



# POST-AUTHORISATION STUDIES IN EUROPE: BRIDGING THE GAP BETWEEN REGULATORY AND HEALTH TECHNOLOGY ASSESSMENT (HTA) STAKEHOLDER NEEDS BY BETTER DESIGN OF STUDIES

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Real World Evidence Solutions



# To begin from the beginning...



900 BC



800 AC



1900s



1970s

# Trend changes



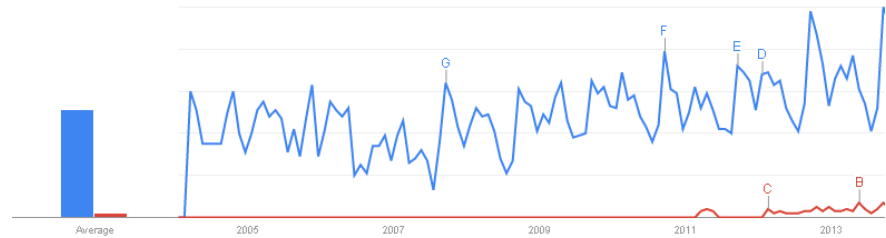
clinical trial <sup>x</sup> Search term | evidence based medicine Search term | + Add term

Interest over time <sup>?</sup>  News headlines  Forecast <sup>?</sup>







observational study Search term | real world evidence Search term | + Add term

Interest over time <sup>?</sup>  News headlines  Forecast <sup>?</sup>



# Real world studies: need for harmonization

	<b>Clinical trials</b>	<b>Real world studies</b>	
Research question, goals and design	Predefined goals expressed in 3 sequential phases  Predefined endpoints	Research questions differ between regulatory and HTA bodies	
Ethical considerations	Informed consent, IRB/IEC review	Different requirements for informed consent and IRB/IEC	
Good practice	ICH GCP	EMA GVP, ISPE GPP, GRACE, ISPOR checklist for databases studies, guidelines for database selection...	
Obligation for Registration	Generally Yes	Generally No	
Reporting	CONSORT statement	STROBE statement	

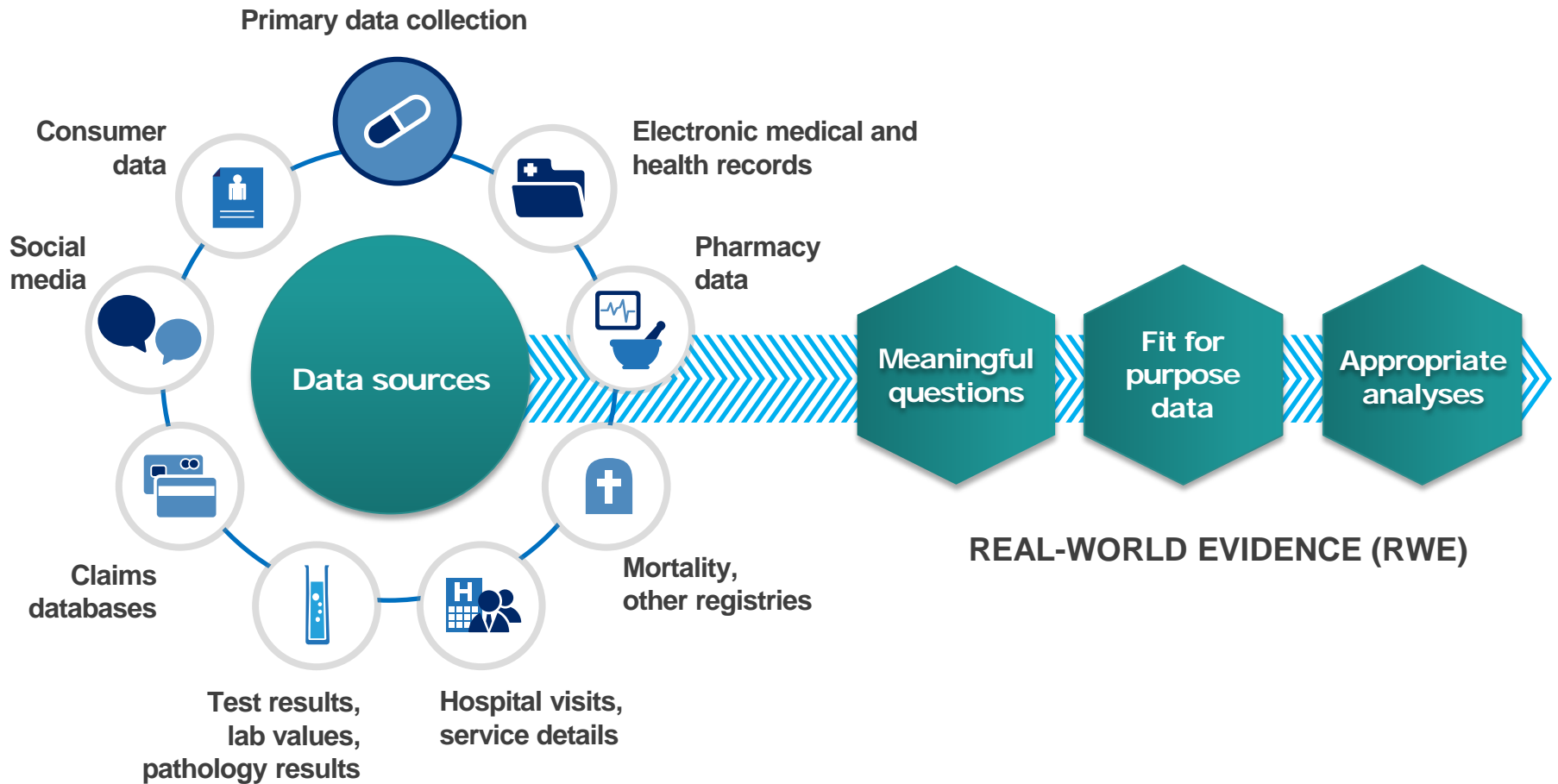
# Stakeholder requirements

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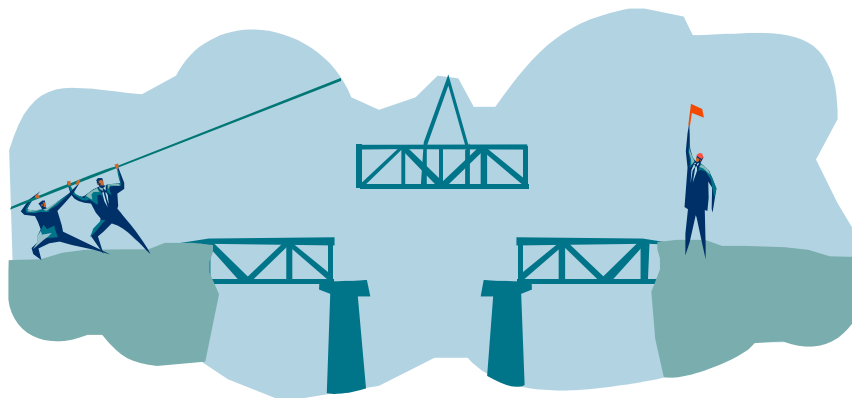
<b>Regulatory</b>	<b>HTA</b>
Exposure	Burden of target disease (mortality, morbidity prevalence, incidence, DALYs, QALYs)
Epidemiology of the indication(s)	
Prescribing conditions	Conditions of use
Characteristics of patients who actually receive the drug	Expected benefit of the technology <ul style="list-style-type: none"><li>- On burden of disease</li><li>- On management of disease</li></ul>
New safety concerns, known ones, risk factors	<ul style="list-style-type: none"><li>- Economical</li><li>- Organisational</li><li>- Social</li></ul>
Efficacy in real life / in specific populations	Confirmation of the expected benefit
Effectiveness of risk minimization measures	Potential to cover unmet medical needs or to improve covered needs
Signal detection	

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# Generating evidence from real world data



# Changing the way we are doing studies



## Where we are today?

- Budget assigned to uncoordinated outcomes studies to answer specific questions for single products
- Un-coordinated studies conducted across different needs
- Lengthy delays in patient recruitment
- Repetitive or consistently re-worked study protocols
- Separate data sources for each requirement

## Preparing for tomorrow

- Integrated RWE strategy that builds scalable data assets that are harnessed to generate and test multiple hypotheses
- Accessible data assets to enable rapid response to internal and external stakeholder questions
- Replicable research methods based on highest methodological standards

# Connecting stakeholders



European Network of Centres  
for Pharmacoepidemiology and Pharmacovigilance



Code of  
Conduct

Good  
practice

Registration

Data  
sources

Extension into HTA space



EU PAS Register

<http://www.encepp.eu/encepp/addstudy.jsp>

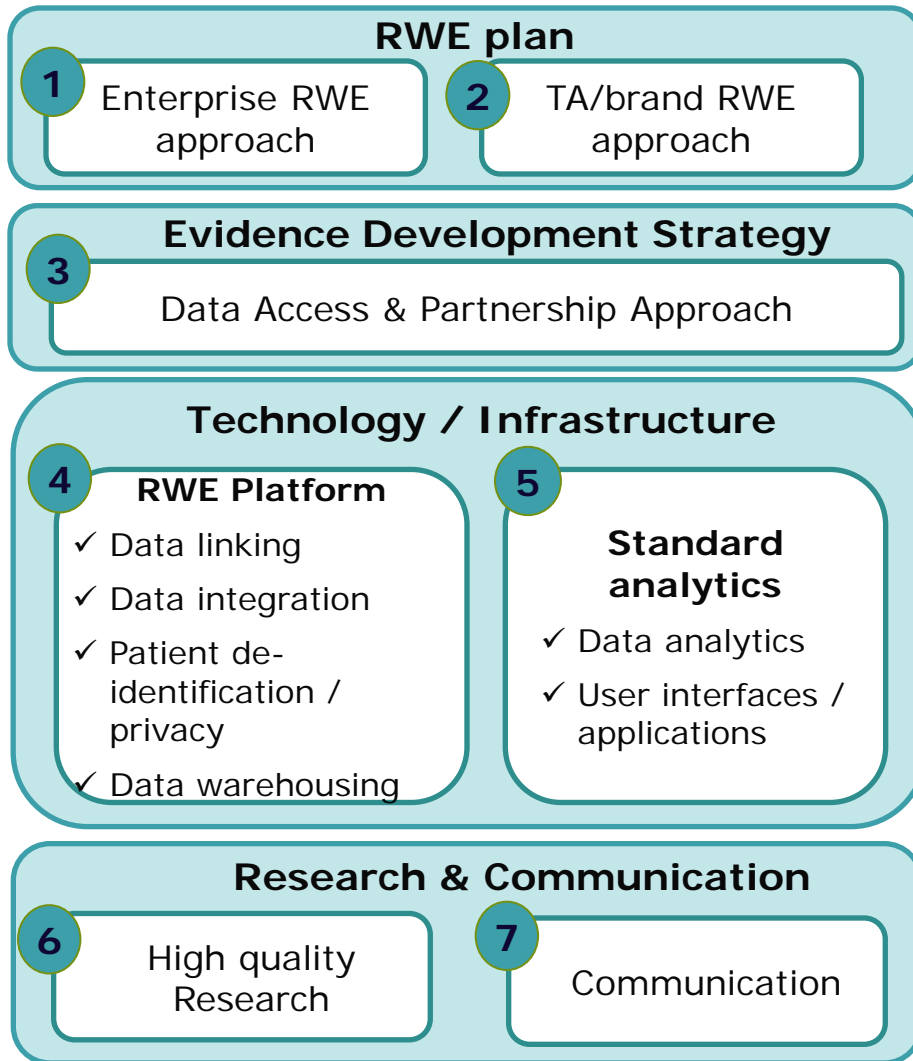
ENCePP Resources Database

<http://www.encepp.eu/encepp/resourcesDatabase.jsp>

ENCePP-HTA working group



# Integrated RWE strategy



1. Define enterprise RWE vision and approach
2. Determine strategic implications and gaps across TAs by including both safety and HTA requirements
3. Develop a strategy around evidence development which includes data access and stakeholder partnering
4. Build platform to securely link, integrate, clean, and house required real world data
5. Utilize data from the RWE initiative across safety, HTA, R&D and commercial needs
6. Develop research based on methodological standards to meet authorities' requirements
7. Use efforts to communicate study results in compliance with codes of conduct

# Conclusion

- Real world evidence: a real trend
- Need for harmonization
- Bridging the gap between regulatory and HTA will facilitate
  - Mutual understanding of questions, methods and standards
  - Optimized use of available resources
  - Better assessment of benefit-risk
- Smooth collaboration between stakeholders

Thank you!



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# Heterogeneity of choices

