

# Electronic Capture of PROs in NCI Clinical Trials

*Lori Minasian, MD, FACP  
Deputy Director,  
Division of Cancer Prevention, NCI*



July 27, 2017

## Vision for PROs in NCI Clinical Trials

- Incorporate patient reported information into the study design to identify safe and effective interventions to treat, prevent and control cancer.
  - Improve our ability to identify tolerable regimens
- Improve operational efficiency for the collection of PROs for investigators and site staff
  - Streamline data collection and analysis with integration of PROs into the existing electronic data collection
- Improve the feasibility and usability of PRO collection to enhance patient participation

## PRO Definitions

- HRQOL (Health Related Quality of Life)
  - A multi-dimensional concept that includes domains related to physical, mental, emotional and social functioning.
  - Purpose of measuring HRQOL is to determine the impact of the illness and its treatment on the well-being of the person.
    - The aggregate effect
- PROs (Patient Reported Outcomes)
  - Any report of the status of a patient's health condition directly from the patient.
    - Focus on specific construct (symptom or function or other)
      - Diary of hot flashes, dietary intake, or physical activity
      - Response to specific question(s) related to pain or function, etc

## HRQoL/PRO Should Inform the Primary Study Question

- What part of the patient experience helps understand the benefit/risk for this study?
  - *Functional outcomes, symptom burden, or overall HRQOL*
- Data collected needs to reflect the clinical issue
  - *Time points for collection correspond to delivery of intervention and expected responses*
  - *Disease outcomes are correlated with the PRO information*
- Analysis plan for the HRQoL/PRO is in the statistical section with methods and sample size
  - *Summary score for HRQoL*
  - *Symptom score or summary score for PRO*

## What HRQOL or PRO Tools Are Used in NCI Clinical Trials

- NCTN, NCORP have collected PROs for decades
  - Using valid, reproducible, & reliable HRQOL Tools
  - Usually compare aggregate effects between arms of study
  - FACT (General, Disease Specific, Toxicity) commonly used
  - EORTC Tools (QLQ C-30, EQ-5D)
  
- NIH Developed PROMIS
  - Item Bank of Questions where the answers have been “normed” across different populations.
    - Across disease areas, including some site specific cancers
  
- NCI Developed PRO-CTCAE

## NCI's PRO-CTCAE Tool

- PRO-CTCAE is designed for patient reporting of symptomatic adverse events
  
- PRO-CTCAE is an item bank of questions
  - Derived from the CTCAE adverse event items
  - Complimentary to CTCAE (and to be used with)
  
- Incorporate into study design for patient reporting in similar timeframes for clinician reporting
  
- PRO-CTCAE is **ONLY** for descriptive reporting
  - Framework for including PRO-CTCAE is AE reporting
  - Not ready for clinical and protocol specific decision-making based upon individual PRO-CTCAE scores

## Incorporation of PROs for NCTN, NCORP and ETCTN

	NCTN/NCORP	ETCTN
<b>Incorporation of PROs</b>	Long history of incorporating HRQoL into randomized trials	Limited to no history of incorporating any PROs in early phase trials
<b>Availability of PROs</b>	HRQoL and PRO instruments curated into caDSR  Pre-populated RAVE CRFs  Standard PROs have been verified for electronic capture	Interest from investigators to incorporate PROs  PRO-CTCAE for symptomatic AEs
<b>Inclusion of PROs</b>	Review PROs in NCTN and NCORP trials for RAVE CRFs  Confirm electronic capture is equivalent	Identify ETCTN trials to incorporate PRO-CTCAE  Create RAVE Global PRO-CTCAE Library  Development of data standards for PRO-CTCAE ongoing with FDA

## Collection Methods for PROs

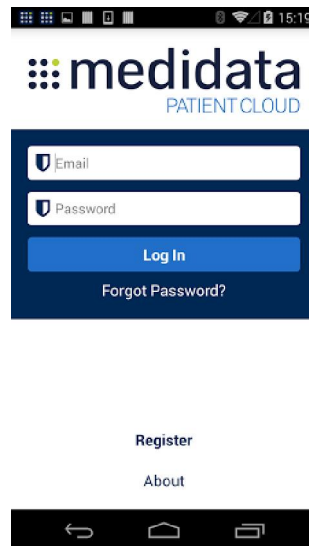
- **Paper and pencil**
  - Long history of paper booklet collection
- **Telephone**
  - Some Groups have central telephone collections
  - IVRS useful
- **Electronic**
  - Industry using electronic direct patient capture methods
  - Increasingly being used, often with device provided by study
  - RTOG has used VisionTree for electronic data collection (a few trials)
  - ACRIN has used EASEEPRO for ePRO collection for COMET
  - Alliance has begun work with Medidata ePRO

*Understanding the need for equitable selection of patients*

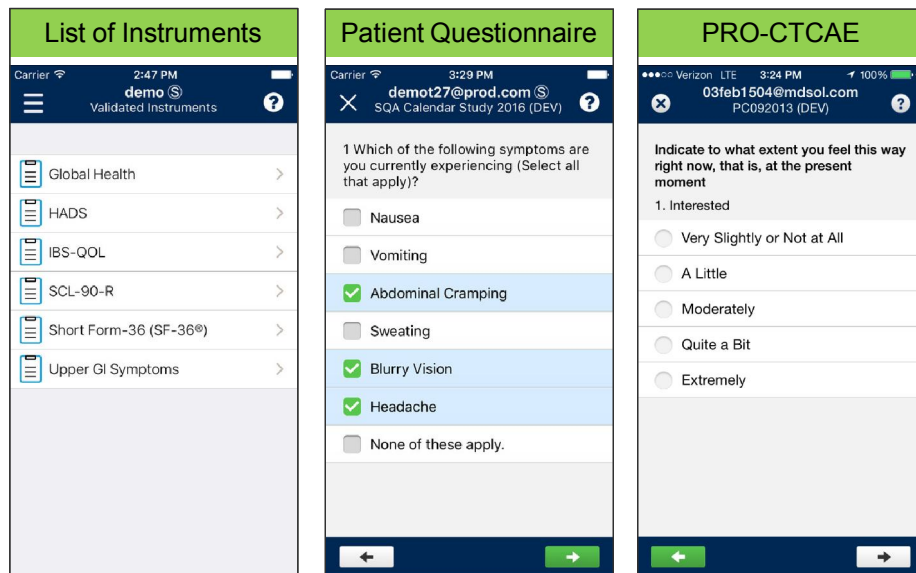
***Flexibility for Multiple Modalities is key***

## Patient Cloud ePRO Overview

- What is Patient Cloud ePRO?
  - A mobile app that collects patient responses to questionnaires / diaries and transfers data to the Medidata Clinical Cloud
  - Set-up and execution with intuitive role-based user interface
    - (patients do need email address)
- Fully integrated with Rave EDC to leverage the entire Medidata platform
- Available for Android and iOS mobile devices



## Patient Cloud ePRO Overview



## NCI's ePRO Working Group

- Working Group Discussion Items
  - Workflows
    - Transition from use of Paper Source Documentation to ePRO.
    - Define a process to record patients not filling out forms.
    - Establish protocol template language for the inclusion of ePRO
    - Establish informed consent template language for the use of ePRO
  - Implementation Pilot
    - Anticipate 10-15 trials for NCTN and NCORP
    - Anticipate 4-5 trials for ETCTN

## Data Standards for Electronic Collection of PROs

- Create a list of business needs/requirements for stakeholders on the inclusion of PROs.
  - Data Management Centers
  - Accrual Sites and staff
  - Patients
- Evaluate the logistical features and operational aspects to inform the “business rules”
- Unique to collect data directly from patients into database without any filtering
  - Compliance Monitoring for Quality Assurance
  - Privacy Issues
  - Consideration for monitoring patients response

## Addressing Regulatory Issues of PROs in NCI clinical trials

- NCI and FDA have regular meetings exploring issues regarding PROs in cancer clinical trials
  - Data standards meetings,
- Integrate regulatory requirements unique to electronic collection of information from patients
  - Real time review of symptom severity
  - Bring your own device (BYOD)
  - Mixed modalities and quality control

## Addressing Regulatory Issues of PROs in NCI clinical trials

- FDA, NCI and OHRP staff met in April 2017 to discuss the issue of patient reported “severe” findings
  - Most patients on cancer clinical trials are followed closely
  - Real-time monitoring?
    - Not currently done with HRQOL and other PROs
    - Usually reviewed and reported after trial completion
    - Results not provided for individuals, but rather in aggregate
  - Disclosure for patients as a reminder to “need to contact your provider”
    - Acceptable
- Bring your own device
  - NCI provides an opportunity to evaluate

## ePRO and the NCI CIRB

- Already some trials sent to CIRB with electronic data capture of PROs
  - Phase 3 trials from NRG using VisionTree (appendix for e-collection)
  - COMET, the PRO correlative study exploring patients' understanding of tumor profiling is using a different platform for electronic collection
  
- One concern is the handling of "severe" reports
  - Real-time monitoring?
    - Not now
  - Disclosure for patients "need to contact your provider"
    - Acceptable

## Summary

- Electronic collection of patient-reported outcomes is becoming increasingly common
  - NCI has invested in the electronic Patient Cloud within Medidata RAVE
  - Platform consistent with the established electronic data collection for the networks within the NCI's shared infrastructure for clinical trials.
  
- Active ongoing work to understand the workflow process currently
  - Determine the requirements for ePRO
  - Facilitate the collection of PROs across all the Networks within the clinical trials "shared infrastructure"
  
- Understand the unique issues with data collected directly from patients and going into the database





The image features a blue background with a large white arrow pointing to the right. In the center of the arrow, there are three logos: the Department of Health and Human Services seal, the NIH logo, and the National Cancer Institute logo. Below the logos, the website addresses [www.cancer.gov](http://www.cancer.gov) and [www.cancer.gov/espanol](http://www.cancer.gov/espanol) are displayed.

  **NATIONAL  
CANCER  
INSTITUTE**

[www.cancer.gov](http://www.cancer.gov)      [www.cancer.gov/espanol](http://www.cancer.gov/espanol)