Clinical trials in children: many results go unreported

● Many trials are stopped prematurely. For half of those that are completed, the results are neither reported nor published.

In many drug evaluations, clinical trials are discontinued early without appropriate justification or their results are never published. Are these failings also observed in interventional trials in children? A group of US researchers have quantified the scale of the problem (1).

Their study included 13 259 clinical trials, registered in the public US clinical trial registry ClinicalTrials.gov between 2007 and 2020, and in which the participants were younger than 18 years old. Half of the trials had been conducted to evaluate a drug, biological product or dietary supplement (1).

About one-third of these trials had been completed before 2017. Three years after completion, the results of only one-quarter of completed trials had been reported in the registry, and the detailed results of only one-third had been published in a scientific journal. In total, the results of only half of the completed trials had been either published or reported in the registry (1).

One in ten of the trials included in the study had been stopped prematurely; the reason most often given was difficulty recruiting participants. The authors also point out that tougher ethical requirements are applied to children (for obtaining consent, for example) and that parents can be very reluctant (1).

The organisations that funded the trials (governments, universities, pharmaceutical companies and others) gave a number of other reasons for failing to complete a trial. Universities, for example, blamed lack of staff or funds, or the investigator's departure from the institution for one in five premature discontinuations. Pharmaceutical companies were more likely than other funding sources to cite a decision on their part to stop a study, without further justification. One plausible explanation is that the results did not align with the company's commercial interests (1).

A modest improvement was observed between 2007-2012 and 2012-2017, with fewer trials discontinued prematurely and an increase in the proportion of trials whose results were reported and published (1).

The incentives in place in the United States appear insufficiently effective at encouraging pharmaceutical companies to invest in clinical trials in children, and to make the detailed data from these trials available so that better healthcare decisions can be made (1). The situation is similar in the European Union (2). There will be an opportunity to improve it with the revision of Europe's pharmaceutical legislation, launched by the European Commission in late April 2023.

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References **1-** Brewster R et al. "Early discontinuation, results reporting, and publication of pediatric clinical trials" *Pediatrics* 2022; 149 (4): 11 pages + supplemental information: 10 pages. **2-** "European legislation on orphan drugs and paediatric drugs" *Prescrire Int* 2022; 31 (239): 193.