

Speaker Abstracts

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Attitudes towards payment and payment practices in controlled human infection model (CHIM) research

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Background: The payment of CHIM participants is a controversial issue involving stakeholders across ethics, medicine, and policy-making, with allegations circulating suggesting exploitation, coercion and other violations of ethical principles. To date, little is known of what investigators pay participants or what principles are used to determine payment. Likewise, there have been no empirical studies to assess the public's attitudes on this matter. Here, we survey both the general public and CHIM investigators on their attitudes towards the ethics of payments in CHIM.

Methods: A representative sample of the UK public was surveyed online to assess public attitudes towards payment in CHIM. This will be complemented by a survey of CHIM investigators, which also explores payment practices. The survey presents respondents with CHIM scenarios in which type of risk (severe side effects; death as result of a severe side effect) and magnitude of risk (1 in 1,000,000 to 1 in 1,000) are varied systematically. For each scenario, the respondents indicate required payment for participation and the willingness to allow participation in the given study.

Results: We surveyed 264 members of the public, who required higher payments for CHIM participants exposed to more severe types of risk as well as greater risk magnitude. Furthermore, 86.7% of respondents ranked risk as the most important factor to consider in determining payment for CHIM. Respondents' ratings of willingness to allow participation in CHIM similarly followed the nature and level of risk. These results on public attitudes towards CHIM payment should be complemented by CHIM investigators' attitudes and practices by the time we present at IABS.

Conclusions: A representative sample of the UK general public requires CHIM payments to compensate for risk type and level of risk involved in such studies. Although many research guidelines do not condone paying for risk, our findings provide empirical support to the growing number of ethical arguments challenging this status quo. We suggest that a Wage and Risk Payment Model, which considers a number of different payment factors such as time requirements, study location, pain experienced and risk, would be the best model to deliver just and ethical payment to CHIM participants.

