infection than infants in the general population of the U.S, evaluation of an RSV immune globulin in apache infants in an effort to decrease this high rate and to also determine if the immune globulin can decrease the prevalence of wheezing, asthma, other respiratory illnesses and ear infections.

If the RSV immune globulin (numax) is found to work against all of these disease problem, certainty the health of apache infants will be raised significantly. We support this study, and we wish you well in this work.

Sincerely,

Mariddie J, Craig, Chairperson
Tribal Health Board
White Mountain Apache Tribe

P.O. Box 1210 • Whiteriver, AZ 85941 • Phone (928) 338-4955 or (928) 338-4949
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