





## Pragmatic trials in the real world: DaRe2THINK – a novel approach to healthcare-embedded clinical trials

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#### Medicines & Healthcare products Regulatory Agency

Clinical Practice Research Datalink (CPRD) is a real-world research service supporting retrospective and prospective public health and clinical studies.

The National Institute for Biological Standards and Control (NIBSC) plays a leading national and international role in assuring the quality of biological medicines and diagnostics. The Medicines and Healthcare products Regulatory Agency regulates medicines, medical devices and blood components for transfusion in the UK.















## What is CPRD?





UK Government health data research service supporting observational & interventional public health and clinical studies by academics, industry and regulators worldwide

Services based on > 30 years of collecting longitudinal primary care EHR across UK

60 million

Patients for observational studies

16 million

Patients for trials & clinical studies

Median 10
years followup
25% 20 years

follow-up

**GP Network** 

1 in every 5 GP practices in UK

Daily data collection



25% UK population coverage

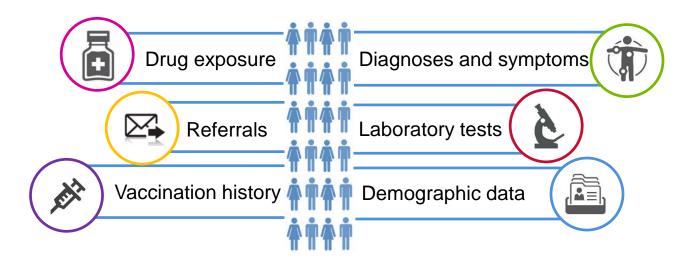
Representative data





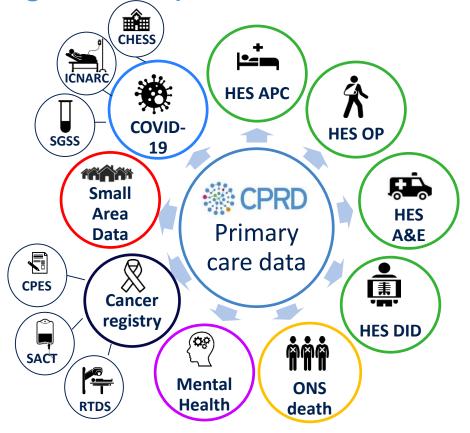
## Collect all coded data in EHR except patient identifiers

#### Over 14 billion consultations





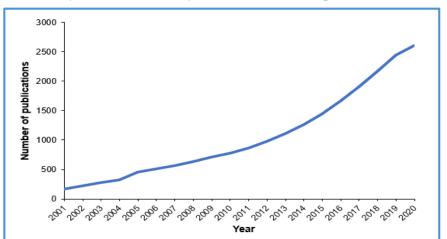
## Extending the scope of research through linkage





## Impact of CPRD data on public health

#### 2600 peer-reviewed publications using CPRD data



Drug safety

Drug use

Disease epidemiology

Incidence/prevalence

Care delivery

PDS Pharmacoepidemiology & Drug Safety

Papers

iginal Report

Use of selective serotonin reuptake inhibitors in pregnancy and cardiac malformations: a propensity-score matched cohort in CPRD†



#### **British Journal of General Practice**

bringing research to clinical practice

https://bjqp.org/content/69/684/e462

Use of multiple inflammatory marker tests in primary care: using Clinical Practice Research Datalink to evaluate accuracy



https://bmjopen.bmj.com/c ontent/8/9/e022404

Are noise and air pollution related to the incidence of dementia? A cohort study in London, England



## The NEW ENGLAND JOURNAL of MEDICINE

N Engl J Med 2016; 374:1145-1154 | March 24, 2016 | DOI: 10.1056/NEJMoa1506115

A Multicenter Observational Study
of Incretin-based Drugs and Heart Failure



Antidepressant treatment and the risk of fatal and non-fatal self harm in first episode depression: nested case-control study

the**bm**j

**RESEARCH** 

Safety of pertussis vaccination in pregnant women in UK: observational study

THE LANCET

MMR vaccination and pervasive developmental disorders: a case-control study

FDA

Suspected Cancer Clinical Guidance





## COVID-19 studies using CPRD data

## Pharmacological risk factors and safety of emergent treatment for COVID-19

N Engl J Med. 2020 Jul 23:383(4):397-400. doi: 10.1056/NEJMc2005396. Epub 2020 May

Association between Angiotensin Blockade and Incidence of Influenza in the United Kingdom

Sheng-Chia Chung 1, Rui Providencia 2, Reecha Sofat 3

Antihypertensive Medications and COVID-19 Diagnosis and Mortality: Population-based Case-Control Analysis in the United Kingdom

Emma Rezel-Potts, Abdel Douiri, Phil J Chowienczyk, Martin C Gulliford doi: https://doi.org/10.1101/2020.09.25.20201731

Safety of hydroxychloroquine, alone and in combination with azithromycin, in light of rapid wide-spread use for COVID-19: a multinational, network cohort and self-controlled case series study

Dennifer C.E. Lane, James Weaver, Kristin Kostka, Talita Duarte-Salles, Maria Tereza F.Abrahao, Heba Alghoul, Osaid Alser, Thamir M Alshammari, Patricia Biedermann, Edward Burn, Paula Casajust, Mitch Conover, Aedin C. Culhane, Alexander Davydov, Scott L. DuVall, Dmitry Dymshyts, Sergio Fernández Burk, Kristina Fister Jüll Hardin Laura Hester George Hriscask Seamus Kent Sain Khosta. Propos Kolovos

#### Patient characteristics, risk factors and predictors of COVID-19

COVID-19 in Great Britain: epidemiological and clinical characteristics of the first few hundred (FFI00) cases: a descriptive case series and case control analysis

- O Nicola L Boddington, O Andre Charlett, O Suzanne Elgohari, O Jemma L Walker, O Helen Mcdonald,
  Chloe Byers, O Laura Coughlan, O Tatiana Garcia Vilaplana, O Rosie Whillock, O Mary Sinnathamby,
  Nikolaos Panagiotopoulos, Louise Letley, O Pauline MacDonald, O Roberto Vivancos, O Obaghe Edeghere,
  O Joseph Sinigleton, O Emma Bennett, O Daniel J Grint, O Helen Strongman, O Kathryn E Mansfield,
  Christopher Rentsch, O Caroline Minassian, O lan J Douglas, O Rohini Mathur, O Maria Peppa,
  Simon Cottrell, O Jim McMenamin, O Maria Zambon, O Mary Ramsay, O Gavin Dabrera, O Vanessa Saliba,
  O lamie Lopez Bernal
- doi: https://doi.org/10.1101/2020.05.18.20086157



Providence estimates in 2019 and 2014, using electronic health records (Data Collection), London School of Higgere & Trapical Medicine
Wanddown Hospital Collection (1) 1791/10474, 0000 (833).

#### Health service use during the COVID-19 pandemic

## Estimating excess 1-year mortality associated with the COVID-19 pandemic according to underlying conditions and age: a population-based cohort study

Amitava Banerjee, Laura Pasea, Steve Harris, Arturo Gonzalez-Izquierdo, Ana Torralbo, Laura Shalicross, Mahdad Noursadeghi, Deenan Pillay, Neil Sebire, Chris Holmes, Christina Pagel, Wai Keong Wong, Claudia Langenberg, Bryan Williams, Spiros Denaxas, Harry Hemingway

Characteristics and outcomes of 627 044 COVID-19 patients with and without obesity in the United States, Spain, and the United Kingdom

## Health outcomes among patients with COVID-19

Estimating excess mortality in people with cancer and multimorbidity in the COVID-19 emergency

O Alvina G Lai, Laura Pasea, Amitava Banerjee, Spiros Denaxas, Michail Katsoulis, Wai Hoong Chang, Bryan Williams, Deenan Pillay, Mahdad Noursadeghi, David Linch, Derralynn Hughes, Martin D Forster, Clare Turnbull, Natalie K Fitzpatrick, Kathryn Boyd, Graham R Foster, Matt Cooper, Monica Jones, Kathy Pritchard-Jones, Richard Sullivan, Geoff Hall, Charlie Davie, Mark Lawler, Harry Hemingway

doi: https://doi.org/10.1101/2020.05.27.20083287

Now accepted for publication in BMJ Open

Diagnosis of physical and mental health conditions in primary care during the COVID-19 pandemic: a retrospective cohort study

Richard Williams, David A Jenkins, Darren M Ashcroft, Ben Brown, Stephen Campbell, Matthew J Carr, Sudeh Cheraghi-sohi, Navneet Kapur, Owain Thomas, Roger T Webb, Niels Peek

Impact of COVID-19 on the diagnoses, HbA1c monitoring and mortality in people with type 2 diabetes: a UK-wide cohort study involving 13 million people in primary care

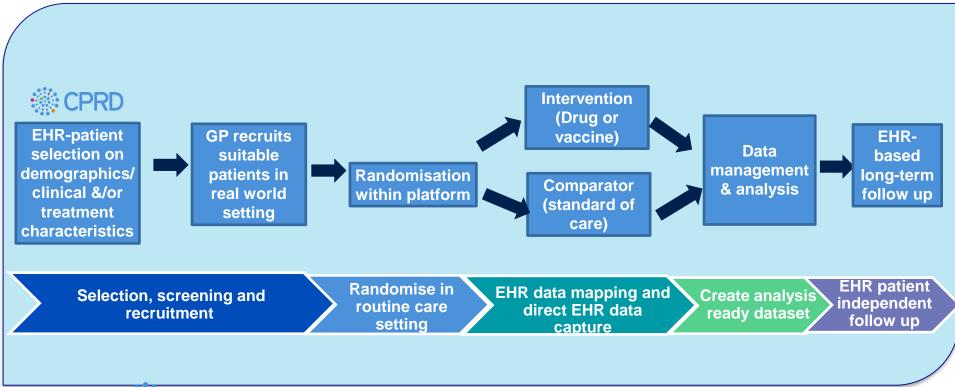
Matthew J. Carr, Alison K. Wright, Lalantha Leelarathna, Hood Thabit, Nicola Milne, Naresh Kanumilli, Darren M.Ashcroft, Martin K. Rutter

doi: https://doi.org/10.1101/2020.10.25.20200675



doi: https://doi.org/10.1101/2020.09.02.20185173

## EHR-enabled trial management in routine primary care

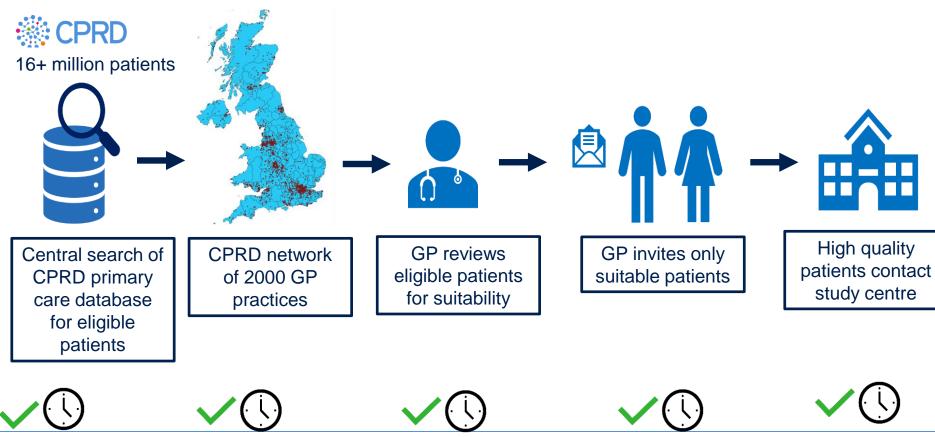




Interventional Research Services Platform

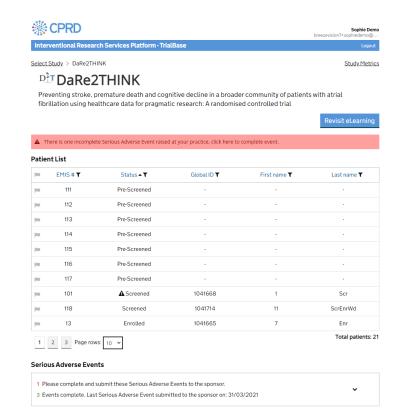


## EHR-enabled patient location and recruitment across the UK





## **IRSP Platform Interface**



Select Study > DaRe2THINK > Demo Patient - Patient Journey > Enrolment Patient: Demo Patient **Enrolment - Enrolment & Randomisation Enrolment & Randomisation** Enrolled patients will be randomised to either receive a direct oral anticoagulant (DOAC) or to receive No Intervention (usual care) in a 1:1 Randomisation Intervention No Intervention DOAC therapy prescribed Usual care (as per local CCG guidance) (no anticoagulant therapy) If randomised to receive a DOAC, you will be expected to prescribe apixaban, dabigatran, edoxaban or rivaroxaban in line with the clinical requirements for the patient and the regional prescription guidelines of your local Clinical Commissioning Group (CCG). If randomised to receive No Intervention, you should not prescribe an anticoagulant to the patient. Please continue to the next page to view the treatment group the patient has been assigned to. Form completed

## **CPRD**

Randomise

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Dipak Kotecha, Professor of Cardiology & Consultant Cardiologist













#### **Disclosures**

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Advisory board / Speaker fees – Bayer, Amomed, Myokardia, Atricure.

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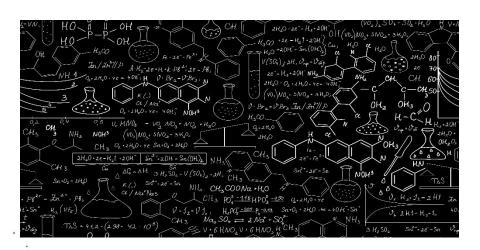
#### Need for new trial approaches





#### **Challenges of conventional RCTs...**

Prolonged design phase
Over 50% fail to recruit
Most require amendment
80% delayed



#### **Duplication of effort...**

...especially follow-up visits and outcomes which are recorded within electronic health records (EHRs)

#### Need for new trial approaches





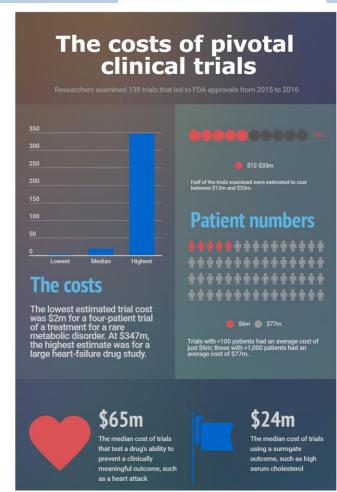
#### Generalisability with the 'real' population...

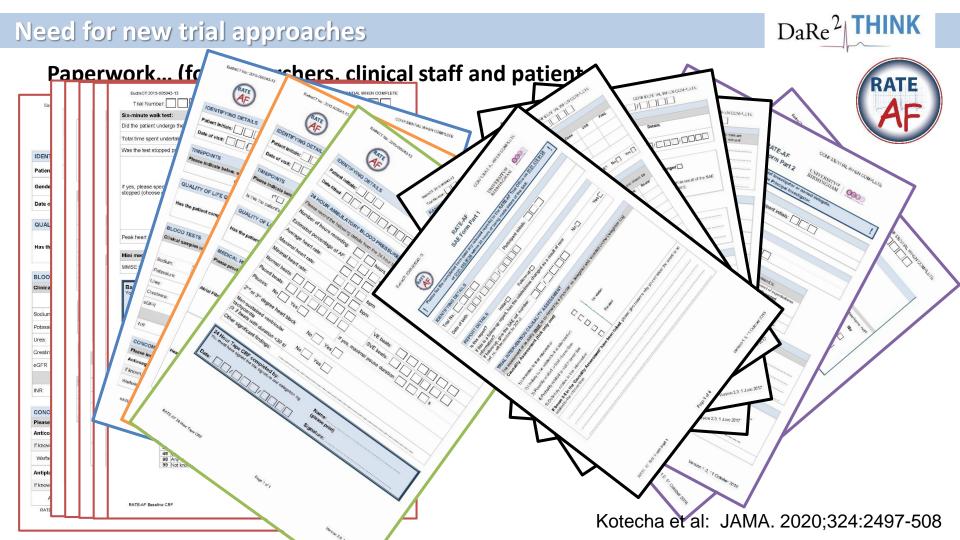
Source	MERIT-HF RCT	PARADIGM -HF RCT	SWEDE-HF cohort
Year	1997-8	2009-12	2000-12
Mean age	64 years	64 years	72 years
Women	22%	22%	31%
AF	17%	37%	50%

High and increasing cost...

Moore: JAMA Intern Med. 2018;178:1451-1457

Infographic: outsourcingpharma.com







### Data-driven EHR trials.... pipe dream ?

• b

• c



Indicates data-driven automated process

## Automated screening of health record:

#### Inclusion criteria:

#### **Exclusion criteria:**

- x
- y



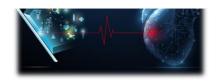
Targeted recruitment of sites and patients



Screening before and during trial







healthcare DAta for pragmatic clinical REsearch



Preventing stroke, premature death and cognitive decline in a broader community of patients with atrial fibrillation using healthcare data for pragmatic research: A randomised controlled trial

#### Clinicaltrials.gov NCT04700826 EudraCT: 2020-005774-10











www.birmingham.ac.uk/d2t













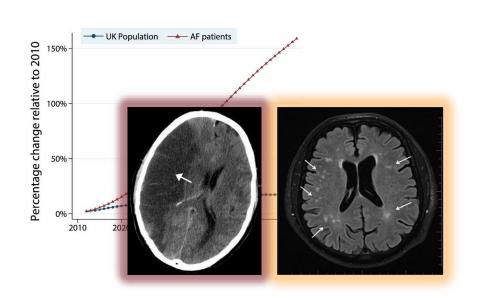




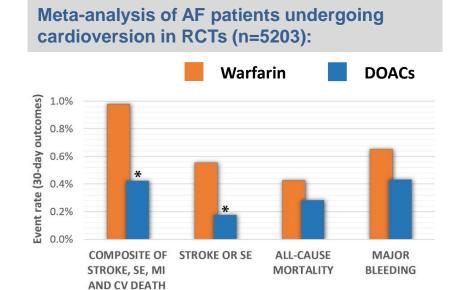


\* p<0.05

#### Why study atrial fibrillation?



#### Better therapy to prevent stroke and clots?



DaRe2THINK will test the effectiveness of starting DOACs age 60-73 with low to intermediate risk of stroke

Lane... Kotecha: J Am Heart Assoc. 2017;6:e005155

Kotecha et al: J Am Coll Cardiol. 2018;72:1984-1986

#### DaRe2THINK EHR-embedded approach



SCREENING

ENROLMENT

RANDOMISATION

FOLLOW-UP

Automated screening of CPRD for selection criteria across >12 million NHS patients at study start Weekly CPRD updates to notify each General Practice of potentially eligible participants Opportunistic screening at participating GPs of patients seen in daily practice UNIVERSITY<sup>OF</sup> BIRMINGHAM





Eligible patients given the Participant Information Sheet and invited to enrolment visit

GP / Primary Care research team go through trial information and obtain informed consent

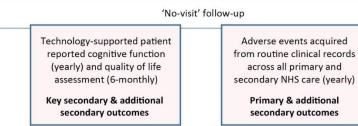


Remote e-consent

Phone/video consult
to enrol patients

No visits

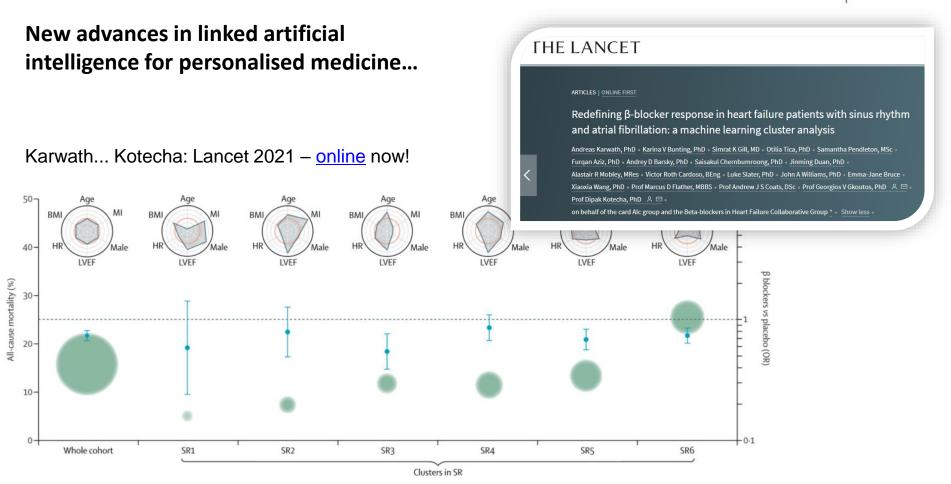
# Intervention arm: DOAC therapy prescribed (as per local CCG guidance) Control arm: Usual care (no anticoagulant therapy)





#### Better patient selection pre and post-recruitment





#### Public engagement to design the right trials



Essential to bring patients and the public into the design process for this next generation of clinical trials...

- Social license for use and linkage of EHR data
- Patient-focused approaches
- Better clinical research and dissemination

