MULTI-REGIONAL CLINICAL TRIALS

THE MRCT CENTER of BRIGHAM AND WOMEN'S HOSPITAL and HARVARD

Executive Committee Meeting

March 21, 2023
Virtual meeting

Today's Agenda

- Welcome
  - New EC representatives
  - June 22 EC in-person meeting
- Clinical Research Glossary Collaboration with CDISC
- Programmatic updates and plans
  - DEI in Clinical Research:
    - MRCT Center Diversity Action Plan template (relevant to FDA submissions)
    - Effort and tools convergence: Faster Cures, MRCT Center, CTTI, NASEM (Drug Forum), and others (e.g., TransCelerate)
  - PI Oversight in Decentralized Clinical Trials (DCT)

Updates

New Executive Committee representatives:

- Mayo Clinic
  - Tufia C. Haddad, MD, Oncologist, Co-Chair of Leadership Team
  - Naveen L. Pereira, MD, Cardiologist, Internist, Co-Chair of Leadership Team

In-Person Executive Committee Meeting

Wednesday, June 21, 2023

5 PM Cocktail Reception, followed by
Dinner with MRCT Center External Advisory Board,
Harvard Square

Thursday, June 22, 2023

9:00 AM – 2:00 PM EDT
In-person/Hybrid EC Meeting,
Harvard Faculty Club, Cambridge, MA

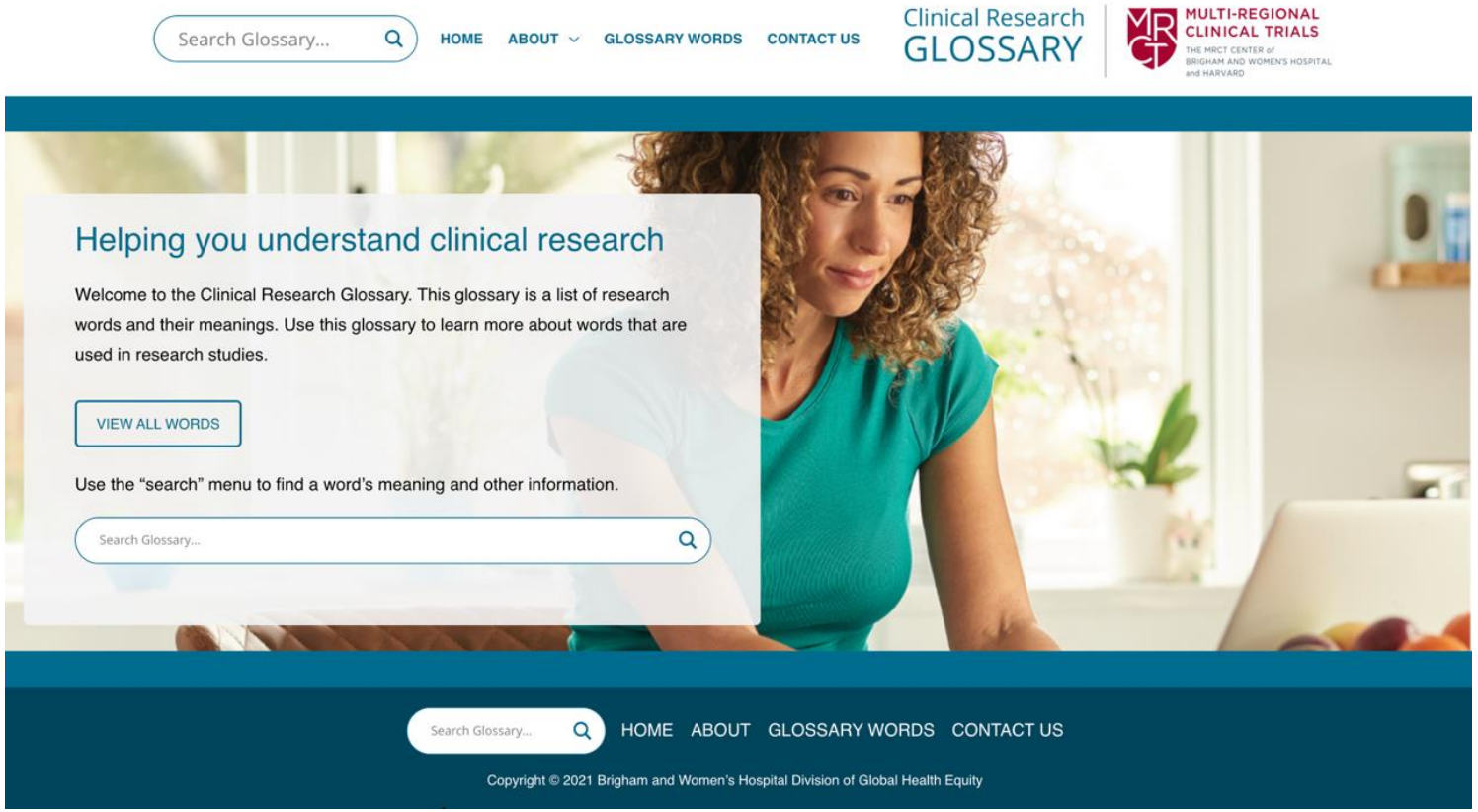
Please RSVP!

Clinical Research Glossary Collaboration with CDISC

Clinical Research Glossary - Recap

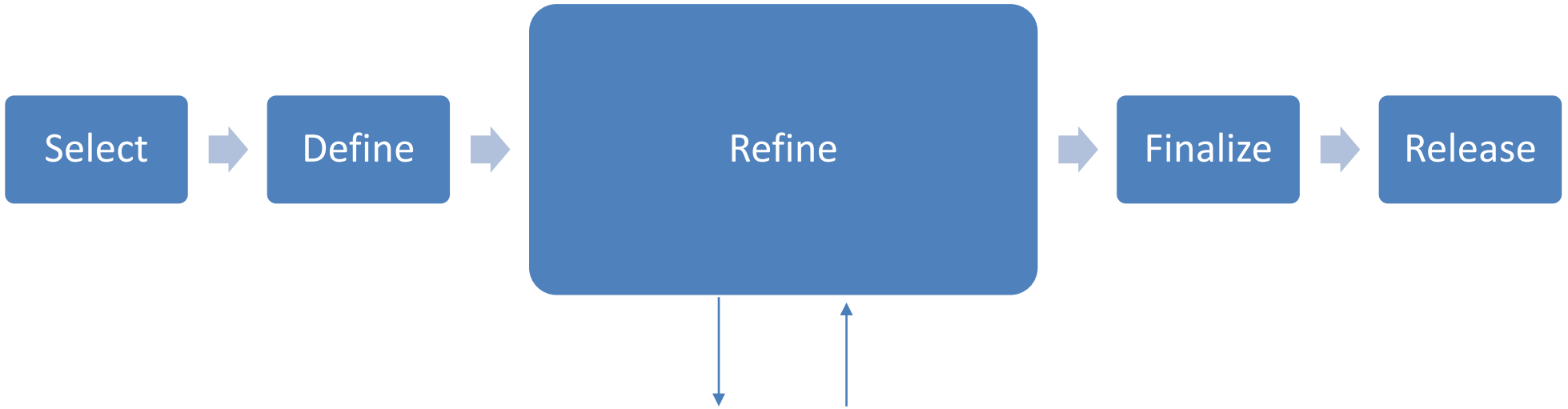
- Piloted in 2020
- Released in 2021

  www.mrctcenter.org/clinical-research-glossary
- Expansion began in 2022
- Diverse workgroup:
  - Development Team (DT)
    - 20+ members
    - Multi-stakeholder, including patients
  - Review Team (RT)
    - Small group (~6)
    - All patient/caregiver advocates



Baedorf Kassis S, White S, & Bierer B. (2022). Developing a consensus-driven, plain-language clinical research glossary for study participants and the clinical research community. *Journal of Clinical and Translational Science,* 1-20. doi:10.1017/cts.2022.12

Clinical Research Glossary - Process



- Dev Team written feedback
- Dev Team consensus conversations
- Review Team review and consensus decision
- Consensus definitions prepped for release

Example: Evolution of “Bias” to “Research Bias:”

Original for **Bias**:

A way in which data, methods, experience, or feelings either for or against, can impact an idea or outcome.

Development Team:

A way in which data, methods, experiences, or feelings can influence how information is presented and results are interpreted.

Review Team = FINAL:

Research Bias:
Flaws in the way a study is designed, done, or analyzed that lead to one conclusion being favored over another.*

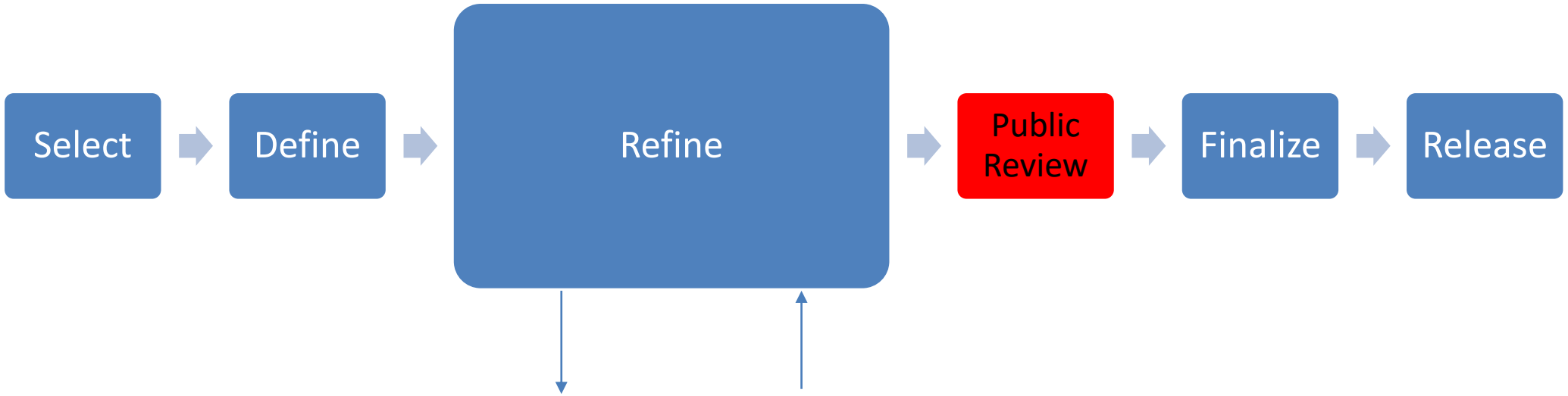
*The supportive ”More Info” section is critical for this definition

The MRCT Center Collaboration with CDISC

- CDISC – Clinical Data Interchange Standards Consortium
  - Develops and advances data standards of the highest quality to transform incompatible formats, inconsistent methodologies, and diverse perspectives into a robust framework for generating accessible clinical research data.
  - Convenes a global community of research experts representing a range of experiences and backgrounds to harness the collective power to drive more meaningful clinical research.
  - Offers a quarterly public review period for new additions to its standards, a time when feedback can be collected from its users.

The plain language definitions developed for the MRCT Center Clinical Research Glossary will be included as a CDISC standard starting in 2023, and as such, will go through their public review process.

Clinical Research Glossary – New Process



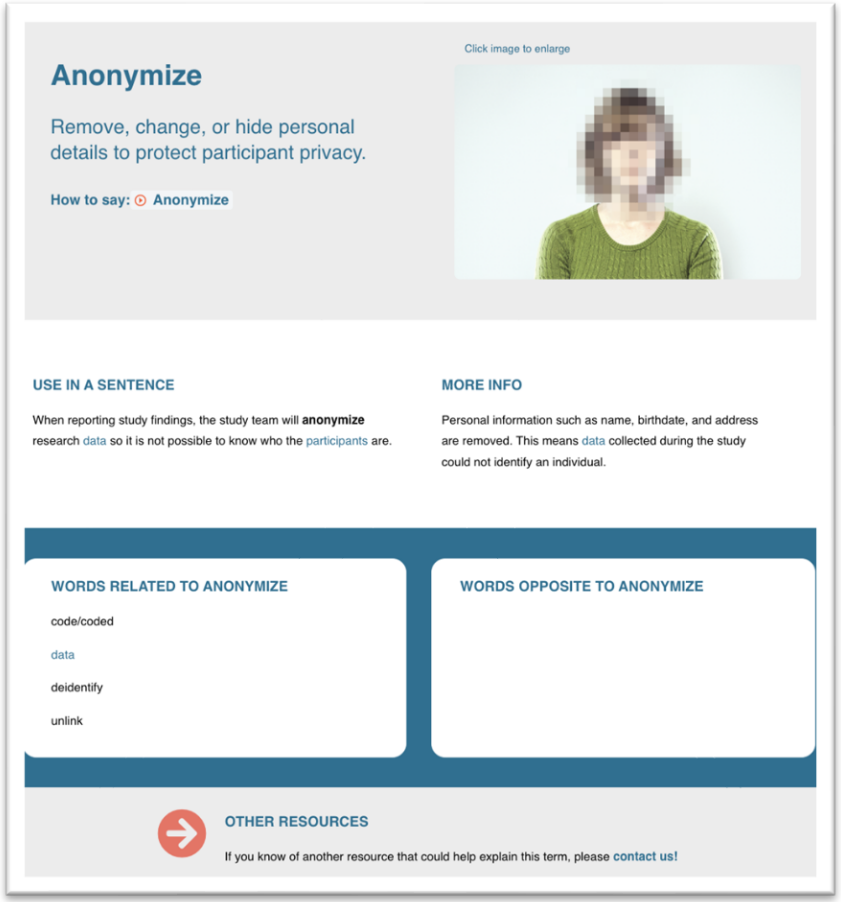
- Dev Team written feedback
- Dev Team consensus conversations (including CDISC representatives)
- Review Team review and consensus decision
- Consensus definitions prepped for release

Clinical Research Glossary – What's Next

- CDISC Public Review of our first 53 definitions starting March 24, 2023
- Preparation of ~ 145 new definitions for CDISC Public Review in June 2023
- Development of a new website with better functionality
- Finalization of supportive information for all new definitions, including:
  - Images
  - Additional info to advise participants where they might see a term and what questions they might want to ask
- Timed release of updated MRCT Center Clinical Research Glossary with the CDISC plain language standard at the end of 2023
- Ongoing considerations for translation into additional languages

A Note about Clinical Research Glossary Images

- The inclusion of images in a glossary is a unique feature.
- Images support understanding*
  - Convey concepts and information through a different modality than text.
  - Reinforce the information provided in the text.
- Images foster engagement
  - Websites with images get more views, show up in search engine results, are more clickable, and fuel social media.**
- We would like to grow our image library – can you help?



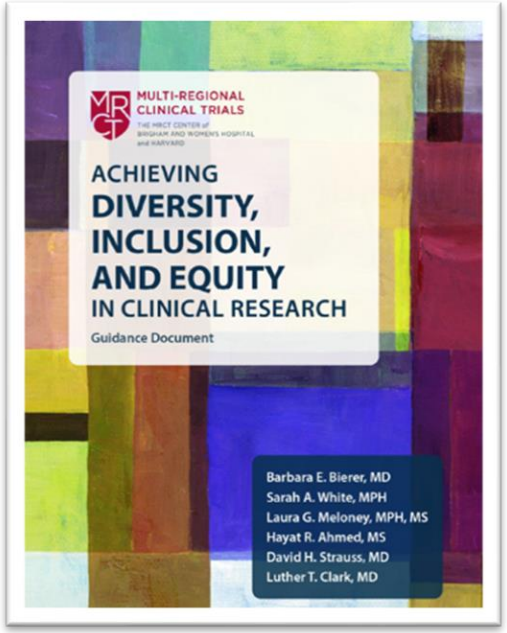
*https://accessibility.huit.harvard.edu/use-images-and-media-enhance-understanding#:~:text=Images%20and%20media%20are%20powerful,attract%20and%20engage%20our%20attention

**https://businessresources.yp.ca/website/why-images-are-an-important-part-of-your-website-strategy

Programmatic Updates and Plans: DEI in Clinical Research

MRCT Center Model Diversity Action Plan (for FDA submission)

- The Food and Drug Omnibus Reform Act of 2022 (FDORA) of December 29, 2022, included:
  - **Clinical Trial Diversity**: clinical trial sponsors must submit "diversity action plans" for certain late-stage drug trials, including all P3 trials and most device studies.
  - Public workshops and additional guidance are forthcoming.



- MRCT Center intends to modify the Recruitment Strategy Document into a specific model template of a Diversity Action Plan

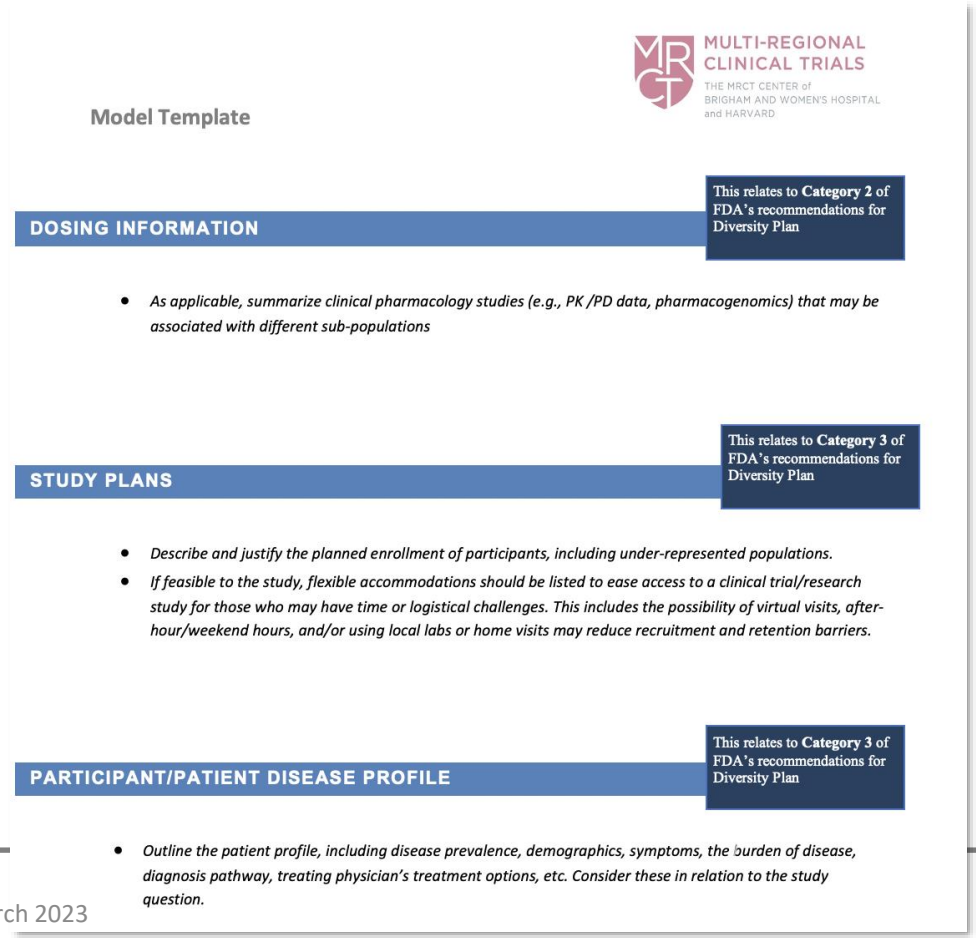
Recruitment Strategy Document Template
Download PDF Download Word Doc

https://mrctcenter.org/diversity-in-clinical-research/wp-content/uploads/sites/11/2021/03/13-Recruitment-Strategy-Document.pdf

Template Preview

Adaptation of Recruitment Strategy Document to align with regulatory draft guidance

'Diversity Plans to Improve Enrollment of Participants From Underrepresented Racial and Ethnic Populations in Clinical Trials.'



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Model Template

DOSING INFORMATION

This relates to **Category 2** of FDA's recommendations for Diversity Plan

- *As applicable, summarize clinical pharmacology studies (e.g., PK /PD data, pharmacogenomics) that may be associated with different sub-populations*

STUDY PLANS

This relates to **Category 3** of FDA's recommendations for Diversity Plan

- *Describe and justify the planned enrollment of participants, including under-represented populations.*
- *If feasible to the study, flexible accommodations should be listed to ease access to a clinical trial/research study for those who may have time or logistical challenges. This includes the possibility of virtual visits, after-hour/weekend hours, and/or using local labs or home visits may reduce recruitment and retention barriers.*

PARTICIPANT/PATIENT DISEASE PROFILE

This relates to **Category 3** of FDA's recommendations for Diversity Plan

- *Outline the patient profile, including disease prevalence, demographics, symptoms, the burden of disease, diagnosis pathway, treating physician's treatment options, etc. Consider these in relation to the study question.*

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Model Template

DEI PLAN OBJECTIVE

This relates to **Category 1** of FDA's recommendations for Diversity Plan

- *Summarize the objective of this diversity plan, Including a description of /how diverse and/or underrepresented populations are considered.*
- *Describe the protocol's plan to identify sites to meet the intended recruitment and enrollment goals.*
- *Include relevant information on the safety and efficacy of the research treatment or intervention and the population of interest.*
- *If no data exist that indicate the impact of race and/or ethnicity or other demographic or non-demographic variables on safety or effectiveness, enrollment should nonetheless reflect the epidemiology of the disease.*

STUDY QUESTION & STUDY POPULATION

This relates to **Category 2** of FDA's recommendations for Diversity Plan

Describe the study question and intended study population, based on epidemiology of disease or condition.

- *Include references to demographic (e.g., age, sex, gender, race, ethnicity, ancestry, etc.) and non-demographic factors (e.g., dynamic variables that may change, including gender identity, social determinants of health, comorbidities, current medications, etc.),*
- *Describe how the study question reflects the needs of diverse populations or subgroups, and the input of —–_patients and/or local communities.*

STUDY DESIGN

This relates to **Category 2** of FDA's recommendations for Diversity Plan

- *Outline the overall study design, including study eligibility criteria*
- *Describe how participants and/or community input was sought, collected, and included in the design of the study.*

Discussion

- Will develop adaptation from the current tool
- Would appreciate (redacted) Diversity Action Plan templates or actuals, to develop best resource for all
- Let us know if you wish to (or ask someone to) participate in the work
- FDA is enthusiastic

- Questions and discussion

DEI in Clinical Research: Effort and tools convergence

Objective:

- A coordinated strategy to compile, implement, and measure resources and best practices across the clinical trials ecosystem, focusing on US populations (and likely leading with race and ethnicity in response to FDORA)

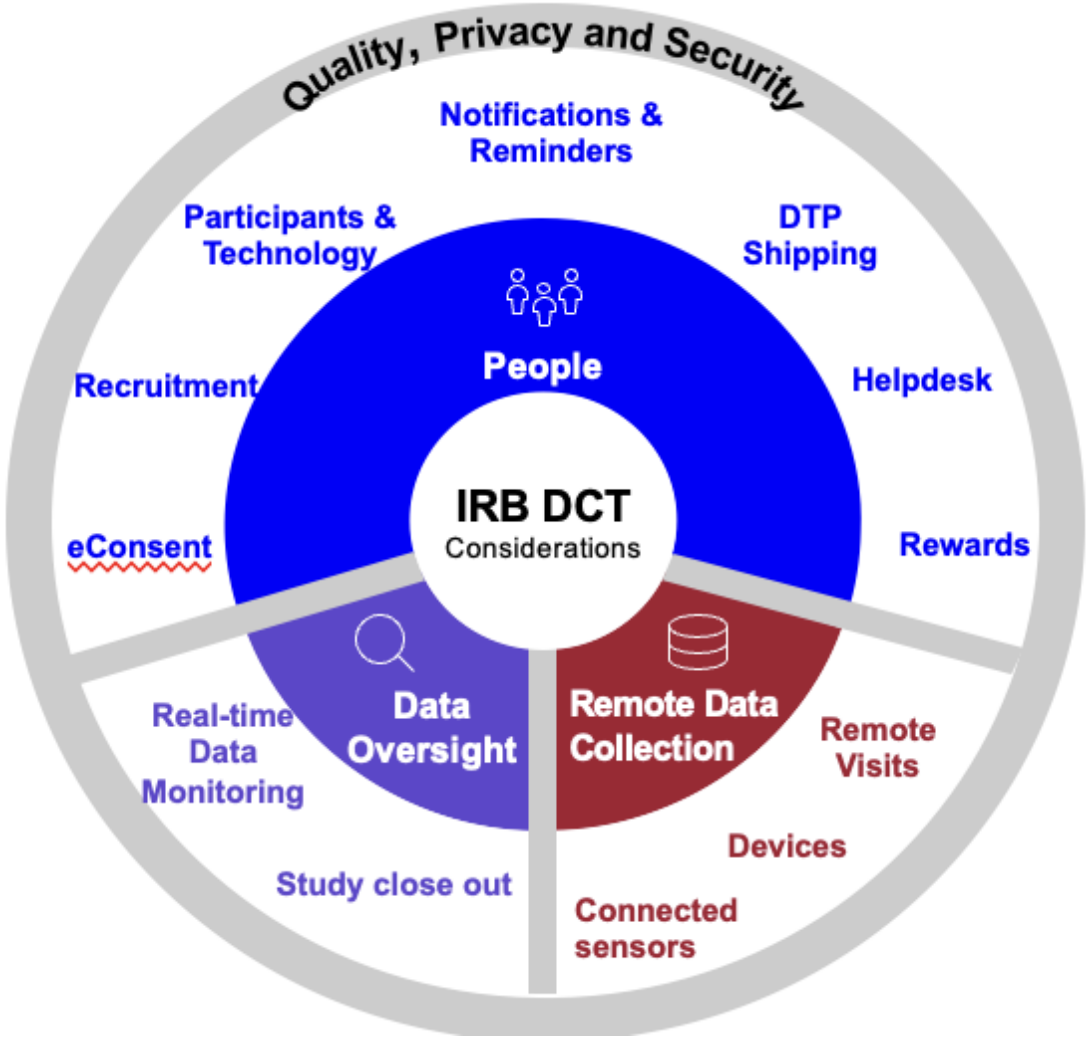
Co-convening Organizations involved:

- CTTI
- Faster Cures/Milken
- MRCT Center
- NASEM (Drug Forum)
- others

Co-leads

PI Oversight in Decentralized Clinical Trials (DCT)

Background



- MRCT Center and Medable coordinated a working group to address how IRBs/ECs review DCTs, trials executed either in whole or in part remotely, through telemedicine, mobile technologies, local sites, and local or home healthcare providers
- 12 specific tools, and points to consider
- To be released in Q2 2023

- Noted issues specific to DCTs in addition to risks and benefits and variability in content, format, and IRB deliberations

PI Oversight in Decentralized Clinical Trials (DCT)

- The MRCT Center was invited to collaborate with Medable and CVS Health to determine the nature of PI oversight and responsibility in DCTs, the roles and responsibilities of emerging actors in the context of a decentralized clinical trial (DCT) for regulatory submission.

- A survey was developed by Medable and CVS Health and distributed to PIs, healthcare providers, and sponsors to understand their perspectives on oversight and DCTs. There were questions around operational considerations for the FDA form 1572 and the definition of an investigator.
- Survey found significant differences in trials across the spectrum, including risk of IMP, elements of DCTs, phase and severity of risk, and participant access to trial.
- Medable, MRCT Center, and CVS Health presented to FDA colleagues last week for comment.

Next Steps

- FDA enthusiastic
- Reconsideration of Form 1572
- PI oversight of DCTs
  - Differences in nature, risk, and endpoints, among others, in trials will contribute to the complexity
  - Matrixed responses to these questions are likely
  - Planned public meeting
  - Core team (MRCT Center, Medable, CVS Health) meeting in person next month

Discussion

- Identification of issues
- Interest in participation

2023 Executive & Steering Committee Meetings

2023 Executive and Steering Committee Meetings

- January 31, 11-12 PM
- April 25, 11-12 PM (virtual)
- September 12, 11-12 PM (virtual)
- December 13, 8 AM-5 PM including Annual Meeting (preferred in-person, hybrid planned)

Executive Committee Meetings

- March 21, 11-12 PM
- June 22, 9 AM-2 PM (preferred in-person, hybrid planned)
- October 24, 11-12 PM

MULTI-REGIONAL CLINICAL TRIALS
BIOETHICS COLLABORATIVE

Research, Development, & Regulatory Roundtable

UPCOMING MEETINGS

April 13, 2023, 1PM - 3:30PM ET

- *Trials and tribulations of n of 1 trials*

June 27, 2023, 1PM - 3:30PM ET

- *TBD*

October 10, 2023, 1PM - 3:30PM ET

- *TBD*

December 12, 2023

- *TBD*

UPCOMING MEETINGS

June 1, 2023, 11AM - 3:00PM ET

- *The Revolution in Online Behavioral Advertising – What it Means for the Research Enterprise*
- *Challenges in Decentralized Clinical Trials – Open Discussion Forum*

This meeting will take place at the Ropes & Gray Boston offices (in-person attendance preferred)

September 12, 2023, 1:30PM - 4PM ET

- *Research Collaboration with China*

November 13, 2023, 1:30PM - 4PM ET

- *TBD*

Please follow the MRCT Center:

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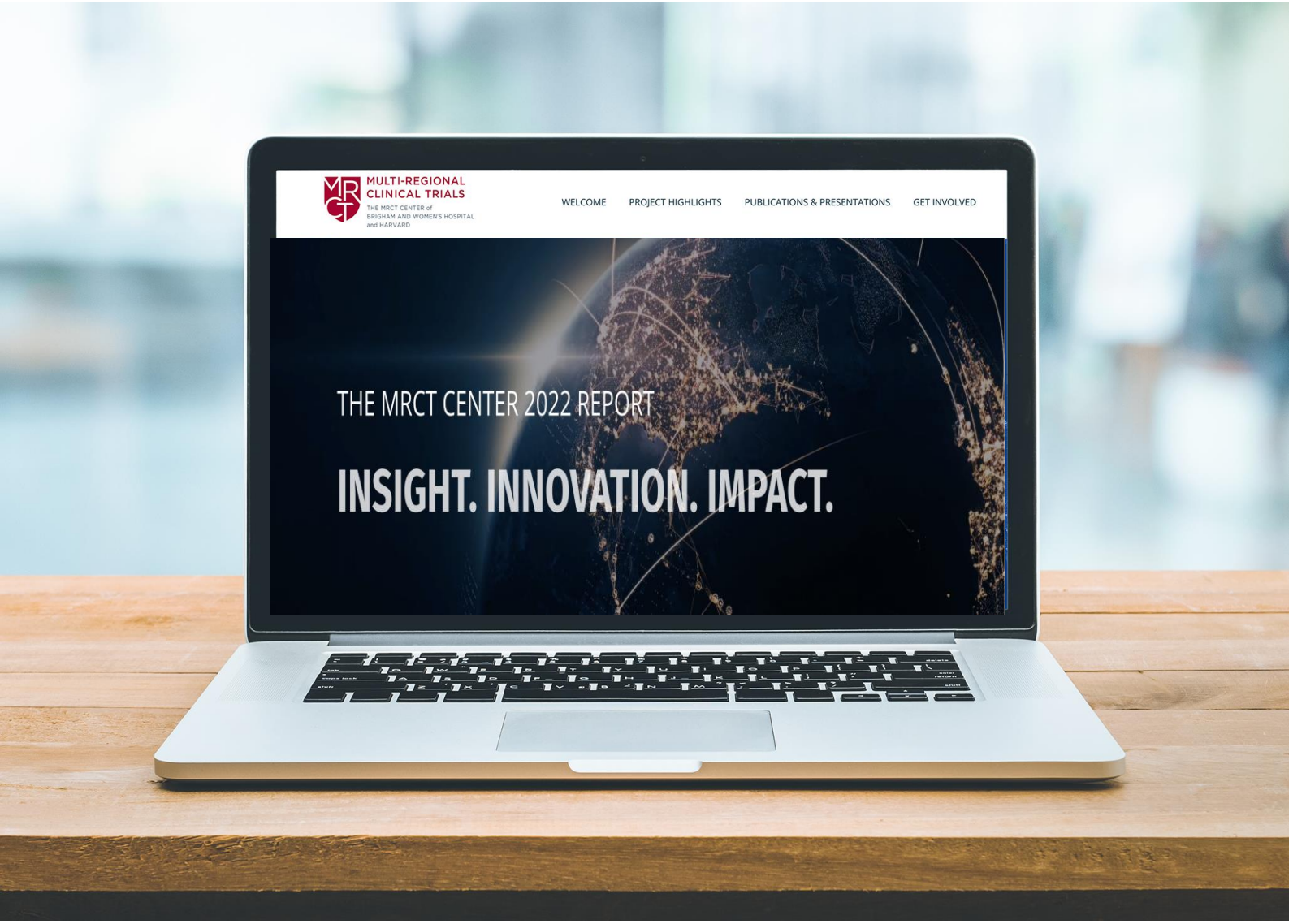
MRCTCenter.org



Thank you for your support and collaboration

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