

Rethinking Speed and Ethics: The Ethical Implications of Fast-Track Clinical Trials Post-COVID-19

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DESCRIPTION

The COVID-19 pandemic brought science to a critical juncture. The accelerated development of diagnostics, therapeutics, and vaccines was hailed as a triumph of modern medicine and international collaboration. Central to this feat was the unprecedented speed at which clinical trials were designed, approved, and conducted. While these fast-tracked trials delivered lifesaving interventions, they also ushered in a new era of ethical challenges ones that continue to reverberate across global health research even after the acute phase of the pandemic has passed.

Shift in ethical norms

Traditionally, clinical trials are governed by rigorous ethical and procedural frameworks to ensure participant safety, informed consent, and data integrity. Post-COVID-19, many of these frameworks were temporarily modified or expedited through mechanisms like Emergency Use Authorizations (EUAs) and rolling reviews. While such adaptations were justified by the urgent need to respond to a global crisis, their continued application in peacetime raises difficult questions. Are we witnessing a dilution of ethical safeguards in the name of speed and innovation? And if so, what is the cost? The pandemic has arguably reset expectations around timelines in clinical research. What was once considered a multi-year process can now be fast-tracked in months? This newfound efficiency has generated pressure from funders, pharmaceutical companies, and even the public to maintain this pace. But ethical review boards and regulatory agencies must resist the normalization of emergency procedures outside of emergency contexts. The risk is that speed becomes a permanent goal, rather than an exceptional means.

Informed consent under pressure

Informed consent a cornerstone of ethical research was also challenged during the pandemic. Remote consent processes, digital communication, and participant anxiety in high-stakes situations complicated the ability of participants to fully

understand what they were agreeing to. In some cases, volunteers enrolled in trials with limited information due to urgency, misinformation, or social pressure. Post-pandemic, it is crucial to reevaluate how informed consent is obtained and whether current practices are sufficient in a digital-first, fast-paced trial environment. Ethical guidelines must evolve to include safeguards against the potential coercion or miscommunication that rapid enrollment and virtual consent can entail.

Equity and global participation

The globalization of fast-tracked trials brought both progress and disparity. Low- and middle-income countries (LMICs) were essential sites for vaccine trials, often due to high case numbers and relatively fewer regulatory barriers. However, questions of fair benefit sharing, post-trial access to interventions, and adequate compensation for risk persist. Were these populations viewed as partners or simply as data sources? Moving forward, equity must be non-negotiable. Trial sponsors and governments should ensure that fast-tracked research includes equitable benefit distribution and robust community engagement, especially in vulnerable populations. Transparency and accountability in cross-border clinical trials are more vital than ever.

Balancing innovation with oversight

The pandemic demonstrated that it is possible to innovate without entirely abandoning ethical rigor. Adaptive trial designs, real-time data monitoring, and rolling submissions to regulatory bodies are valuable tools that can be ethically implemented. However, these tools require strong institutional oversight and continuous ethical evaluation. What is problematic is the creeping notion that regulatory flexibility equates to ethical compromise. Institutions must invest in ethical capacity-building training reviewers, creating adaptive but robust protocols, and including diverse voices in ethics boards to ensure that acceleration does not mean abdication of ethical responsibility.

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Received: 03-Mar-2025, Manuscript No. LDAME-25-37889; **Editor assigned:** 06-Mar-2025, PreQC No. LDAME-25-37889 (PQ); **Reviewed:** 20-Mar-2025, QC No. LDAME-25-37889; **Revised:** 27-Mar-2025, Manuscript No. LDAME-25-37889 (R); **Published:** 03-Apr-2025. DOI: 10.35248/2385-5495.25.11.147

Citation: Alavi N (2025). Rethinking Speed and Ethics: The Ethical Implications of Fast-Track Clinical Trials Post-COVID-19. *Adv Med Ethics*. 11:147.

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Public trust and transparency

Perhaps the most lasting implication of fast-tracked trials is their impact on public trust. While the rapid rollout of vaccines saved millions of lives, skepticism regarding their safety and efficacy spread just as quickly. In part, this distrust stemmed from the perception that corners were cut in the approval process. Restoring and maintaining public trust requires more than data transparency; it requires ethical transparency. Researchers and regulators must clearly communicate not only what decisions are made but why they are made. Ethical reasoning must be part of the public discourse, not just the scientific narrative.

The COVID-19 pandemic forced the scientific community to do the extraordinary. The challenge now is to retain the strengths of that response efficiency, collaboration, innovation without forgetting the ethical foundations that underpin trustworthy science. Fast-tracked clinical trials are not inherently unethical, but their ethical implications must be continually examined in light of changing norms, technologies, and global power dynamics. As we emerge into a post-COVID research landscape, the question is not whether we can do things faster, but whether we can do them better ethically, inclusively, and transparently. That is the legacy we must aim for.