

Bridging efficacy to effectiveness: The IMI GetReal project

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Co-leads WP4 (Evidence synthesis and predicting effectiveness)



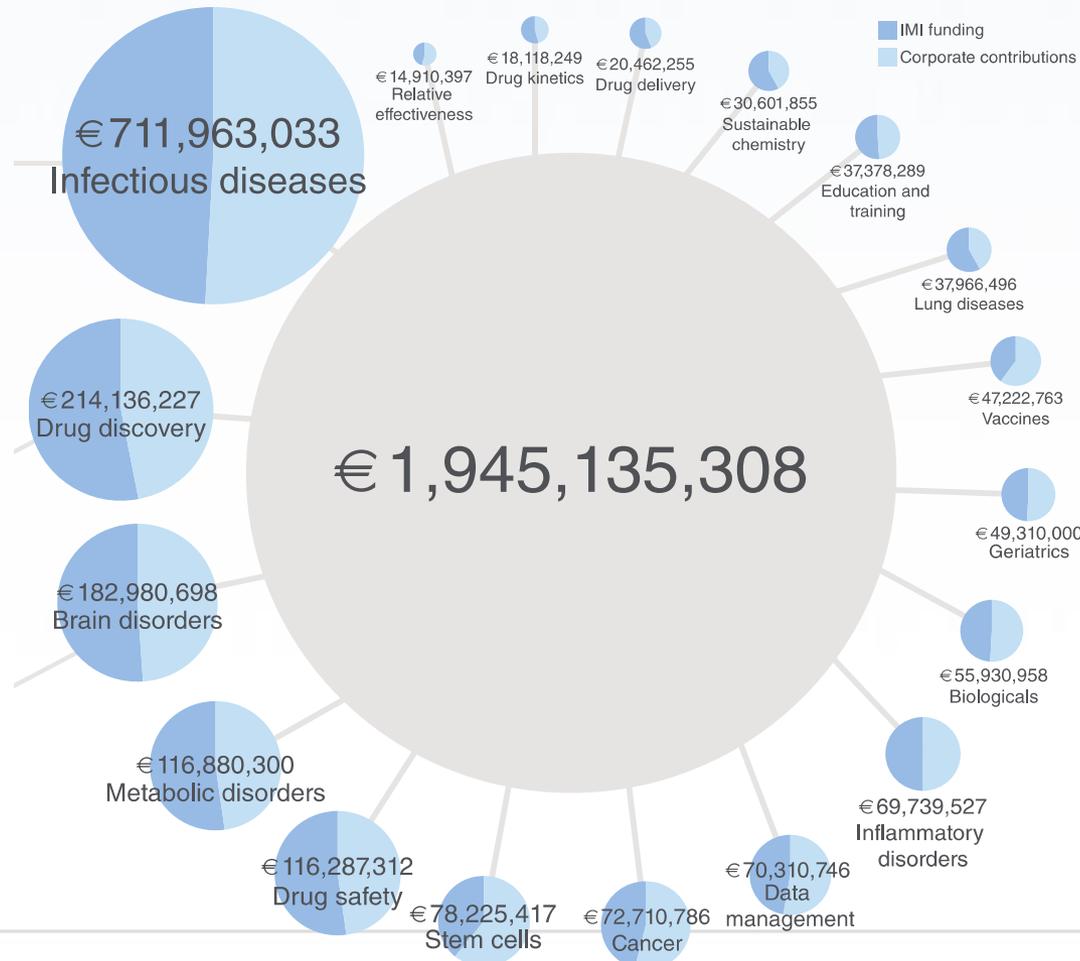
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- The views expressed herein represent those of the presenter and do not necessarily represent the views or practices of Amgen or the views of the general Pharmaceutical Industry.

Innovative Medicines Initiative: *Joining Forces in the Healthcare Sector*



Areas of funding



Nat Med 2014;20:5.



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www.imi.europa.eu

€711,963,033
Infectious diseases

€214,136,227
Drug discovery

€14,910,397
Relative effectiveness

€18,118,249
Drug kinetics

€20,462,255
Drug delivery

€30,601,8...
Sustainable chemistry

€1,945,135,308

Nat Med 2014;20:5.

Background: GetReal

CRITICAL QUESTIONS REQUIRING JOINT APPROACH

Phase 3a	Phase 3b	Conditional Licensing	Conditional Access	Phase IV
“optimise”	“supplement”	?	?	“commit”

R & D decision

HTA decision

- What combination of possible studies will provide the most valuable information to customers controlling access - in order to maximise the probability of positive access outcomes ?
- What is the cost and feasibility of the study options pre-launch and what would be required as commitments post launch?
- How do options reconcile with the regulatory process?

- With all the available data, would we predict an improvement in patient outcome or care pathway efficiency over and above current practice in my healthcare system - with a reasonable level of certainty?
- Would we accept the uncertainty for a period of time while waiting for studies to complete or for new studies to be run?

Background: GetReal

CRITICAL QUESTIONS REQUIRING JOINT APPROACH

Phase 3a	Phase 3b	Conditional Licensing	Conditional Access	Phase IV
“optimise”	“supplement”	?	?	“commit”

In recent years there has been considerable attention paid to the post-authorisation evaluation of treatments in real world clinical practice in areas such as study design and data-analytical methodology for assessing relative effectiveness and use of registries and electronic healthcare records data.

It may be possible to improve the relevance and value (in terms of predicting effectiveness) of evidence available at initial market authorisation by incorporating these techniques into pre-authorisation drug development.

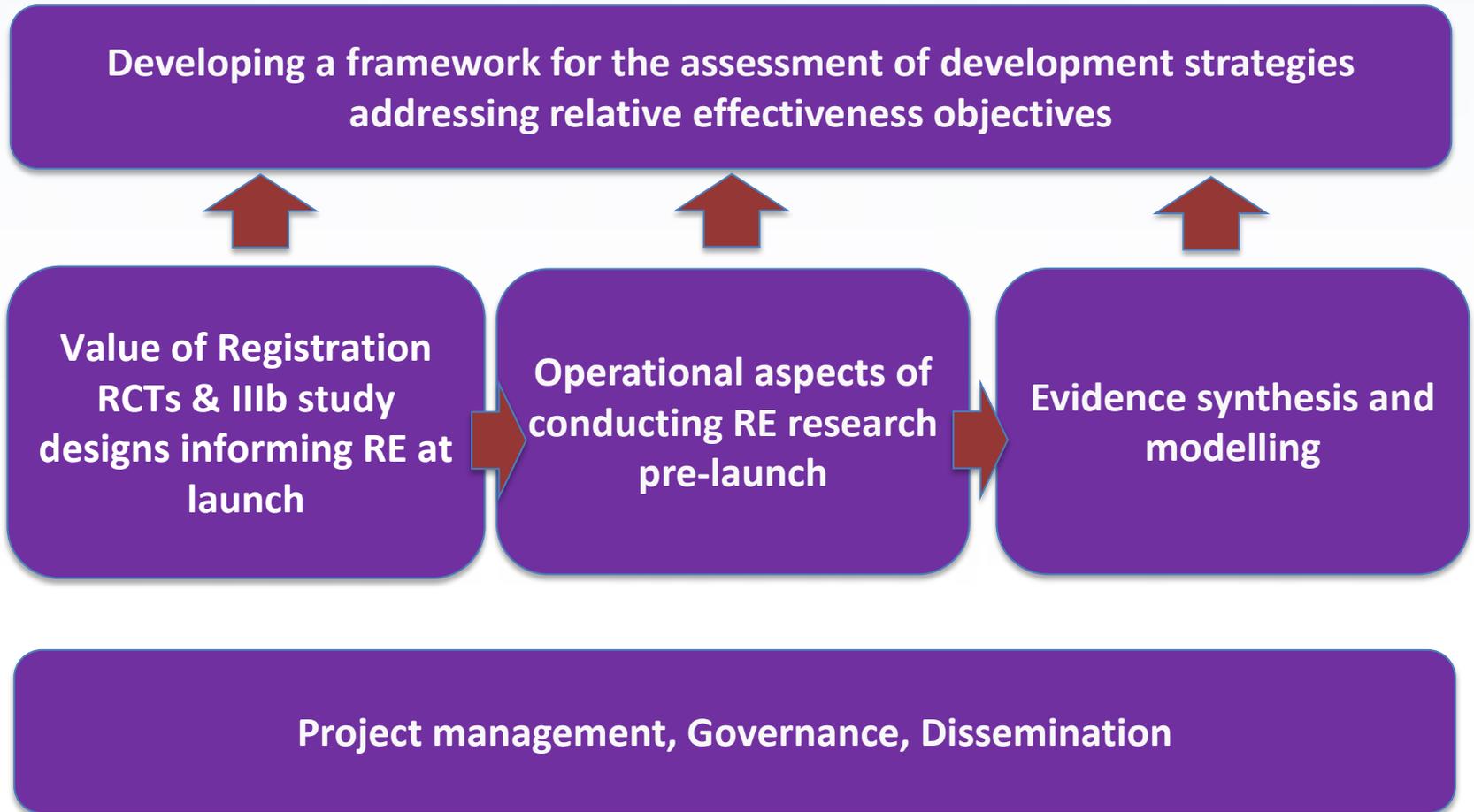
GetReal: Project Vision

For pharmaceutical R&D and healthcare decision makers to better understand how real-world data and analytical techniques can be used to improve the relevance of knowledge generated during development, e.g., through innovation in clinical trial design. This can contribute to the knowledge base, particularly to inform clinical decision making and improve the efficiency of the R&D process.

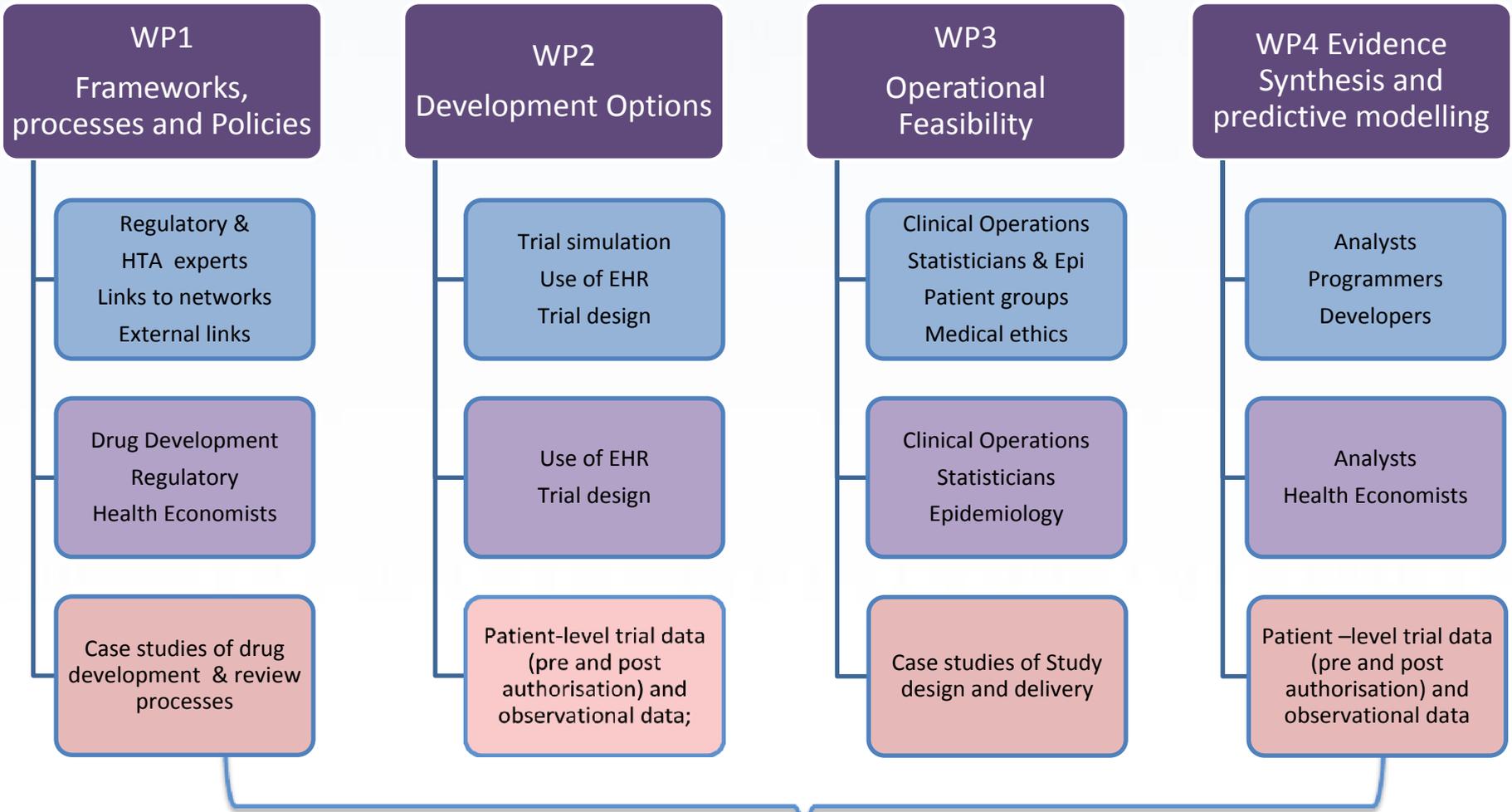
Lasting impact of the project

To provide a methodological and analytical framework that informs policy and process evolution beyond the life of the project and at an international level; and to provide tools, techniques and training that ensure that the potential of real world data can be exploited in drug development.

Architecture of GetReal



Integration between work packages



External expertise,
Industry expertise,
Background

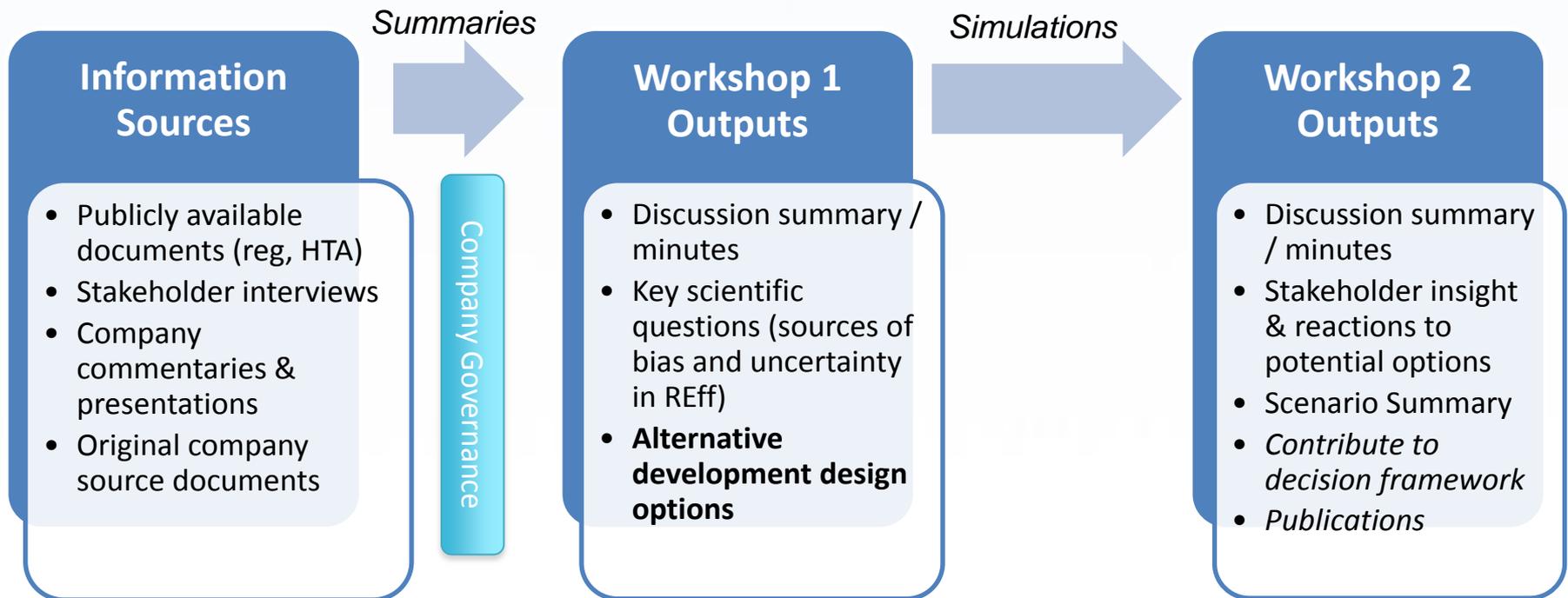


WP5
Project Management and co-ordination

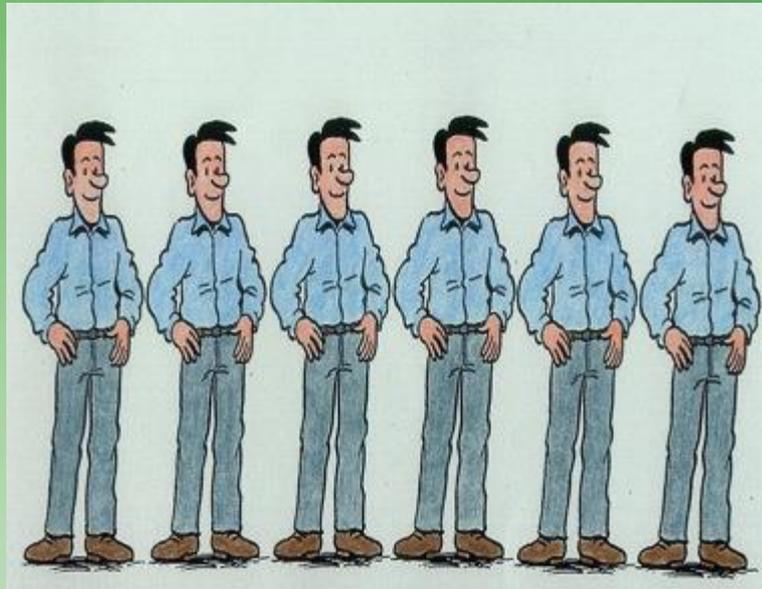
Initiative Joint Undertaking under grant
the European Union's Seventh Framework

WP1: Case study approach

Development strategy redesign workshops



WP 2: better understand the gap (drivers) between efficacy & effectiveness



**Clinical trials
(efficacy)**

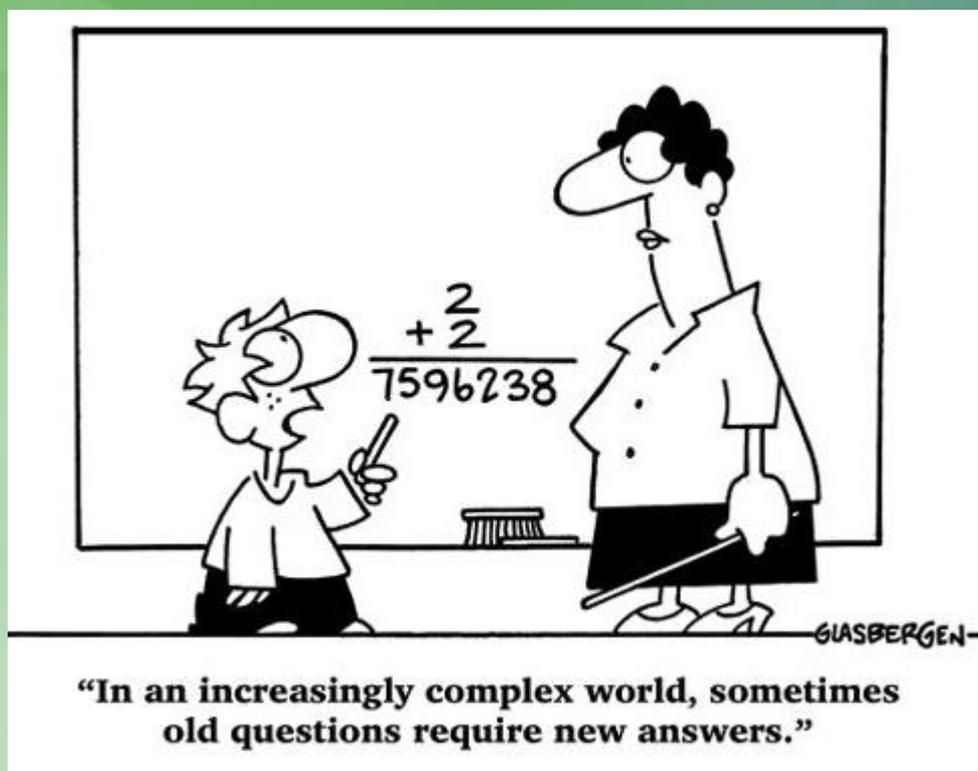


**Real world
(effectiveness)**

Examples of WP2 activities

Identification of Drivers of Effectiveness	Assessment of design parameters and analytical tools to better anticipate effectiveness
Efficacy to Effectiveness gaps (Literature review → Publication)	Phase 2/3 trials that tried to address effectiveness (Literature review)
Exploring case studies in Schizophrenia, Anti-hypertensives, Hogkins Lymphoma,	Use of simulation studies to assess analytical tools used in different types of trials (e.g. pre and post launch clinical trials, observational studies, pragmatics trials)

WP3: overcoming practical barriers in undertaking pre-launch RE research.



WP3 focus on peri-launch relative effectiveness studies and pragmatic trial designs

Aim:

Identify operational challenges
(per design feature)

Analyse impact on practical feasibility
of PT, acceptability, generalizability
and bias

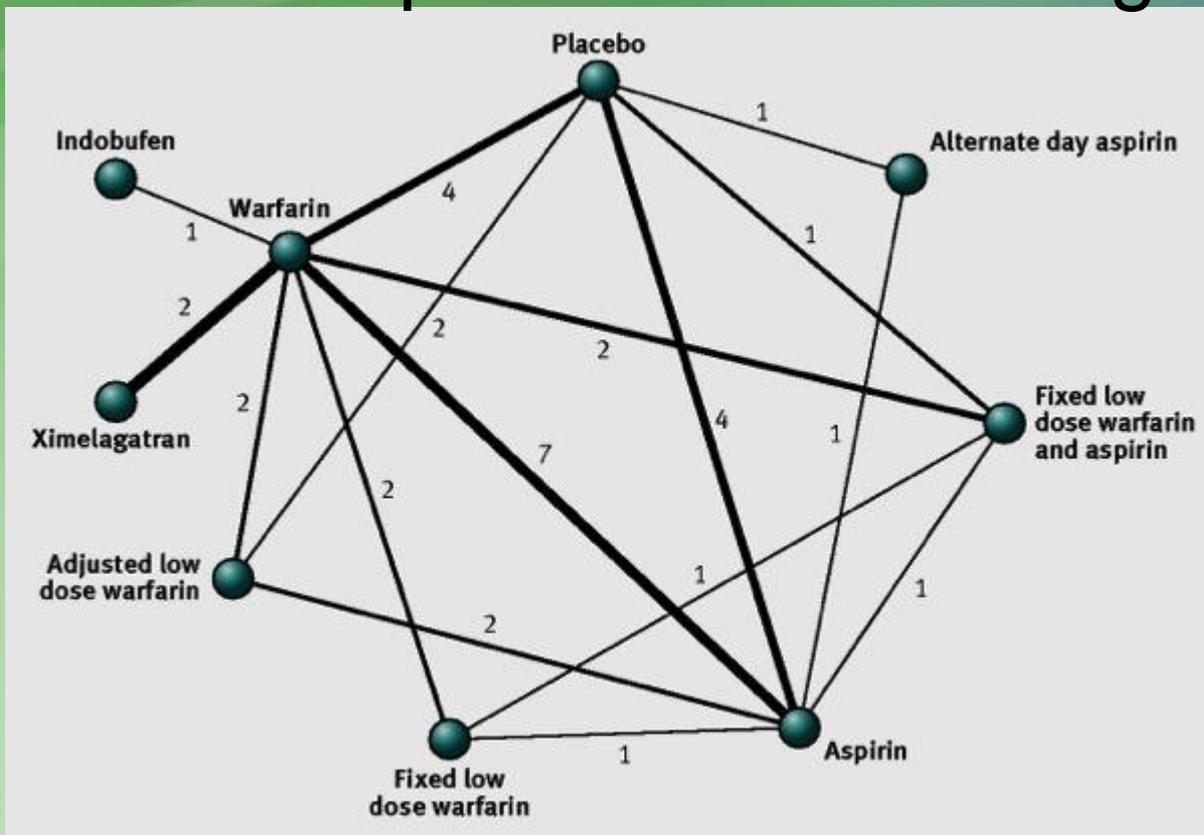
Offer solutions for operational
challenges (where possible)

Help PT designers to be aware of
consequences of their choices &
maximize the pragmatic nature of the
study design while ensuring
operational feasibility

Key activities:

- Literature reviews & stakeholder interviews to identify operational challenges
- Create a structure which describes & links design features – operational challenges – implications & interrelationships in a usable way
- Develop practical solutions to specific operational challenges
- Create a toolbox which brings all knowledge together

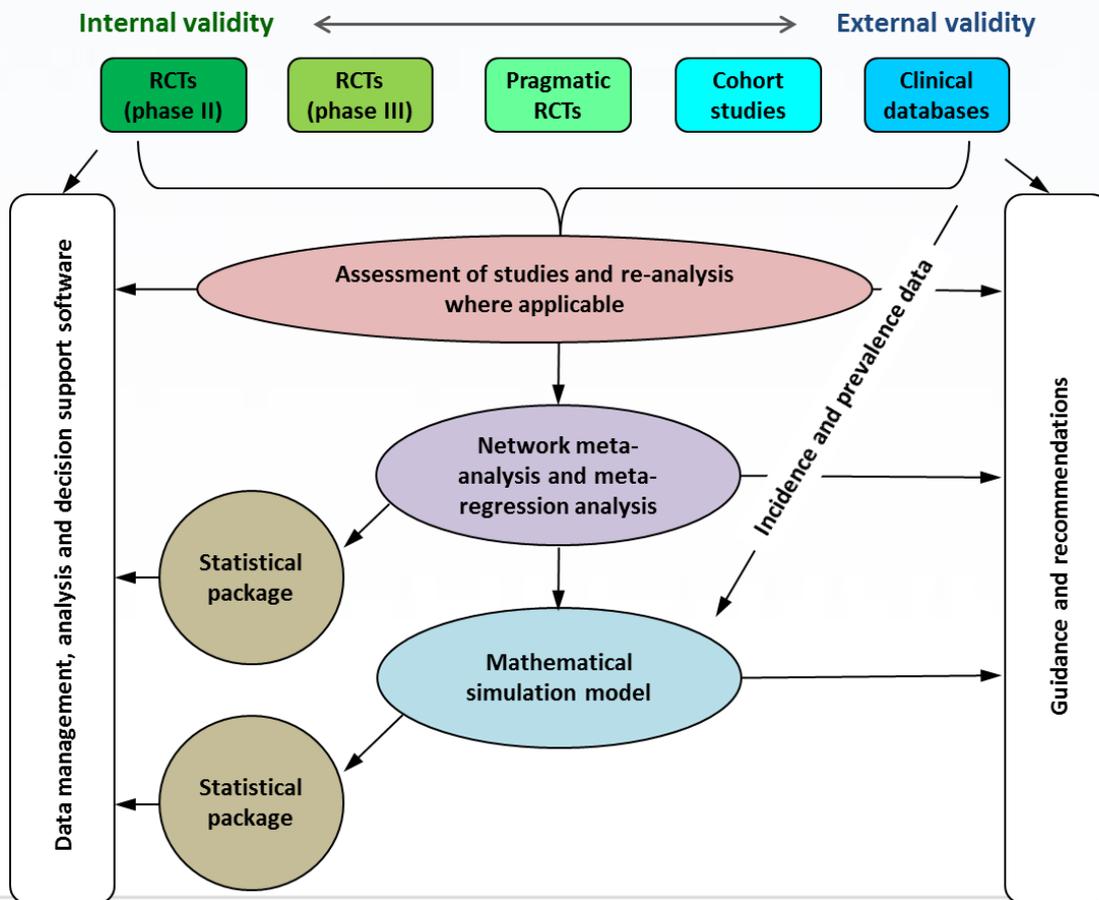
WP4: Promote best practice in evidence synthesis and predictive modelling



WP4 Developing a predictive model for relative effectiveness

Flow of work

Activities



- 1) Identify suitable case-studies
- 2) Assess patient characteristics and risk of bias
- 3) Re-analyze individual patient data if available
- 4) Obtain best estimates of RE for different patient groups
- 5) Predict RE and absolute benefits and harms in different patient groups
- 6) Develop user-friendly software
- 7) Develop guidance and recommendations

WP4 Best practices in evidence synthesis and predictive modelling



+ Real-Life Data in
Drug Development

Evidence synthesis and mathematical modelling for assessing treatment effects across populations: current practice and recommendations

GetReal methods review group

Mark Belger¹, Silvie Bozzi², Maximo Carreras³, Thomas Debray⁴, Orestis Efthimiou⁵, Matthias Egger^{6*}, Christine Fletcher⁷, Rolf H. H. Groenwold⁴, Sandro Gsteiger⁶, Noemi Hummel⁶, Gablu Kilcher⁶, Brice Kitio-Dschassi², Amr Makady⁸, Brigitta Monz⁹, Karel G.M. Moons⁴, Klea Panayidou⁶, Johannes B. Reitsma⁴, Georgia Salanti⁵, Aijing Shang³, Sven Trelle⁶, Gert van Valkenhoef¹⁰

WP4 have generated 3 publications of best practices in evidence synthesis and predictive modelling

Methods for network meta-analysis: a systematic review

Orestis Efthimiou¹, Thomas P. A. Debray², Gert van Valkenhoef³, Sven Trelle^{4,5}, Klea Panayidou⁴,
Karel G. M. Moors², Johannes B. Reitsma², Aijing Shang⁶ and Georgia Salanti¹ on behalf of GetReal
methods review group¹

Methods for Individual Participant Data meta-analysis of relative treatment effects: a systematic review

Thomas P. A. Debray¹, Rolf H. H. Groenwold¹, Gert van Valkenhoef², Orestis Efthimiou³, Noemi
Hummel⁴, Karel G. M. Moors¹, Johannes B. Reitsma¹ on behalf of GetReal methods review group¹

1 accepted and 2 under review with
Research Synthesis Methods

Mathematical modelling for predicting real world effectiveness from RCT effi- cacy data: a systematic review

Klea Panayidou¹, Sandro Gsteiger¹, Gablu Kilcher¹, Matthias Egger^{1*}, Maximo
Carreras², Orestis Efthimiou³, Thomas Debray⁴, Sven Trelle⁵, Noemi Hummel¹
on behalf of the GetReal methods review group

Examples of methodology being explored in WP4 case studies – evidence synthesis

IPD network meta-analysis: one-stage or two-stage?

Thomas Debray, Ewoud Schuit, Orestis Efthimiou, Jeroen Jansen, John Ioannidis, Karel Moons on behalf of the IMI Getreal Consortium

Background: Individual participant data meta-analysis (IPD-MA) can be conducted to compare the relative efficacy of multiple treatments. It is currently unclear whether a so-called one-stage or two-stage approach is preferred, and which type of model should be implemented.

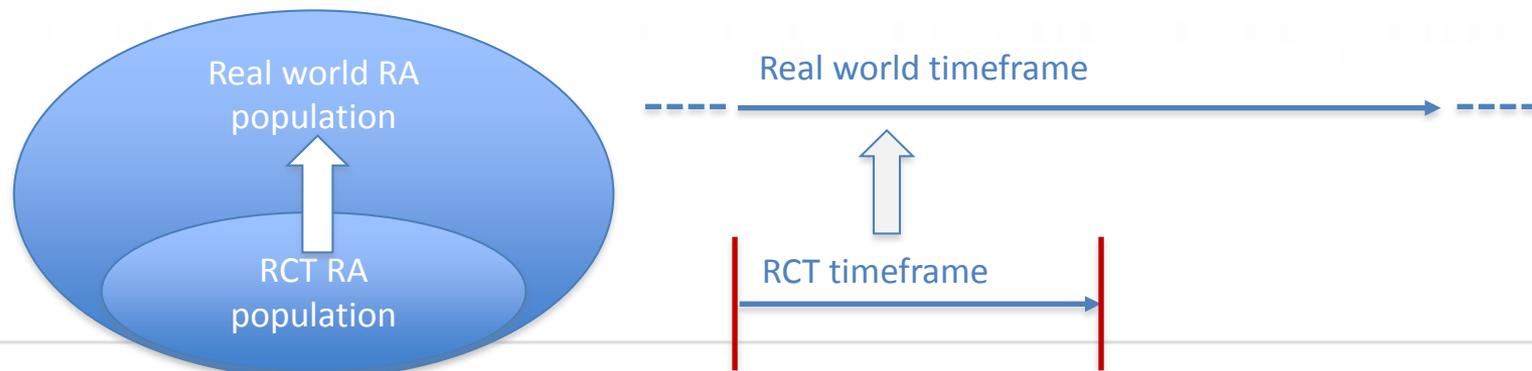
Methods: We describe and compare 3 approaches for IPD-MA of multiple treatments: a one-stage network meta-analysis (NMA) approach, a two-stage NMA approach using arm-level evidence and a two-stage NMA approach using trial-level evidence.

Examples of methodology being explored in WP4 case studies – evidence synthesis (cont.)

- To **jointly synthesize** evidence on **relative treatment effects** coming from RCTs as well as observational studies.
- For this we will **assess existing methodology** and **develop new methods** for combining IPD and AD from randomized trials as well as IPD from observational studies in a network meta-analysis (NMA).

Examples of methodology being explored in WP4 case studies – predictive modelling

- Assessment and description of possible efficacy-effectiveness gaps, i.e. differences in the outcomes observed in clinical practice as compared to randomized controlled trials (RCTs)
- Combination of results from different study and data types, and use of mathematical modelling to predict real-world effectiveness
 - generalization of results from RCTs
 - description and prediction of treatment effects in particular subgroups of patients that may be non- or under-represented in RCTs



Examples of methodology being explored in WP4 case studies – predictive modelling (cont.)

- Approaches identified in systematic review
 - Micro-simulation model
 - Discrete event simulation model
- «Simple» prediction models, using
 - covariate-by-treatment interactions from RCTs, and
 - differences in covariate distributions in RCTs vs. observational studies, to derive treatment effect estimates in real-world population
- Bayesian hierarchical meta-regression model
 - Combine all available evidence in one model: observational and RCT, AD and IPD

WP4 review of evidence synthesis and predictive modelling software

Meta-analysis user interfaces:

1. ADDIS 1.x <http://drugis.org/software/addis1/>
2. RevMan <http://tech.cochrane.org/Revman>
3. Comprehensive meta-analysis <http://www.meta-analysis.com/>
4. OpenMetaAnalyst http://www.cebm.brown.edu/open_meta
5. MetaXL http://www.epigear.com/index_files/metaxl.html
6. MIX <http://www.meta-analysis-made-easy.com/>
7. MetaEasy <http://www.jstatsoft.org/v30/i07>
8. MetaWin <http://www.metawinsoft.com/>
9. RcmdrPlugin.MA
<http://cran.r-project.org/web/packages/RcmdrPlugin.MA/index.html>
10. ProMeta <http://www.internovi.com/prometa-meta-analysis-software/>
11. ClinTools <http://www.clintools.com/>
12. MetaLight <http://eppi.ioe.ac.uk/cms/Default.aspx?tabid=3086>

Meta-analysis statistical packages:

1. GeMTC R package <http://cran.r-project.org/web/packages/gemtc/index.html>
2. pnetmeta R package <http://cran.r-project.org/web/packages/pnetmeta/index.html>
3. netmeta R package <http://cran.r-project.org/web/packages/netmeta/index.html>
4. copas R package <http://cran.r-project.org/web/packages/copas/index.html>
5. meta R package <http://cran.r-project.org/web/packages/meta/index.html>
6. metafor R package <http://cran.r-project.org/web/packages/metafor/index.html>
7. metaLik R package <http://cran.r-project.org/web/packages/metaLik/index.html>
8. rmeta R package <http://cran.r-project.org/web/packages/rmeta/index.html>
9. bspmma R package <http://cran.r-project.org/web/packages/bspmma/index.html>
10. metamisc R package <http://cran.r-project.org/web/packages/metamisc/index.html>
11. mmeta R package <http://cran.r-project.org/web/packages/mmeta/index.html>
12. metatest R package <http://cran.r-project.org/web/packages/metatest/index.html>
13. metagen R package <http://cran.r-project.org/web/packages/metagen/index.html>
14. PubBias R package <http://cran.r-project.org/web/packages/PubBias/index.html>
15. selectMeta R package <http://cran.r-project.org/web/packages/selectMeta/index.html>
16. SAMURAI R package <http://cran.r-project.org/web/packages/SAMURAI/index.html>
17. extfunnel R package <http://cran.r-project.org/web/packages/extfunnel/index.html>
18. mvmeta R package <http://cran.r-project.org/web/packages/mvmeta/index.html>
19. mvtmeta R package <http://cran.r-project.org/web/packages/mvtmeta/index.html>
20. metaSEM R package <http://r-forge.r-project.org/projects/metasem/>
21. dosresmeta R package <http://cran.r-project.org/web/packages/dosresmeta/index.html>
22. robumeta R package <http://cran.r-project.org/web/packages/robumeta/index.html>
23. Gmisc R package <http://cran.r-project.org/web/packages/Gmisc/index.html>
24. ipdmeta R package <http://cran.r-project.org/web/packages/ipdmeta/index.html>

WP4 review of evidence synthesis and predictive modelling software

Predictive modeling user interfaces:

1. SIMUL8 <http://www.simul8.com/>
2. EMMA <https://simtk.org/home/emma>
3. TreeAge <https://www.treeage.com/>
4. Arena <http://www.arenasimulation.com/>
5. ItemSoft Markov Analysis software <http://www.itemsoft.com/markov.html>
6. Microsoft Excel

Predictive modeling statistical packages:

1. genSurv R package <http://cran.r-project.org/web/packages/genSurv/index.html>
2. PermAlgo R package <http://cran.r-project.org/web/packages/PermAlgo/index.html>
3. complex.surv.data.sim R package <http://cran.r-project.org/web/packages/complex.surv.dat.sim/index.html>
4. prodlim R package <http://cran.r-project.org/web/packages/prodlim/index.html>
5. gems R package <http://cran.r-project.org/web/packages/gems/index.html>
6. simMSM R package <http://cran.r-project.org/web/packages/simMSM/index.html>
7. simPH R package <http://cran.r-project.org/web/packages/simPH/index.html>
8. survsim R package <http://cran.r-project.org/web/packages/survsim/index.html>
9. msm R package <http://cran.r-project.org/web/packages/msm/index.html>
10. etm R package <http://www.jstatsoft.org/v38/i04>
11. Epi R package <http://www.jstatsoft.org/v38/i06>
12. mstate R package <http://www.jstatsoft.org/v38/i07>
13. timereg R package <http://www.jstatsoft.org/v38/i02>
14. mhsmm R package <http://www.jstatsoft.org/v39/i04>
15. ggm R package <http://www.jstatsoft.org/v15/i06>

Key deliverables for GetReal

Deliverable

A decision-making framework to aid the design of drug development strategies. This will lay out the different study design options and associated pros and cons from key stakeholder perspectives including acceptability in evidence review processes.

Recommendations will be made for regulatory and HTA policy development.

Guidance and publications on methodologies for conducting and analysing relative effectiveness research pre-authorisation

Guidance and publications on methodologies for using EHR in conducting studies pre-authorisation

Guidance, publications and practical tools and templates to address operational, statistical and ethical issues in conducting pragmatic/adaptive designs pre-authorisation

Guidance and publications on methodologies for conducting data synthesis integrating a wide range of source studies of different types

Software for conducting data synthesis integrating a wide range of source studies of different types

Training and education resources

Lessons Learned

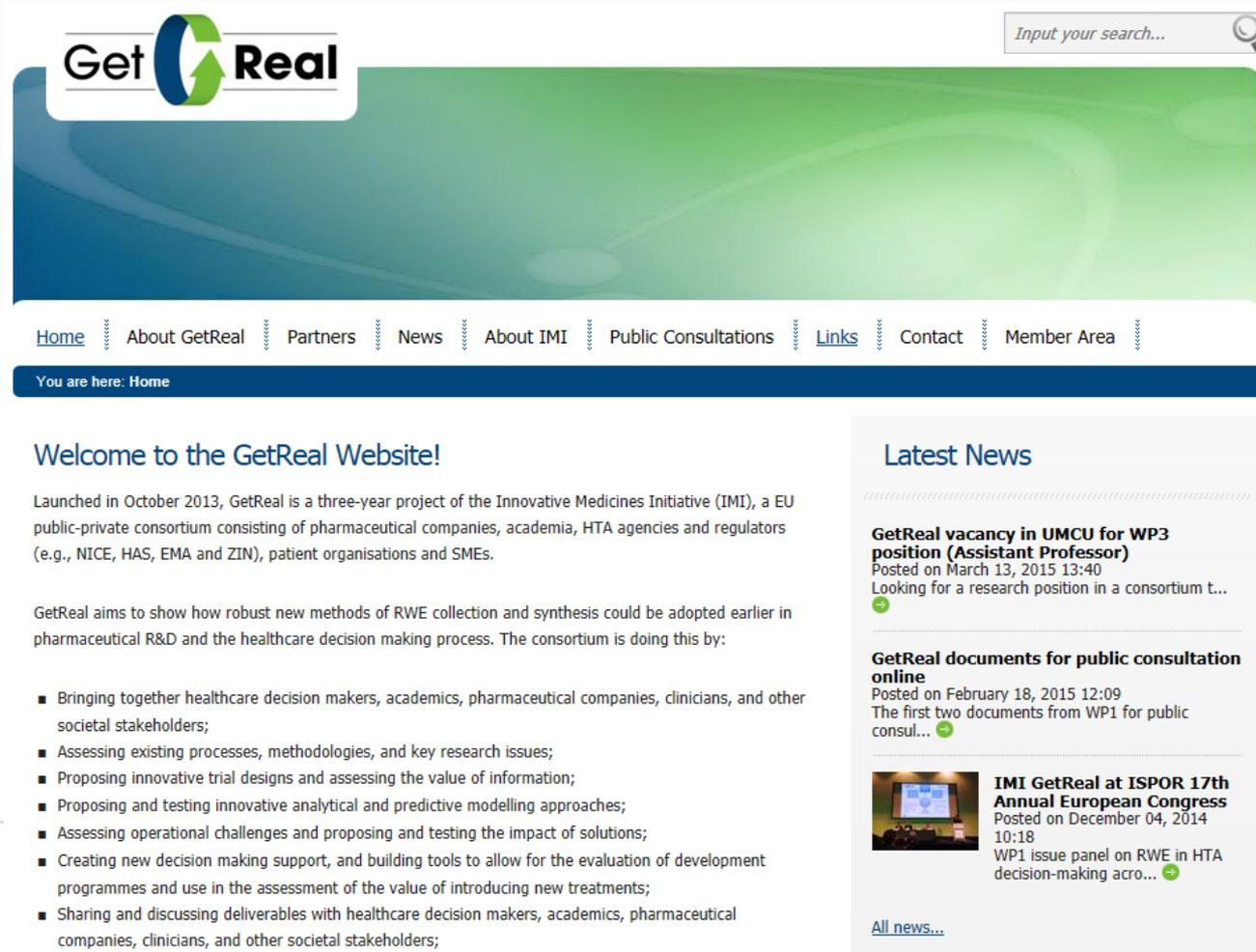
- It takes time to build relationships and select appropriate case studies
- Case study selection: be specific on diseases or drug class before consortium starts
- Be clear on roles and responsibilities
- Start External Communications at very start of project
- Make better use of governance structure

Conclusions

- GetReal aims to deliver a framework for decision making developed jointly by Regulatory, HTA and Industry experts
- GetReal aims to provide practical solutions to enable implementation of studies with greater value of information for relative effectiveness assessment
- GetReal will utilise recent advances in methodology to reliably predict effectiveness from available data sources
- GetReal aims to align innovation in evidence generation with evolution of regulatory and HTA processes

For more information:

- Visit the GetReal website:
imi-getreal.eu



The screenshot shows the homepage of the GetReal website. At the top left is the GetReal logo. To the right is a search bar with the placeholder text "Input your search...". Below the header is a navigation menu with links: Home, About GetReal, Partners, News, About IMI, Public Consultations, Links, Contact, and Member Area. A breadcrumb trail below the menu reads "You are here: Home".

The main content area features a heading "Welcome to the GetReal Website!" followed by a paragraph: "Launched in October 2013, GetReal is a three-year project of the Innovative Medicines Initiative (IMI), a EU public-private consortium consisting of pharmaceutical companies, academia, HTA agencies and regulators (e.g., NICE, HAS, EMA and ZIN), patient organisations and SMEs." Below this is another paragraph: "GetReal aims to show how robust new methods of RWE collection and synthesis could be adopted earlier in pharmaceutical R&D and the healthcare decision making process. The consortium is doing this by:"

- Bringing together healthcare decision makers, academics, pharmaceutical companies, clinicians, and other societal stakeholders;
- Assessing existing processes, methodologies, and key research issues;
- Proposing innovative trial designs and assessing the value of information;
- Proposing and testing innovative analytical and predictive modelling approaches;
- Assessing operational challenges and proposing and testing the impact of solutions;
- Creating new decision making support, and building tools to allow for the evaluation of development programmes and use in the assessment of the value of introducing new treatments;
- Sharing and discussing deliverables with healthcare decision makers, academics, pharmaceutical companies, clinicians, and other societal stakeholders;

On the right side of the page, there is a "Latest News" section with three items:

- GetReal vacancy in UMCU for WP3 position (Assistant Professor)**
Posted on March 13, 2015 13:40
Looking for a research position in a consortium t... →
- GetReal documents for public consultation online**
Posted on February 18, 2015 12:09
The first two documents from WP1 for public consul... →
- IMI GetReal at ISPOR 17th Annual European Congress**
Posted on December 04, 2014 10:18
WP1 issue panel on RWE in HTA decision-making acro... →

At the bottom left of the page are logos for the European Union, efpia, and IMI (Innovative Medicines Initiative).