REPUBLIC OF CAMEROON

PEACE – WORK – FATHERLAND

LAW No. 2022/008 OF 27 AVR 2022

RELATING TO MEDICAL RESEARCH INVOLVING HUMAN SUBJECTS IN CAMEROON

PRESIDENCE DE LA REPUBLIQUE
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SERVICE DU FICHIER LEGISLATIF ET REGLEMENTAIRE
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The Parliament deliberated and adopted, the President of the Republic hereby enacts the law set out below:

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CHAPTER I
GENERAL PROVISIONS

I-PURPOSE AND SCOPE

SECTION 1: This law relates to medical research involving human subjects in Cameroon.

SECTION 2: (1) It lays down the principles and rules applicable to health research, in particular clinical trials and intervention studies.

(2) It aims to protect the persons involved in health research.

SECTION 3: (1) This law shall apply to research on human diseases and the structure and function of the human body, involving living persons, deceased persons, embryos and foetuses, biological material, as well as health-related personal data.

(2) It shall also apply to human disease studies in the field of human and social sciences.

(3) Research pertaining to traditional or alternative medicine shall be subject to the provisions of this law.

II - DEFINITIONS

SECTION 4: For the purposes of this law and its implementing instruments the following definitions shall apply:

Administrative research authorization: prior agreement issued by the competent administrative authority to allow a researcher to effectively begin his/her research in the field after obtaining ethical clearance from the relevant ethical body;

Good clinical practices: set of precise ethical and scientific quality requirements for the design, conduct, performance, monitoring, auditing, registration, analysis, and reporting of clinical trials that ensure the protection of the rights, safety and well-being of participants, as well as the reliability and accuracy of data obtained during the clinical trial;

Investigator's brochure: document made available to the investigator by the sponsor containing all the information on the product to be tested in the clinical trial, as well as guidelines on how to ensure the clinical management of trial subjects;

Ethical clearance: opinion issued by the Body in charge of Ethics, after approving the scientific merit and ethical compliance of the research protocol submitted by the sponsor or investigator;

Human cloning: method consisting in reproducing a human person from the entire genetic material of a previously conceived human;

Human clone: embryo resulting from the manipulation of human reproductive material with an identical genetic heritage;

Health-related personal data: information about a specific or identifiable individual that relates to his/her health or disease, including genetic data;

Serious side effect: adverse reaction that is fatal or life-threatening, or causes significant or prolonged disability or incapacity, or that results inor prolongs hospitalisation, or that manifests itself as a congenital anomaly or malformation; or adverse reaction considered serious by a health professional;

Chimeric embryo: embryo obtained from a mixture of human and animal cells;

Supernumerary embryo: embryo conceived during medically assisted reproduction but not transferred to the woman's uterus;

Transgenic embryo: embryo whose genome has been modified by inserting or replacing one or more genes;

Clinical trial: any systematic intervention study on a healthy or sick volunteer including, among other things, drugs and other biological products, surgical procedures, radiological techniques, devices, behavioural therapies, changes in care protocols, preventive care, to assess their effects on health;

Investigator: any person responsible for the conduct of a human health research project;

Principal investigator: investigator responsible for a team of investigators conducting a medical research project on a specific site or sites;

Biological material: body substances from living or deceased persons, foetuses or embryos;

Experimental drug: drug that is being tested or used as a reference, including as a placebo, during a clinical trial;

Research participant: person whose data or responses to a researcher's interventions, stimuli, or questions have a bearing on the research question;

Preclinical phase: all experimental studies of a product, conducted on an animal or plant cells prior to any experimentation on humans, making it possible to assess the toxicity and tolerance of the said product;

Placebo: inactive substance administered to some study participants in order to compare their effects with those of participants who have received the product studied;

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Sponsor: natural or legal person responsible for the initiation, management and financing of a research project;

Research protocol: dated document, approved by the sponsor and the investigator, which incorporates, inter alia, successive amendments and describes the rationale, objectives, design, methodology, statistical aspects, organisation of the research, as well as ethical issues, funding and institutional affiliations;

Research: methodical study aimed at generating or enriching generalizable knowledge.

CHAPTER II
GUIDING PRINCIPLES

SECTION 5: The principles governing medical research shall be the following:

- research participant's free and informed consent, given in writing on a dedicated form;
- respect for human dignity and human rights;
- indispensable primacy of the beneficial effects of a product over its risks, prior to launching the research project;
- guarantee of individual responsibility;
- respect for human vulnerability and personal integrity;
- respect for the research participant's privacy and confidentiality;
- respect for equality, justice and fairness;
- non-discrimination and non-stigmatisation of the research participant;
- respect for cultural diversity and pluralism;
- respect for the principle of secularism;
- sharing of the benefits resulting from research with society;
- protection of future generations, the environment, the biosphere and biodiversity;
- handover of findings to the persons concerned and to the competent authorities.

SECTION 6: The human body and the parts thereof may not be transferred or acquired as such for research purposes as against a consideration or other material benefits.

SECTION 7: All research projects must be designed, developed and implemented by research teams in a spirit of partnership and collaboration, in order to minimise the risk of exploitation by any of the parties involved.

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SECTION 8: Sponsors and investigators shall have an ethical obligation in the context of collaborative research conducted by foreign sponsors to:

- ensure that the research projects they are responsible for conducting effectively contribute towards upskilling national or local researchers in the design and conduct of research;
- conduct the scientific and ethical evaluation and control of such research.

SECTION 9: The design and implementation of any medical research project in Cameroon must adhere to ethical standards that promote and ensure respect for all humans and protect their health and rights.

SECTION 10: Groups invited to participate in research should be selected such that the constraints and benefits of the research are distributed equitably. Justification should be provided for the exclusion of groups or communities that could benefit from participation in research.

I - RIGHT OF PARTICIPANTS TO INFORMATION AND CONSENT IN MEDICAL RESEARCH

SECTION 11: (1) Any prospective participant in a medical research project must be informed, in a language he/she understands, about the purpose, benefits, advantages of, and procedures for carrying out the research project, the duration of the research, expected constraints and risks, possible medical alternatives, as well as his/her right to refuse or withdraw from the research project, without any disadvantage.

(2) Only someone who has been informed, has understood the information, and has freely, without pressure, coercion, or inducement, consented in writing to participate in a research project may be enrolled.

SECTION 12: (1) A participant in a research project must withdraw his/her consent in writing. Such withdrawal shall mark the end of the process.

(2) However, the said withdrawal shall have no effect on the activities conducted or use of data obtained based on the informed consent given prior to withdrawal.

II -PRIMACY OF THE BENEFITS OF A MEDICAL RESEARCH PROJECT OVER ITS RISKS

SECTION 13: (1) When designing and conducting a medical research project, the sponsor and investigator shall take the necessary precautions and measures to maximize the benefits and minimize the risks to participants.

(2) Risks must be constantly monitored, assessed and documented.

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SECTION 14: Persons at a high risk of developing serious complications as a result of the research must be withdrawn from the project.

CHAPTER III
SPECIAL CASES OF MEDICAL RESEARCH PROJECTS

I - MEDICAL RESEARCH PROJECTS CONDUCTED ON VULNERABLE PERSONS

i. MEDICAL RESEARCH PROJECTS CONDUCTED ON MINORS

SECTION 15: A research project involving minors must relate directly to a clinical condition that the minor is suffering from or must be designed such that it can be conducted only on minors.

SECTION 16: (1) The consent of a minor shall be given by his/her legal representative. Such consent shall be valid only if the said minor, based on his/her understanding capacity, has given his/her consent after receiving the requisite information from a pedagogically competent staff member.

(2) The investigator shall thus consider and respect the express wish of the minor, in so far as the latter is capable of forming an opinion and assessing information regarding his/her participation or refusal to participate in a medical research project, or even withdrawal therefrom.

ii. MEDICAL RESEARCH PROJECTS INVOLVING INCAPACITATED ADULTS

SECTION 17: A research project may involve an incapacitated adult only where:

- It is consented to by the person concerned, while in a state of capacity and such consent being attested by a document;
- informed consent has been given in writing by the legal representative, where no documented consent is available;
- the person concerned does not in an identifiable manner, express opposition to the research intervention either verbally or by his/her behaviour.

SECTION 18: Notwithstanding the conditions listed in Section 17 above, the research project should:

- entail minimal risks and constraints;
- be expected to yield key findings that could, in the long run, benefit people with the same disease or disorder or in a similar situation.

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iii. MEDICAL RESEARCH PROJECTS INVOLVING PREGNANT WOMEN AND *IN VIVO* EMBRYOS AND FOETUSES

SECTION 19: A research project involving a pregnant woman, *in vivo* embryo or foetus may be conducted only where:

- the proportion of foreseeable risks to constraints for a pregnant woman, *in vivo* embryo or foetus, on the one hand, and the expected benefit, on the other, is not deemed disproportionate by the Body in charge of ethics;
- the project entails minimal risks and constraints for an *in vivo* embryo or foetus;
- the project is expected to yield important findings that could, in the long run, benefit other pregnant women or other *in vivo* embryos or foetuses.

SECTION 20: Only research projects aimed at modifying the characteristics of the embryo or foetus in relation to a disease shall be permitted.

II- MEDICAL RESEARCH ON *IN VITRO* EMBRYOS

SECTION 21: Research may be conducted only on embryos conceived *in vitro* as part of medically assisted reproduction and no longer the subject of a parental project.

SECTION 22: (1) Medical research on embryos may be conducted only with the prior consent of the couple from whom the embryos are derived or the surviving member of such couple. Furthermore, the latter must be informed of the possibility of another couple receiving the embryos or of discontinuing their preservation.

(2) Where the couple or the surviving member of the couple agrees that their supernumerary embryos should be the subject of a research project, he or she must be informed of the nature of the planned research to enable them to give free and informed consent.

(3) The consent of both members of the couple or the surviving member of the couple may be revoked without cause provided the research has not begun.

III - MEDICAL RESEARCH ON EMBRYOS AND FOETUSES RESULTING FROM THERAPEUTIC OR SPONTANEOUS ABORTION AS WELL AS STILLBIRTHS

SECTION 23: (1) A pregnant woman may be asked if she wants to donate her embryo or foetus for research only after a joint decision to terminate her pregnancy has been reached.

(2) The time and method of termination of pregnancy must not be determined by a research project.

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(3) An embryo or foetus from a pregnancy termination may be used in a research project only if the death has been certified by an authorized health care professional.

(4) Any person conducting a research project in accordance with Subsection 3 above may not participate in a pregnancy termination or give instructions to those involved in the procedure.

SECTION 24: (1) Embryos and foetuses from spontaneous abortions, including stillbirths, may be used for research only with the consent of the couple or person involved.

(2) Embryos and foetuses from spontaneous abortions may be used in research projects only where the death has been determined by an authorized health care professional.

IV - MEDICAL RESEARCH PROJECTS CARRIED OUT IN EMERGENCY SITUATIONS

SECTION 25: A research project may be conducted in an emergency situation only where:

- the necessary steps have been taken to ascertain the wishes of the person concerned as soon as possible;
- the person concerned does not in an identifiable manner express opposition to the research project, either verbally or by his/her behaviour;
- a physician not participating in the research project is consulted to safeguard the interests of the person concerned before he/she is involved in the project;
- the risks and constraints inherent in the project are minimal;
- the project is expected to yield important findings that could benefit people with the same or similar disease or disorder in the long run.

SECTION 26: (1) Once it has become possible for the research subject to express his/her wishes, he/she must be adequately informed about the research project. He/she may then refuse consent or give it a posteriori.

(2) If the person concerned refuses to give post hoc consent, the biological material and data may no longer be used for the research project.

V - MEDICAL RESEARCH INVOLVING DECEASED PERSONS

SECTION 27: (1) Research may be conducted on the body of a deceased person where the person consented to the use of his/her body for research purposes prior to his/her death.

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(2) Where there is no documented consent or refusal of the deceased person, the body or parts thereof may be used for research purposes if consent is given by the deceased's next of kin or a trusted person designated by the deceased when he/she was alive.

SECTION 28: Where biological material is removed during an autopsy or preparation for organ transplantation, a small amount may be anonymized for research purposes without consent, subject to approval by the body in charge of ethics, provided there is no documented refusal by the deceased person.

CHAPTER IV
REUSE, EXPORT AND STORAGE OF BIOLOGICAL MATERIALS, GENETIC DATA AND NON-GENETIC HEALTH-RELATED PERSONAL DATA

SECTION 29: (1) Biological materials, genetic data, and non-genetic health-related personal data, in coded or uncoded form, may be reused in a research project if the person concerned or, where applicable, his/her legal representative has given free, informed and written consent.

(2) Biological materials, genetic data, and non-genetic health-related personal data may be anonymized for research purposes if the person concerned or, where applicable, his/her legal representative, has given free, informed and written consent.

SECTION 30: (1) Biological materials and genetic data may be exported only for research purposes and under the following conditions:

- the data subject has given his/her free, informed and written consent;
- the body in charge of ethics establishes that the research cannot be conducted on the national territory;
- a national investigator is involved in the research project in question.

(2) Non-genetic health-related personal data may be disclosed abroad for research purposes only if:

- the data subject has given his/her free, informed and written consent;
- there is a written data-sharing agreement and a written biological material-sharing agreement;
- a national investigator is involved in the research project in question.

SECTION 31: Any person who keeps biological materials or health-related personal data for research purposes shall be required to take appropriate technical and organizational measures to protect them from unauthorized use and to meet the technical requirements relating to the conditions of use.

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CHAPTER V
MEDICAL RESEARCH PROJECT INVESTIGATOR AND SPONSOR

I - QUALIFICATION

SECTION 32: (1) Medical research involving humans shall be conducted only by persons who have received appropriate education, training and qualifications in ethics and science, including physicians of various specialties, pharmacists, and oral health physicians.

(2) Medical research involving patients or healthy volunteers shall be overseen by a physician or other qualified and competent healthcare professional.

SECTION 33: Besides the qualifications listed in Section 32 above, the principal investigator must have demonstrated and recognized expertise in the field under study.

II - OBLIGATIONS OF THE INVESTIGATOR

SECTION 34: The investigator shall be required to:

- obtain ethical clearance and administrative research authorization in accordance with the procedures laid down by law;
- provide adequate information;
- obtain the consent of research participants or their legal representatives;
- ensure the confidentiality of research data in keeping with standards of good clinical practice;
- store the data collected for at least 10 (ten)years after the end of the research;
- prepare an anonymized annual report for the competent authority;
- ensure that the population segments for which the research findings would be useful are eligible;
- ensure that the study sites meet the standards of good clinical practice.
- register the clinical trial in accordance with the conditions laid down by law.

SECTION 35: Aside from the obligations listed in Section 34 above, the investigator must:

- disclose to the participant information about his/her health during and after the research;
- publish the research findings;
- report any incident observed in the field to the sponsor, the body in charge of ethics, and the service that issued the administrative research authorization.

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III - OBLIGATIONS OF THE SPONSOR

SECTION 36: (1) The sponsor of medical research must ensure that the investigator obtains ethical clearance and administrative research authorization in accordance with legal requirements.

(2) Besides the national ethical clearance, a foreign sponsor must obtain ethical clearance from the competent body in charge of ethics of the country initiating the research project.

SECTION 37: The sponsor of medical research shall ensure that:

- research findings are presented and published;
- data collected are kept for at least 10 (ten)years after the end of the research;
- the investigator prepares and submits an anonymized annual report to the competent authority.

SECTION 38: Any foreign sponsor shall designate a local representative on the national territory to assume the appropriate local responsibilities provided for by law.

SECTION 39: Where the sponsor terminates the research project prematurely, he /she must give the reasons to the investigator, the body in charge of ethics and the ministry that issued the administrative research authorization.

CHAPTER VI
SPECIAL PROVISIONS APPLICABLE TO CLINICAL TRIALS

SECTION 40: A clinical trial may be conducted only if its goal is to generate new knowledge or to produce reliable and robust data in order to contribute to medical advances.

SECTION 41: A clinical trial may be conducted only after a preclinical phase has been successfully completed, in accordance with recognized scientific standards.

SECTION 42: (1) Several clinical trials may not be conducted simultaneously on the same human subject.

(2) The research protocol for each clinical trial shall specify an exclusion period during which the person participating in the research may not be involved in another clinical trial. Such period shall vary according to the nature of the research and may not be less than the minimum duration provided for in the research protocol.

SECTION 43: (1) Any clinical trial project must involve the group for which the outcome is expected.

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(2) The investigator and sponsor must consult with the group within the framework of a participatory, transparent and meaningful process that involves them from the start and throughout the design, preparation, conduct, monitoring and dissemination of the clinical trial results.

(3) The conditions for disseminating the findings shall be laid down by law.

I - OBLIGATIONS OF THE INVESTIGATOR IN CLINICAL TRIALS

SECTION 44: The investigator shall provide the participant with information through any means leaving a paper trail:

- insurance and any other compensation and treatment procedure in the event of accidents or incidents during the clinical trial;
- his/her health during and after the research.

SECTION 45: The investigator shall be required to:

- obtain the written authorization of administrative and traditional authorities as well as heads of household for community-based studies, before seeking the participation of people under their authority;
- report any adverse events observed on the ground to the sponsor, the body in charge of ethics and the Ministry that issued the administrative research authorization;
- ensure that any participant in a clinical trial who sustains an injury as a result of his/her participation receives free medical treatment, as well as financial or other assistance that fairly compensates him/her for any disability, incapacity, or handicap caused by his/her participation.

SECTION 46: The investigator shall discontinue the medical research project if:

- follow-up data show that there are more risks than benefits in continuing the process and that the lives of participants are at risk;
- the proven effectiveness of the research project is established before the end of the study, in accordance with the laws in force.

II - OBLIGATIONS OF THE SPONSOR IN CLINICAL TRIALS

SECTION 47: The sponsor shall be bound to provide an investigator's brochure. Such brochure must be updated when new relevant safety information becomes available and revised by the sponsor once a year.

SECTION 48: (1) Prior to the clinical trial, the sponsor must obtain liability insurance for himself/herself, as well as any person involved in the trial, regardless of the nature of the relationship between the person, the sponsor and the participant.

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(2) The insurance policy shall cover:

- accidents, incidents and death that may occur during a clinical trial or after its discontinuance or completion;
- errors in the implementation of the research protocol.

SECTION 49: The sponsor shall provide, free of charge, and ensure the storage and safety of medicinal and non-medicinal products, including experimental vaccines, and where applicable, medical devices for administering them, in accordance with accepted scientific standards.

SECTION 50: (1) The sponsor shall ensure that all important information regarding suspected unexpected serious adverse reactions that may result in death is recorded and immediately reported to the competent administrative authorities and the national body in charge of ethics.

(2) The sponsor must investigate, as soon as possible and in conjunction with the investigator and the administrative authority, all serious adverse events, take appropriate measures to ensure the safety of trial participants, and report the events to the competent authorities.

(3)The sponsor shall be bound to set up a Data Safety and Monitoring Board prior to the conduct of the clinical trial, in accordance with the conditions laid down by law.

SECTION 51: The sponsor shall have the ethical obligation to ensure the following:

- provision of health services necessary for the safe conduct of the clinical trial;
- treatment of subjects adversely affected by trial procedures;
- provision of services forming an integral part of the sponsor's undertaking to make the beneficial trial procedures or products reasonably available to the population or community concerned.

SECTION 52: Where it is proven at the end of a clinical trial that the experimental medicinal product or medical device that is the subject of the trial provides a significant benefit and that there are no equivalent alternatives for the treatment of the patients who participated in the trial, the sponsor must facilitate access to such product once it is put on the market to enable the latter to continue to receive care with the same product.

III - MONITORING OF CLINICAL TRIALS, CHOICE OF CONTROL GROUP AND USE OF PLACEBO

SECTION 53: A physician or other qualified and competent health care professional shall supervise clinical trials involving patients or healthy volunteers, as evidenced by a medical certificate.

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SECTION 54: Basic science specialists and paramedical personnel may be involved in the formation of the multidisciplinary team, depending on the field of the clinical trial.

SECTION 55: (1) During a trial related to a diagnostic, therapeutic or preventive procedure, participants in a control group should benefit from treatment that is proven to be effective.

(2) In some cases, it may be ethically acceptable to use another comparator such as a placebo, in particular:

- where there is no proven effective procedure;
- where failure to follow a proven effective procedure could, at worst, result in temporary discomfort or delayed improvement of symptoms in participants;
- where the use of a proven effective procedure as a comparator would not yield scientifically reliable results and the use of a placebo would not increase the risk of serious or irreversible harm to participants.

CHAPTER VII
PENALTIES

I - ADMINISTRATIVE PENALTIES

SECTION 56: (1) Without prejudice to criminal proceedings, sponsors and investigators who fail to fulfil their obligations under this law shall incur the following penalties:

- suspension or withdrawal of ethical clearance;
- suspension or withdrawal of the administrative research authorization;
- confiscation or destruction of biomedical material and data at the offender's expense;
- suspension of the right to receive research funding;
- suspension of authorization to conduct experiments;
- suspension of the authorization to practise medicine or any other profession related to the purpose of the research;
- temporary or permanent closure of the accused research institution;
- prohibition of publication of the results of the offending research;
- prohibition of putting on the national market products resulting from experimental research conducted in violation of ethical and administrative standards.

(2) A statutory instrument shall lay down the regime of penalties referred to in Subsection (1) above.

SECTION 57: (1) Without prejudice to the penalties provided for in Section 59 below, whoever conducts a research project without obtaining ethical clearance

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SERVICE DU FICHIER LEGISLATIF ET REGLEMENTAIRE
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and administrative research authorization shall be liable to a fine of from 1 000000 (one million)to 100 000000 (one hundred million) CFA francs.

(2) The penalty provided for in Subsection (1) above shall also apply to whoever:

- deviates from the authorized protocol after having obtained the authorization provided for in Subsection (1) above;
- knowingly conducts a clinical trial on a person already involved in another trial;
- conducts or causes the conduct of medical research on a person that has been prohibited or suspended by the competent authority under this law.

SECTION 58: A sponsor who initiates medical research without taking out an insurance policy to cover any risks that may occur in the course of the research shall be liable to a fine of from 50 000000 (fifty million) to 200 000000 (two hundred million) CFA francs.

II - CRIMINAL PENALTIES

SECTION 59: Whoever carries out a medical research project:

- without having informed participants of their rights, research methods and risks;
- without the prior consent of the person concerned, or that of other persons, authorities designated to authorize the research;
- on a minor or an incapacitated adult without his/her assent and the consent of his/her legal representative;
- when the consent granted initially has been withdrawn;

shall be punished with imprisonment of from 1 (one) to 5 (five) years and a fine of from 10 000 000 (ten million) to 50 000 000 (fifty million) francs CFA.

SECTION 60: Whoever carries out medical research project without the assent of a minor or an incapacitated adult and the consent of his/her legal representative may also incur the following penalties:

- loss of civic and civil rights;
- prohibition for a period of up to 5 (five) years from engaging in a professional or social activity in the course or exercise of which the offence was committed;
- confiscation as provided for in Section 35 of the Penal Code;
- permanent exclusion from public contracts or for a maximum period of 5 (five) years

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SECTION 61: The penalty provided for in Section 65 below shall be imposed on whoever:

- reuses biological material or personal health-related data without obtaining prior consent or providing the information required under this law;
- transmits biological material or personal health-related data without a legal basis or required consent.

SECTION 62: Whoever, involved in a medical research project, discloses confidential information without the prior consent of its owner, shall be punished with imprisonment of from 3 (three) months to 3 (three) years and a fine of from 20 000 (twenty thousand) to 100 000 (one hundred thousand) CFA francs.

SECTION 63: Whoever transfers or acquires a human body or parts thereof for a consideration or in exchange for other material benefits shall be punished with imprisonment of from 10 (ten) to 20 (twenty) years and a fine of from 50 000 (fifty thousand) to 1 000 000 (one million) CFA francs.

SECTION 64: Whoever clones a human embryo for research purposes shall be punished with life imprisonment.

SECTION 65: Whoever carries out reproductive or therapeutic cloning shall be punished with life imprisonment.

SECTION 66: (1) Whoever genetically improves an embryo shall be punished with life imprisonment.

(2) The penalty provided for in Subsection (1) above shall apply to whoever chooses the sex of an embryo or manipulates it in order to modify it.

SECTION 67: Whoever creates transgenic or chimeric embryos shall be punished with life imprisonment.

CHAPTER VIII
TRANSITIONAL AND FINAL PROVISIONS

SECTION 68: (1) Medical research involving human subjects that has already obtained ethical clearance and administrative research authorization prior to the publication of this law, shall remain valid until the research project is completed.

(2) Medical research that has not yet obtained ethical clearance and administrative research authorization must comply with the provisions of this law.

SECTION 69: The establishment and functioning of the body in charge of ethics shall be governed by a separate instrument.

SECTION 70: The Ministry in charge of public health may conduct unannounced checks or investigations on medical research or clinical trials.

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SECTION 71: Implementing decrees shall, as and when necessary, supplement the provisions of this law.

SECTION 72: This law shall be registered, published according to the procedure of urgency and inserted in the Official Gazette in English and French./-

PRESIDENCE DE LA REPUBLIQUE
PRESIDENCY OF THE REPUBLIC
SECRETARIAT GENERAL
SERVICE DU FICHIER LEGISLATIF ET REGLEMENTAIRE
LEGISLATIVE AND STATUTORY AFFAIRS CARD INDEX SERVICE
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YAOUNDE, 27 AVR 2022

RÉPUBLIQUE DU CAMEROUN
PAIX-TRAVAIL-PATRIE
LE PRÉSIDENT
THE PRESIDENT
PEACE-WORK-FATHERLAND
REPUBLIC OF CAMEROON

PAUL BIYA
PRESIDENT OF THE REPUBLIC