

FDA Clinical Trial Transformation Initiative
Monitoring Project:
Developing effective quality systems in clinical trials

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<https://www.trialstransformation.org/projects/effective-and-efficient-monitoring>

FDA Clinical Trials Transformation Initiative:

Mission

- To identify practices that through broad adoption will increase the quality and efficiency of clinical trials

Strategy

- Generation of evidence about how to improve the design and execution of clinical trials
- Stimulation of widespread change based on evidence



Effective and Efficient Monitoring Project

■ Goal

- ◆ Identify best practices and provide sensible criteria to help sponsors select the most appropriate monitoring methods for a clinical trial, thereby ensuring reliable and informative trial results and human subjects' protection

■ Objectives

- ◆ Workstream 1: Describe the range of current monitoring practices and examine factors that drive their adoption
- ◆ Workstream 2: Define key quality objectives for monitoring clinical trials
- ◆ Workstream 3: Illustrate strengths and weaknesses of various monitoring practices in meeting quality objectives for a range of clinical trial settings

Increased emphasis on protocol & design

- The most appropriate method of monitoring is in large part determined by the steps that are taken to build quality into the trial as the trial is designed.
- Hence, focus has shifted towards advocating for increased attention by Sponsors in building quality into the trial – since this will in large part determine both the overall quality of the trial and the appropriate approach to assessing quality.

Key features for reliable results

- Proper randomization (and intent-to-treat analysis)
- Sufficient numbers of relevant clinical outcomes
- Unbiased ascertainment of key study outcomes
- Comparisons with the randomized control group (except for assessing big effects on rare events)
- Avoiding undue emphasis on subgroup findings and on non-randomized “on treatment” analyses

Minimal impact of adding false events or of missing real events

| | Active (10,000) | Control (10,000) | OR (& 95%CI) | Z score |
|--|--------------------|---------------------|------------------|---------|
| True events | 800 | 1000 | 0.78 (0.71-0.86) | 4.9 |
| Extra false events (evenly distributed) | | | | |
| + 10% | 890 | 1090 | 0.80 (0.73-0.88) | 4.7 |
| + 20% | 980 | 1180 | 0.81 (0.74-0.89) | 4.6 |
| Missing real events (unevenly distributed) | | | | |
| - 10% | 720 | 900 | 0.78 (0.71-0.87) | 4.7 |
| - 20% | 640 | 800 | 0.79 (0.71-0.88) | 4.4 |

Quality Assurance for Clinical Trials: Principles

- Objective: answer the question
 - ◆ be intellectually mindful of what you're trying to produce

- Quality = fitness for use (\neq perfection)
 - ◆ avoid undue emphasis on data at the expense of reliable results
 - ◆ avoid excessive emphasis on the case report form

Quality Assurance for Clinical Trials: Risk management

- What are you trying to achieve
- Specify threats: What could go wrong in a meaningful manner
 - e.g. bias, poor compliance, poor recruitment, low event rate
- Design the process to avoid threats
- Add controls
 - real time monitoring of things that might matter
- Identify problems and intervene early
 - before issues become endemic
- Improve

Process controls (monitoring)

■ Controls

- ◆ Monitoring is a continuous activity
- ◆ Risk ≠ issue
- ◆ Risk = a call to action (accept or mitigate)

■ Challenges

- ◆ Choice of risk indicators
- ◆ Data sharing
- ◆ Comparative data
- ◆ False positives, false negatives

Quality Assurance for Clinical Trials: Challenges

- Requires good understanding of:
 - ◆ the objectives
 - ◆ the process
 - ◆ the controls
- Acknowledgement of the risks
 - ◆ depends on perspective

“Risk-based” monitoring

- Different perceptions of “risk”
- Risk to organization:
 - ◆ Reputation, litigation, regulatory delay/failure
- Risk to participant:
 - ◆ Harm from treatment or study procedures
- Risk to patients
 - ◆ Inadequate / unreliable data lead to bad healthcare
- Risk to providers
 - ◆ Expensive use (or non-use) of treatment

Sponsors

Quality Risk Management

Protocol design



Trial conduct



Results

Inspection

Regulation

Healthcare providers and users



Preliminary recommendations

- Regulatory guidance
 - ◆ should be coherent and consistent
 - ◆ should not promote any particular methodology
- Monitoring/QA procedures
 - ◆ plan should be discussed with FDA reviewers & inspectors
 - ◆ findings should be included in study reports/publications
 - ◆ greater collaboration (incl. methodology, benchmarking)
- Education & awareness of principles
 - ◆ regulators, trialists, inspectors
 - ◆ focus on what's important, what's not
 - ◆ monitoring and QA methods can be diverse
- International adoption