

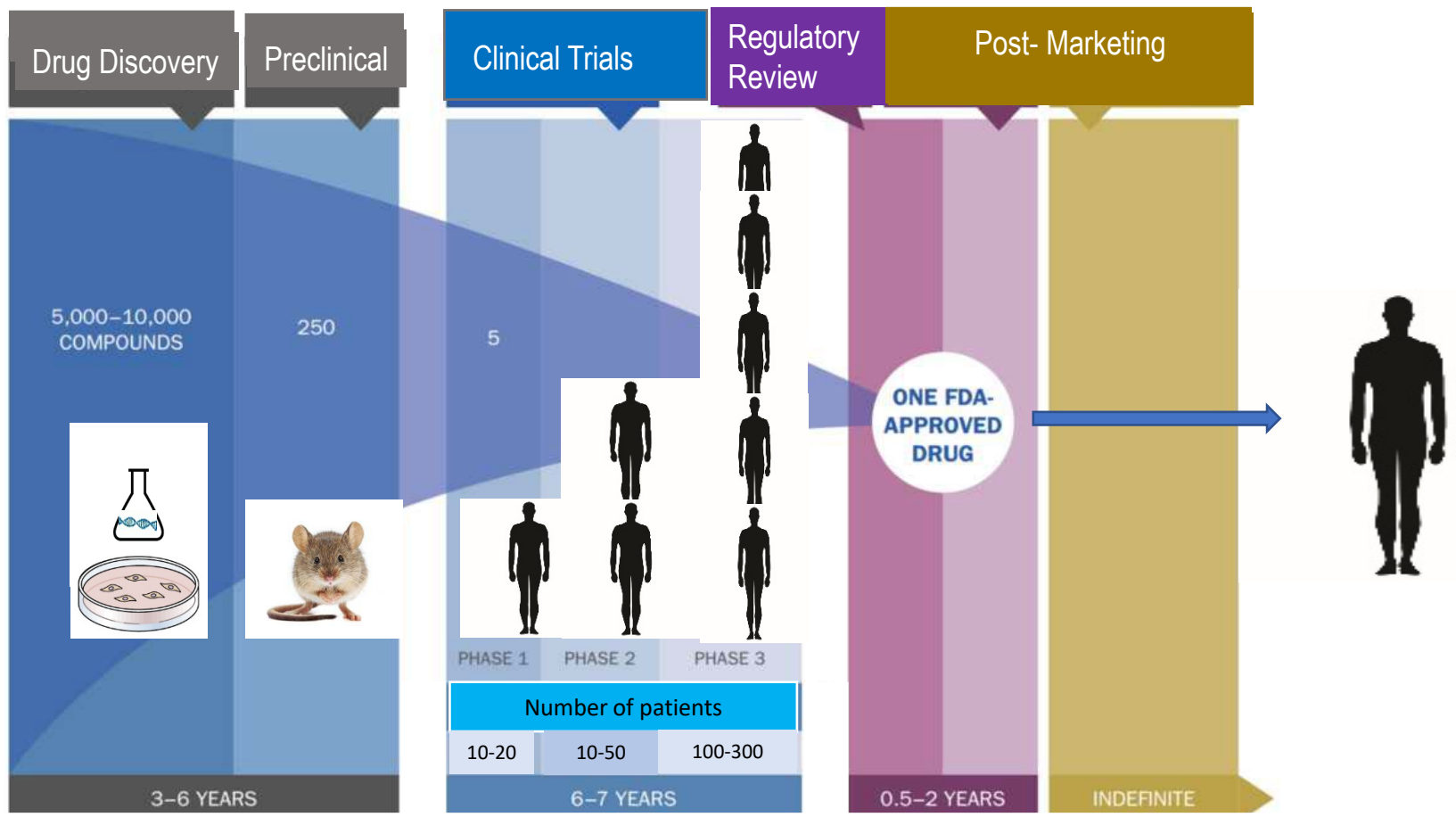


Overview of the Clinical Trials Process

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Drug development process



Drug: A substance intended to treat, prevent or diagnose a disease, or to restore, correct or modify physiological functions by exerting a pharmacological, immunological or metabolic action.

Drug development is long, costly, inefficient

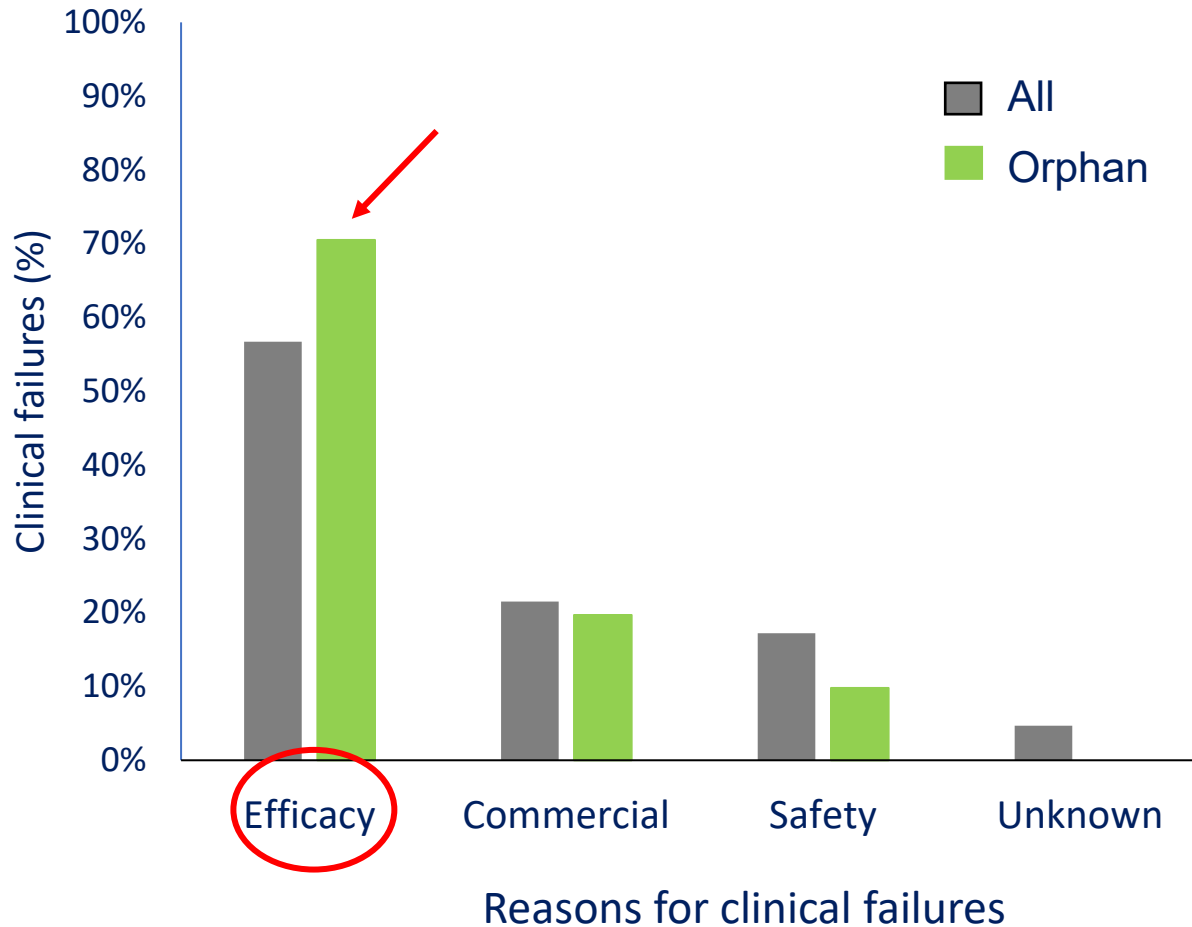
It takes ~ **10-15 years** to develop a new drug

It costs ~\$ **2,600 million** (50-70% for rare diseases) to develop a new drug

55%-90% of drugs entering phase 1 clinical trial will fail*

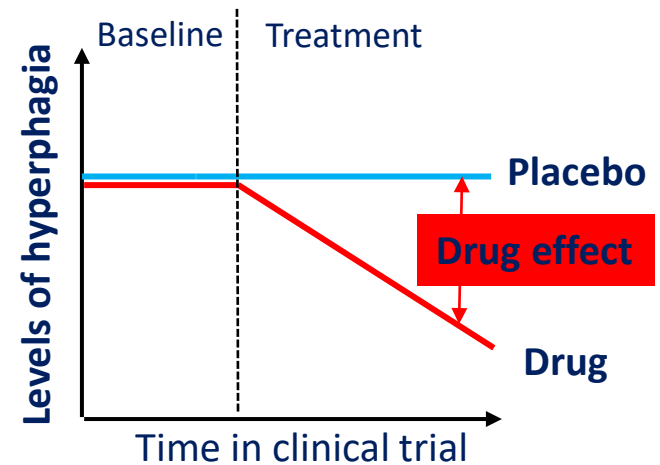
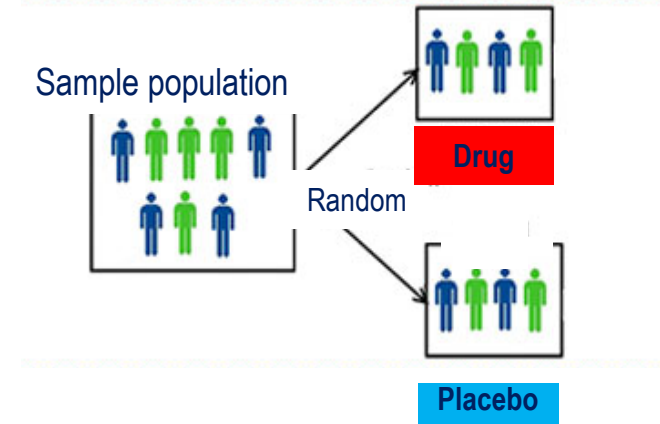
*DiMasi et al., J. Health Econ, 2016; Hwang et al, JAMA, 2016

Lack of efficacy is the main reason for clinical failures

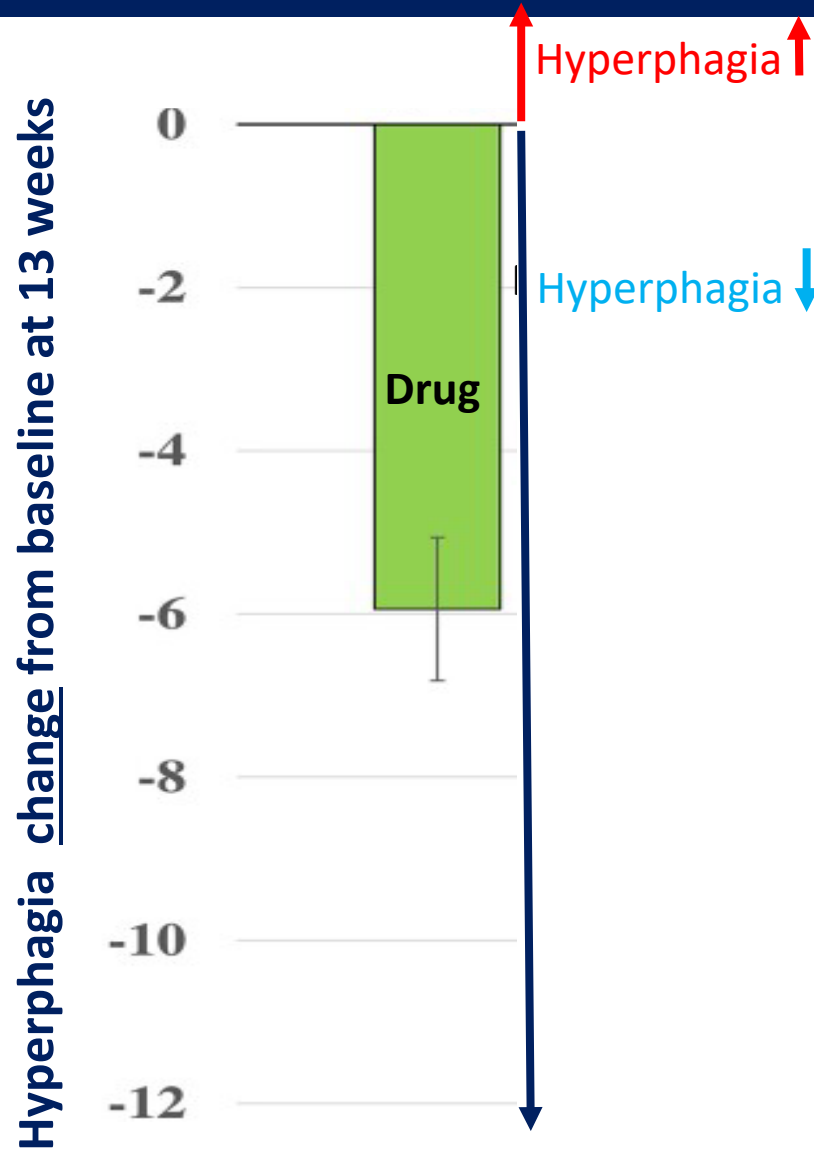


Clinical trial concepts: definition

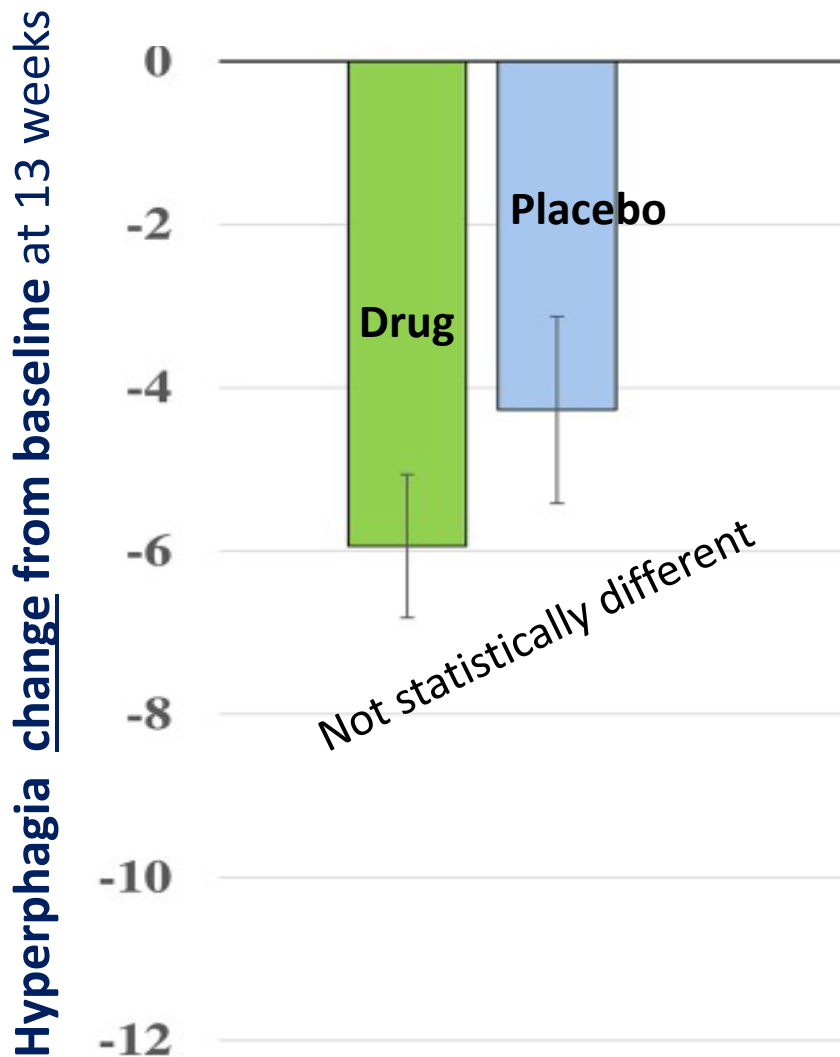
CONCEPTS	DEFINITION
Randomized placebo-controlled clinical trial	Trial has been designed well enough so as to be able “to distinguish the effect of a drug from other influences , such as spontaneous change..., placebo effect, or biased observation”
Placebo	A placebo is an inactive drug or treatment used in a clinical trial .
Open label	A trial in which no blinding is used and all parties are aware of the treatment groups is called open label or unblinded
Primary endpoint	Primary outcome measured by a clinical trial to assess the effect of a drug. Primary endpoints are required for approval by regulatory agency .
Secondary endpoint(s)	Secondary endpoints are measures that may support the primary endpoints or demonstrate additional clinical effects .



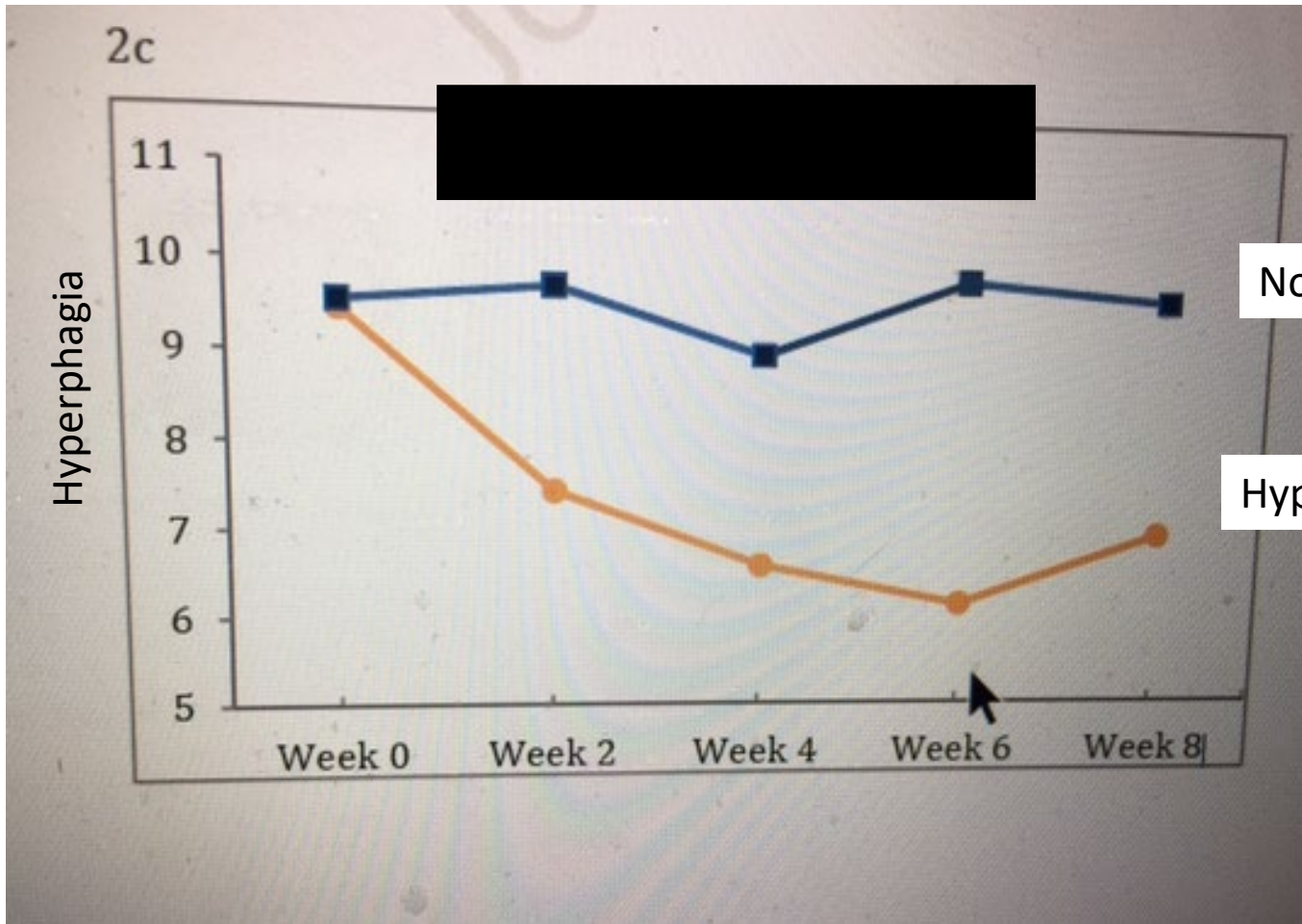
Why placebo-controlled trials are important?



Why placebo-controlled trials are important?



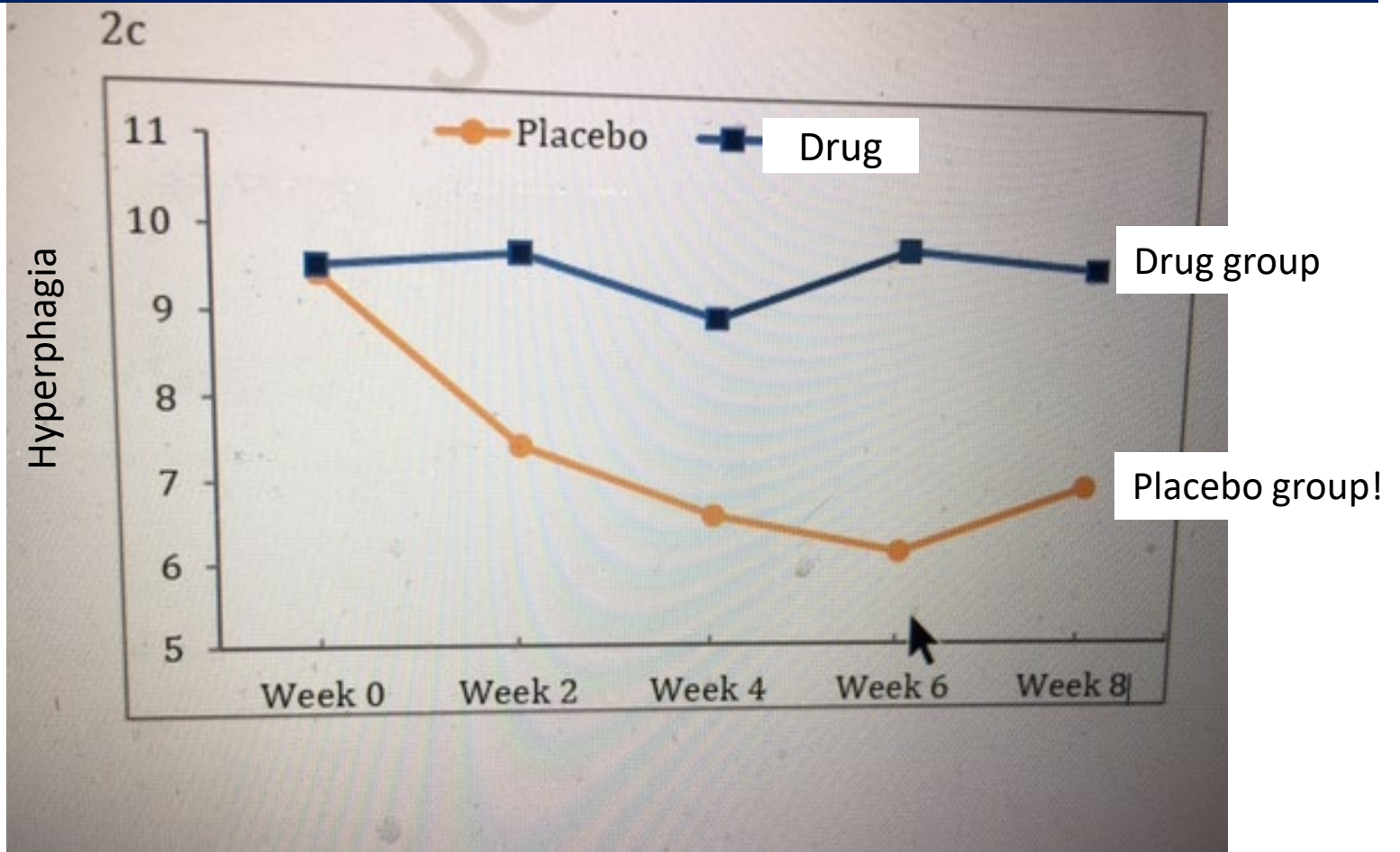
Why placebo-controlled trials are important?



No effect

Hyperphagia ↘

Why placebo-controlled trials are important?



The critical role of patients and caregivers in clinical trials

- Patient-centric design of clinical trials
- Representativity (age, symptoms, ethnicity, socio-economic) of the community in trials
- Design of meaningful clinical trial endpoints
- Gather evidence-based data on what matters to the community
- Involvement in the post-marketing period



Thank you!


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Additional Slides

Clinical trials phases for new drugs

Drug tested

Drug approved



Phase 1		Phase 2		Phase 3		Phase 4	
SAFETY and DOSE SELECTION		SAFETY/ EFFICACY		EFFICACY/ SAFETY		REAL-WORLD EVIDENCE	
10-20 patients		10-50 patients		100-300 patients		up to thousands patients	
Short exposure		Short exposure		Longer exposure (2 months-1 year)		>1 year	
First study in humans							
Mutiple doses are tested : what is the dose where you see an effect, and where side effects appear?		Efficacy: How well drug works?		Efficacy: is the drug effective in comparison to placebo, do clinical benefits outweigh the risk?		Long term effectiveness: how well the medicine works when used in the real-world	
Safety: How well is the drug tolerate? Does it distribute to the body? How long does the drug stay in the body?		Safety: expand safety assessments on the highest dose tolerated		Must reach predetermined "endpoints"		Collect additional information about side-effects and safety, long-term risks and benefits	

Regulatory incentives for orphan drug development

	United States	Japan	Australia	European Union
Legislation date	1983 Orphan Drug Act	1993	1997/8	2000
Prevalence^a	Fewer than 200,000 (6.25 per 10,000)	Fewer than 50,000 (4 per 10,000)	Fewer than 2,000 (1.1 per 10,000)	Fewer than 5 per 10,000
Market exclusivity	7 years	Re-examination period extended from 4 to 10 years	None	10 years
Fee waiver	Yes	No	Yes	At least partial

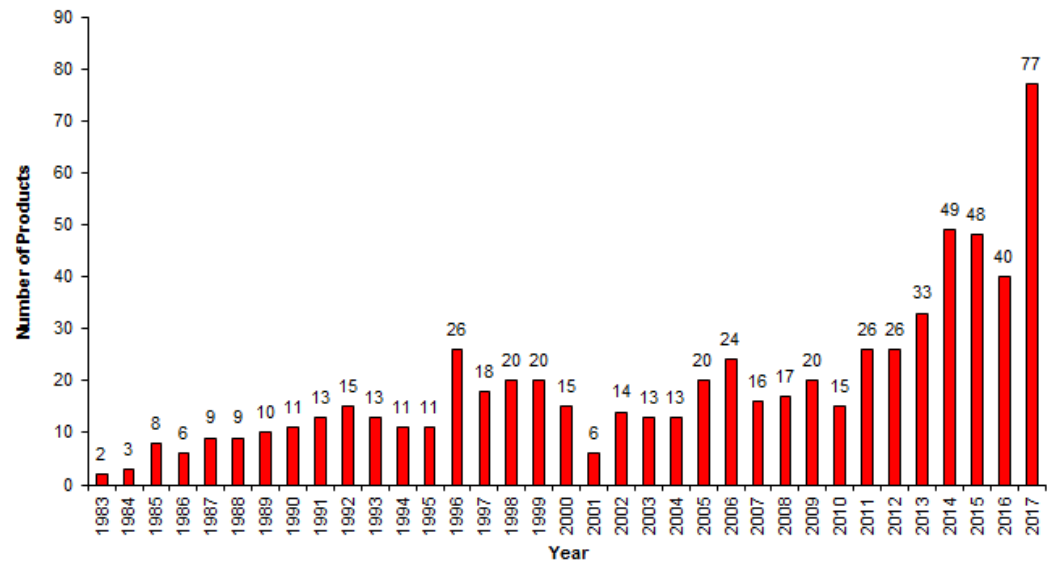
Protocol assistance

Tax credits

Accelerated approval strategies

(Priority Review, Breakthrough Therapy, Accelerated Approval, Fast Track)

Number of FDA approved orphan products by year



Roadmap to **PATIENT-FOCUSED OUTCOME MEASUREMENT** in Clinical Trials

Understanding the Disease or Condition **1**

A. Natural history of the disease or condition

- Onset/Duration/Resolution
- Diagnosis
- Pathophysiology
- Range of manifestations

B. Patient subpopulations

- By severity
- By onset
- By comorbidities
- By phenotype

C. Health care environment

- Treatment alternatives
- Clinical care standards
- Health care system perspective

D. Patient/caregiver perspectives

- Definition of treatment benefit
- Benefit-risk tradeoffs
- Impact of disease

Conceptualizing Treatment Benefit **2**

A. Identify concept(s) of interest (COI) for meaningful treatment benefit, i.e., How a patient:

- Survives
- Feels (e.g., symptoms)
- Functions

B. Define context of use (COU) for clinical trial:

- Disease/Condition entry criteria
- Clinical trial design
- Endpoint positioning

C. Select clinical outcome assessment (COA) type:

- Patient-Reported Outcome (PRO)
- Observer-Reported Outcome (ObsRO)
- Clinician-Reported Outcome (ClinRO)
- Performance Outcome (motor, sensory, cognition)

Selecting/Developing the Outcome Measure **3**

A. Search for existing COA measuring COI in COU:

- Measure exists
- Measure exists but needs to be modified
- No measure exists
- Measure under development

B. Begin COA development

- Document content validity (qualitative or mixed methods research)
- Evaluate cross-sectional measurement properties (reliability and construct validity)
- Create user manual
- Consider submitting to FDA for COA qualification for use in exploratory studies

C. Complete COA development:

- Document longitudinal measurement properties (construct validity, ability to detect change)
- Document guidelines for interpretation of treatment benefit and relationship to claim
- Update user manual
- Submit to FDA for COA qualification as effectiveness endpoint to support claims

