

Dear Reader

Welcome to our first newsletter for 2023!



Considering the Human Biomedical Research Act (HBRA)

All research that uses human subjects must be approved by an Institutional Review Board (IRB) before the research can be conducted. The human subjects’ rules vary depending on the type of research you are conducting. Here we describe the considerations needed for primary care research under the scope of the Human Biomedical Research Act (HBRA). This Act was developed in 2015 to “provide clarity regarding the roles and responsibilities of individuals and body corporates involved in human biomedical research and the handling of human tissue for use in research.” <https://www.moh.gov.sg/policies-and-legislation/human-biomedical-research-act>

HBRA provisions apply to research that has certain characteristics in **both the intent AND methodology** (see diagram). In terms of **intention**, HBRA research is that which studies human diseases and their treatment, the aesthetic appearance of humans, or human performance. **Methodologies** which come under HBRA include those which use biological samples, undertake a physical or psychological intervention, or use personally identifiable health information. Clinical trials of medical devices and treatments and any research involving human embryos, stem cells or derivatives are examples of research subject to HBRA regulations.

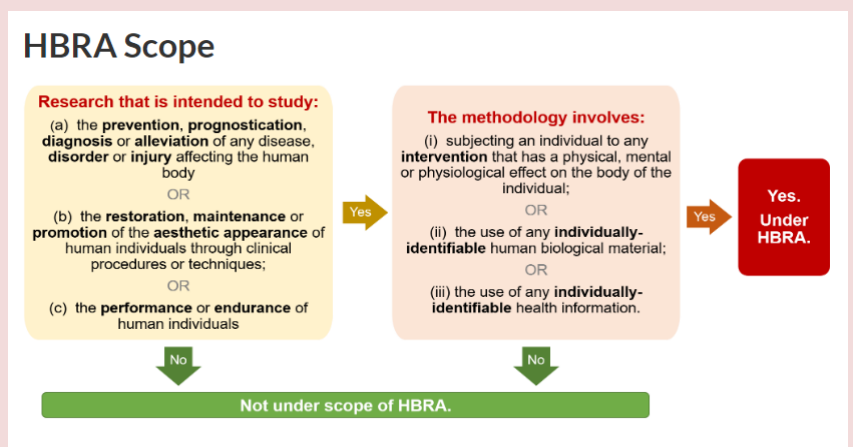


Diagram from <https://www.ntu.edu.sg/research/research-integrity-office/institutional-review-board/guidelines/hbra-scope>

Research which is not under the scope of HBRA includes the study of normal physiological responses and behaviours involving no more than minimal risk to research subjects. HBRA also does not regulate outbreak investigation, disease surveillance, and clinical audits and service evaluations not intended for publication.

Researchers who feel that their studies may come under HBRA need to take some additional steps in study planning, design and in monitoring during the study. First, HBRA is considered during the ethical approval process by the IRB of the institution under which the project is being performed. The Ministry of Health (MOH) must be informed of the study taking place. Particular care must be taken for how informed consent is taken, the participation of vulnerable populations, and the storage and anonymity of patient data and results. Researchers must immediately report any serious adverse events to the IRB and MOH. They may also be asked to have a data and safety monitoring board and to report on the study to the IRB and/or MOH more frequently than once a year.

Want to learn more about researcher responsibilities under HBRA? See these helpful web resources:

MOH material on HBRA: <https://www.moh.gov.sg/policies-and-legislation/human-biomedical-research-act>

NTU guidance on HBRA: <https://www.ntu.edu.sg/research/research-integrity-office/institutional-review-board/guidelines/hbra-scope>

Presentation from NHG Office of Human Research Protection Programme with details about the HBRA obligations for informed consent, reporting, etc.: <https://tinyurl.com/5n862sa5>

pcRn Research Skill Workshop

Improving quality of your research by Patient and Public Involvement by Professor Helen Smith, Visiting Professor

25 Feb 2023 Saturday, 2pm – 4pm, Physical @ LKCmedicine Novena

Patient and Public Involvement in research, fondly referred to as PPI, is still in its infancy in Singapore. In this workshop, we will discuss the evolution of PPI, the experiences of implementation from other countries, the changes for primary care research in Asia, and some practical ideas that are culturally sensitive. The session will be discussive, allowing us to share our experiences and develop collaborations. [Register Here](#)



Upcoming Conference



Dr Laurie Goldsmith & Asst Prof Lee Eng Sing will be presenting a Mini-Lab titled **“Fostering Collaborative Efforts for Innovative Research and Evaluation.”** They will highlight collaborative research from LKCMedicine’s Primary Care & Family Medicine Research Programme and the Centre for Primary Health Care Research & Innovation (CPHCRI), a joint initiative between LKCMedicine and National Healthcare Group.

Although this conference is usually open to SingHealth staff only, we have received permission for pcRn members to **register free of charge**. Use the following [link](#) and for the Institution question choose “Others” and in the Other Institution box write “pcRn + [name of your institution]”. Ex., if you are from NHGP write “pcRn + NHGP” and if you are from Lee Clinic write “pcRn + Lee Clinic”.

Invitation to Participate in Research

Healthy Living with Online suPport and Education (HOPE) Project

Are you a practicing GP who sees patients at risk of cardiovascular disease (CVD)?

We would like to invite you to join our study to investigate the effects of various interventions. Help us recruit patients at risk of CVD, observe their initial risk scores, administer an intervention, and monitor their outcomes for 6 months. Participating GPs will receive a token of appreciation and patients will also be reimbursed separately.

If you would like to find out more, click [HERE](#) or scan the QR code to leave your contact details.

For more details, contact **Aloysius Chow** at alloysius.chow@ntu.edu.sg



Management of Urinary Tract Infections in Primary Care in Singapore

If you are a general practitioner and treat patients with Urinary Tract Infection (UTI), you are invited to join our study describing the use of antibiotics in the treatment of UTI.

Participating GPs would be asked to complete a short questionnaire after each UTI consult, detailing the characteristics of the presentation and management (no patient identifiers). Participants will receive a S\$5 token of appreciation for each completed unique response.

If you are interested in taking part, or if you are interested in taking a larger role within the research team, please contact Dr Tim Hart tim.hart@ntu.edu.sg

or scan the QR code to participate.



Understanding Singapore’s Primary Healthcare Ecosystem, Past, Present and Future

Are you keen on sharing your experiences and perspectives on the primary healthcare landscape as it evolves over the decades?

We would like to invite you to be a part of our study to uncover what worked and what is going to work through a short interview session with us. We are looking for clinicians, policymakers, administrators, and researchers who wish to participate in this ongoing work. Please help us complete a 2-minute survey to see your eligibility through the **QR code** or click [link](#).

We would appreciate your help in sharing this with your colleagues who you think are eligible as well. For more details, contact Foo Chuan De, a pcRn member at ephfchu@nus.edu.sg.



“Understanding factors influencing vaccination decision-making among late adopters of COVID-19 vaccines in Singapore”

Every year we host 4th-year LKCMedicine students to do 6-week research projects. This “scholarly project” programme exposes medical students to research. Being associated with pcRn and the Primary Care & Family Medicine Research Programme also show students the breadth of Family Medicine. This year we hosted seven students for their scholarly projects. **Jeremy Teo**, one of these seven students, describes his project and what he learned from the experience:

My project focusing on mRNA COVID-19 vaccine hesitancy provided interesting perspectives on the technological advancements made in the vaccine field over the past few years during the COVID-19 pandemic.

The project aimed at understanding the perspectives of patients who received at least one dose of mRNA vaccines before deciding to switch to non-mRNA vaccines. The main factors that we identified can be classified into three themes:

1. Information from internet media (subthemes: good promotion by family, friends and acquaintances and negative publicity of mRNA vaccines)
2. Safety concerns (subthemes: doubting the efficacy of mRNA technology, the uncertainty of long-term safety and experiencing severe medical side effects)
3. Personal benefits (subtheme: free antibody blood test offered during a research study)

We found that most patients decided to switch from mRNA to non-mRNA vaccines due to a combination of the abovementioned factors and that no single factor can be attributed to the decision to switch vaccines. Additionally, deciding on the type of COVID-19 vaccine to take is a complex risk-benefit analysis that each individual performs and is significantly impacted by the risk-tolerance of the individual as well as their perceived susceptibility to COVID-19 and its complications. Future expansion of this study could consider developing strategies to effectively disseminate reliable information to the general population and address misconceptions identified from this study. This is of incredible importance due to the expected increase in the prevalence of mRNA vaccines in the near future.

In this study, I have learned that in medicine, apart from treating patients, we must try to take as much time as feasible to educate our patients and empower them to make well-informed decisions and be in greater charge of their own health and well-being.



pcRn Membership is free and open to doctors, nurses, allied health professionals and medical students who are interested in primary care. Please click [here](#) for the membership form. For medical students, click [here](#)