

Enhancing the Application of Real-World Evidence In Regulatory Decision-Making

Washington Plaza Hotel • Washington, DC

March 3, 2016

DAY ONE

9:00 a.m. Welcome and Introductory Remarks
Mark McClellan, Duke-Margolis Center for Health Policy

9:10 a.m. The Evidence Development Spectrum: Defining Sources and Applications of Real-World Evidence
Gregory Daniel, Duke-Margolis Center for Health Policy

This foundational presentation will establish the spectrum of evidence development (from RCTs to fully observational research) and the ways in which various stakeholder groups interact with and apply evidence from portions of this spectrum to their decision-making frameworks. It is intended as a broad introduction to real-world evidence (RWE) concepts, remaining gaps in evidence development efforts, and the growing importance of RWE in addressing the needs of patients.

9:25 a.m. FDA's Use of Real-World Evidence to Support Decision-Making
Janet Woodcock, U.S. Food and Drug Administration

This FDA keynote presentation will establish the current bounds of regulatory use of RWE and highlight potential areas where such evidence may be able to play a greater supporting role in regulatory decision-making. Of particular interest are areas where routinely-collected non-randomized data could be harnessed and potential use cases where randomization in the clinical setting could support regulatory approval decisions. This presentation will set the stage for the following three panel sessions, where speakers will discuss these concepts in greater detail.

9:40 a.m. Moderated Discussion and Q&A
Moderator: Mark McClellan

To ground the following sessions in a common set of definitions and key concepts, the morning's presenters will join a number of additional reactants for moderated discussion. Participants will take questions from the audience.

Speakers:

- Cliff Goodman, The Lewin Group
- William Chin, Pharmaceutical Research and Manufacturers of America

10:25 a.m. Break

10:40 a.m. Harnessing Randomization in the Clinical Setting: Criteria for Regulatory Use Cases
Moderator: Gregory Daniel

Speakers in this session will begin to lay out a specific piece of the RWE-regulatory use framework that Duke-Margolis and FDA are working to explore: the use of randomization in the clinical setting to support approval of a new indication for an already-marketed medical product. Speakers will walk through example cases, with a specific focus on the potential key questions that should guide the decision to employ randomization in the clinical setting for this specific regulatory use:

- *What are the study conditions (e.g., population at risk, potential impact)?*
- *Are the endpoints or outcomes of interest easily collected through electronic medical records (EMRs)?*
- *Does the nature of the intervention lend itself easily to randomization in the clinical setting?*
- *What is the strength of evidence from prior studies? (e.g., is safety established?)*
- *Would randomization in the clinical setting be suitable to address the question? (e.g., sufficient vs. necessary criteria)*

In short, panelists will be discussing “when” to engage in RWE collection activities to support approval of a new indication.

Speakers:

- Robert Temple, U.S. Food and Drug Administration
- Robert Metcalf, Eli Lilly and Company
- Bill Capra, Genentech Inc.

12:00 p.m. Lunch

1:00 p.m. Harnessing Randomization in the Clinical Setting: Study Methods and Data Development Considerations for Efficient Implementation
Moderator: Mark McClellan

Building directly on the previous session, speakers will move from the “when” of employing randomization in the clinical setting to the “how” of designing such studies so as to be satisfactory for regulatory use. Such studies will need to be designed so as to be appropriate and sufficient for answering the question at hand (i.e., for approval of a new indication), and of minimal burden for sponsors, researchers, and patients. Discussion will therefore focus on design considerations that fall into four broad categories (study design, patient identification and selection, data collection and quality, and outcomes and endpoints of interest) and draw on worked examples that illustrate the potential promise and challenges such studies show within the current clinical study environment.

Speakers:

- Lisa LaVange, U.S. Food and Drug Administration
- Adrian Hernandez, Duke Clinical Research Institute
- Martin Gibson, NorthWest EHealth

2:30 p.m. Break

2:45 p.m. Exploring the Use of Observational Data in Regulatory Settings

Moderator: Gregory Daniel

In this session, speakers will highlight areas of drug development and regulatory science that could potentially be enhanced through better, more routine application of non-randomized real-world data. What would it take for purely observational data to be suitable for regulatory needs?

Speakers:

- Jonathan Jarow, U.S. Food and Drug Administration
- Richard Platt, Harvard Pilgrim Health Care Institute
- Marc Berger, Pfizer Inc.
- Marcus Wilson, HealthCore Inc.

3:55 p.m. Closing Remarks

Mark McClellan

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DAY TWO

9:00 a.m. Welcome and Recap of Day One
Mark McClellan, Duke-Margolis Center for Health Policy

9:05 a.m. Building a Robust 21st Century Evidence Development Infrastructure
Moderator: Mark McClellan

A driving force for making real improvements in RWE development will be establishing a clear, motivating business case for all stakeholders to contribute toward the development of a national evidence development infrastructure. This will necessitate an environment in which RWE development is not just a potentially “useful” option for addressing questions of interest, but is truly a more cost-effective and efficient alternative for pursuing or supporting a wide range of clinical studies. Speakers in this session will lay out a vision for what this infrastructure should look like, with special focus given to the modular needs that will be placed on a national system in order to meet a variety of stakeholder goals.

Speakers:

- Melissa Robb, U.S. Food and Drug Administration
- Nancy Dreyer, Quintiles
- Sean Tunis, Center for Medical Technology Policy
- Solomon Iyasu, Merck & Co.

10:00 a.m. Incentives and Policy Options for Improving a Shared Infrastructure
Moderator: Gregory Daniel

Speakers in this session will highlight promising avenues for realizing a 21st Century evidence development system. What additional incentives are needed to encourage generation of more robust and reliable RWE in the postmarket? How can improvements to the connectivity and scalability of research and data collection methods help to achieve these ends? Are there specific policies that should be pursued in order to improve infrastructure? Discussion will focus on both near- and long-term strategies for moving toward the ideal national system discussed in the day’s opening session.

Speakers:

- Edmund Pezalla, Aetna Inc.
- Jennifer Graff, National Pharmaceutical Council
- Rachael Fleurence, Patient-Centered Outcomes Research Institute

10:45 a.m. Break

11:00 a.m. Meaningfully Engaging Providers: Pathways for Fully Embedding Evidence Development in Routine Care

Moderator: Mark McClellan

Ensuring that the best data possible is collected at the point of patient care is an intrinsic part of pursuing improved development and use of RWE – and can only happen through concerted partnership with the providers responsible for treatment decisions. How can stakeholders work to better engage providers in developing RWE? Can data development requirements for RWE-enabled studies be better linked to payment or quality improvement initiatives in order to further incentivize provider and hospital system buy-in? Are the study designs and approaches discussed in day one practicable from a provider perspective? This session will highlight challenges in fully engaging physicians and lay out potential incentives for doing so.

Speakers:

- Carrie D’Andrea, University of California, San Francisco
- Michael Hogarth, University of California, Davis

11:45 a.m. Making Patients Vested Partners: Patient-Generated Data, Consent, and Data Privacy Challenges

Moderator: Mark McClellan

A great majority of patients now express willingness to be part of the learning health care system by contributing their own data and experiences to the growing body of evidence on medical care and products. As stakeholders look to further incorporate data from real-world settings into various aspects of decision-making, how can they ensure that they are more fully collaborating with patients to make better use of their data?

Speakers:

- Sally Okun, PatientsLikeMe
- Marc Boutin, National Health Council
- Kimberly McCleary, FasterCures

12:30 p.m. Closing Remarks

Mark McClellan

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