

# Beginning with the End in Mind – Study Endpoints: Targeting Patient-Centered Outcomes

March 18-20 | North Bethesda, MD



## PROGRAM CO-CHAIRS:

### Linda S. Deal, MS

Head of Patient-Reported Outcomes  
Shire

### Elektra Papadopoulos, MD, MPH

Medical Officer  
Study Endpoints and Labeling Development  
CDER, FDA

## PROGRAM COMMITTEE:

### Dianne (Dee) Kennedy, MPH, RPh

Consumer Safety Officer  
Study Endpoints and Labeling Development  
CDER, FDA

### Annabel Nixon, PhD

Director, Patient Reported Outcomes  
PRMA Consulting

### James Stansbury, PhD, MPH

Consumer Safety Officer  
Study Endpoints and Labeling Development  
CDER, FDA

### Ashley Slagle, MS, PhD

Endpoints Reviewer  
Study Endpoints and Labeling Development  
CDER, FDA

### Jessica Voqui, PharmD, MS

Regulatory Review Officer  
Study Endpoints and Labeling Development  
CDER, FDA

### Keith Wenzel

Senior Director  
Global Alliances  
Perceptive Informatics

## OVERVIEW:

Study endpoint measures in clinical trials determine what conclusions can be made about treatment benefit, medical differentiation, and value. For medical product developers, this evidence plays a critical role in drug development utility decisions as well. Measure selection varies depending upon the development phase and the specific objectives of the trial. Balancing the measurement objectives with various drug development stakeholder interests requires thoughtful planning and consideration. Evidence requirements to support labeling and promotion claims can require substantial time and effort to coordinate, especially when endpoint measures must be developed de novo.

During this meeting, you will gain insight into the tradeoffs and various stakeholder perspectives for developing a study endpoint measurement strategy, including detailed and practical tips for ensuring that measurement tools are adequate to support the targeted objectives with a focus on establishing instrument content validity for the specified clinical trial context of use.

## AGENDA:

- Day One/Day Two AM: Review the scientific methods, issues, and execution challenges for internal and external stakeholders
- Day Two PM: Discuss measurements to achieve labeling and promotion claims
- Day Three: FDA will present good measurement principles ensuring that the measure is meaningful and interpretable

## LEARNING OBJECTIVES:

At the conclusion of this conference, participants should be able to:

- Recognize the challenges sponsors face with setting an endpoint strategy and prioritizing the endpoint objectives across multiple internal stakeholders
- Discuss the scientific methods, issues and execution challenges for each of the respective internal and external stakeholder's endpoint goals
- Populate and employ strategic drug development tools such as the Target Product Profile to facilitate study endpoint objectives and regulatory interactions
- Discuss the characteristics of a clinically meaningful measurement instrument
- Apply good measurement principles to the development of clinical trial endpoints
- Discuss why the "context of use" is important to developing, evaluating, and interpreting meaningful measurements and appropriate measurement procedures
- Describe the key steps in meaningful measurement starting with establishing the conceptual basis for a patient-focused clinical outcome measure of treatment benefit

Register at [diahome.org/studyendpoints](http://diahome.org/studyendpoints)

**DIA GLOBAL CENTER**  
21 Dupont Circle, NW, Suite 300  
Washington, DC 20036

**WORLDWIDE OFFICES**  
Basel, Switzerland | Beijing, China | Horsham, PA, USA  
Mumbai, India | Tokyo, Japan



## CONTINUING EDUCATION CREDITS



The Drug Information Association is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education. This program is designated for up to 18.75 contact hours or 1.875 continuing education units (CEU's). Type of Activity: Knowledge

### ACPE Credit Requests

DIA is required by the Accreditation Council for Pharmacy Education (ACPE) to report pharmacy-requested CEUs through the CPE Monitor system. **All ACPE-certified activity credit requests need to be submitted through DIA's My Transcript within 45-days post activity.** Pharmacists will need to provide their National Association of Boards of Pharmacy (NABP) e-Profile ID and date of birth (MMDD) to ensure the data is submitted to the ACPE and NABP properly. If you need to obtain your NABP e-Profile, please visit [www.cpemonitor.net](http://www.cpemonitor.net).



Drug Information Association has been accredited as an Authorized Provider by the International Association for Continuing Education and Training (IACET), 1760 Old Meadow Road, Suite 500, McLean, VA 22102; +1.703.506.3275.

As an IACET Authorized Provider, Drug Information Association offers CEUs for its programs that qualify under the ANSI/IACET Standard. Drug Information Association is authorized by IACET to offer up to 1.9 CEUs for this program. Participants must attend the entire program in order to be able to receive an IACET statement of credit. No partial credit will be awarded.

If you would like to receive a statement of credit, you must attend the program, sign in at the DIA registration desk each day of the program, and complete the credit request process through My Transcript. To access My Transcript, please go to [www.diahome.org](http://www.diahome.org), select "Login to My DIA" and you will be prompted for your user ID and password. Select "My Transcript" (left side bar) and "Credit Request" to process your credit request. Participants will be able to download a statement of credit upon successful submission of the credit request. My Transcript will be available for credit requests on Thursday, April 3, 2014.

It is Drug Information Association policy that anyone in a position to control the content of a continuing education activity must disclose to the program audience (1) any real or apparent conflict(s) of interest related to the content of their presentation and/or the educational activity, and (2) discussions of unlabeled or unapproved uses of drugs or medical devices. Faculty disclosures will be included in the course materials.

Unless otherwise disclosed, the statements made by speakers represent their own opinions and not necessarily those of the organization they represent, or that of the Drug Information Association. Speakers, agenda, and CE information are subject to change without notice. Recording of any DIA educational material in any type of media is prohibited without prior written consent from DIA.

View DIA's Grievance Policy, please visit [www.diahome.org/CE](http://www.diahome.org/CE)

### Pharmacy Credit Allocation

Day 1: 6 contact hours or .6 CEUs; 0286-0000-14-034-L04-P

Day 2: 6.75 contact hours or .675 CEUs; 0286-0000-14-035-L04-P

Day 3: 6 contact hours or .6 CEUs; 0286-0000-14-036-L04-P

## DIA'S CERTIFICATE PROGRAM

This program is part of DIA's Certificate Program

- Clinical Research Certificate Program: 12 Elective Units
- Project Management Certificate Program: 8 Elective Units
- Regulatory Affairs Certificate Program: 12 Elective Units

For more information go to [diahome.org/certificateprograms](http://diahome.org/certificateprograms)

## TO ACCESS PRESENTATIONS:

- Visit [diahome.org](http://diahome.org)
- Login to My DIA
- Enter your User ID and Password
- View 'My Presentation Downloads'

*Please Note: DIA User ID and Password are needed to access presentations. If you have forgotten your DIA User ID and Password, or this is your first time logging into the DIA website, please use our Login Reminder*

## TUESDAY, MARCH 18

8:30-8:45AM WELCOME AND OPENING REMARKS I

### How Study Endpoints are Used and Why

**Linda S. Deal, MS**

Head of Patient-Reported Outcomes  
Shire

8:45-9:30AM

### Commercial Interest in Study Endpoints

**Joseph Caminiti**

President and Chief of Staff  
BQ6 Media Group

Topics presented in this session include:

- The value of pharmaceutical agents and treatments depends on the proven efficacy, safety, and quality of care versus an accepted comparator
- There are potential differences in demonstrating efficacy and safety vs. suitability for P&T inclusion and/or reimbursement
- Commercialization involves leveraging the intrinsic properties of a compound to develop promotional strategies around the unique product attributes that provide value for physicians, patients, and payers
- Exploiting these “unique” properties with product promotion and sales support activities that support successful market launch and growth needs to be supported by data

9:30-10:15AM

### Translational Medicine: The Bridge Between the Beginning and the End

**Francisco Leon, MD, PhD**

Vice President  
Translational Medicine, Immunology Development  
Janssen R&D (Pharmaceutical Companies of Johnson & Johnson)

Translational Medicine bridges preclinical and clinical development. “Reverse Translation” planning often results in recommendations for the development of patient-reported outcomes and biomarkers in early development. Challenges and case studies will be discussed.

10:15-10:30AM REFRESHMENT BREAK

10:30-11:15AM

### Addressing Study Endpoints for Clinical Relevance

**Debra Silberg, MD, PhD**

Senior Director  
Clinical Development  
Shire

Diseases can be evaluated by changes in physiology, signs, and symptoms. When performing a clinical study, it is important to determine the endpoint that is most clinically relevant, discussing with both clinicians and patients what they are looking for from the treatment. The view may not always be the same, but should be taken into consideration when evaluating efficacy. This talk will discuss different endpoints from the viewpoint of both the patient and clinician.

11:15AM-12:00PM

### Study Endpoints: A Market Access Perspective

**Mohan Bala, PhD**

Head  
Oncology Value & Access  
Sanofi

Topics presented in this session include:

- Overview of market access process and evolving concept of value
- Relevance of study endpoints for market access
- Payer perspective on endpoints from key countries: a few illustrative examples
- Study endpoints and market access: What does the future hold?

12:00-1:00PM LUNCH

1:00-1:45PM PANEL DISCUSSION

## What Does Differentiation Mean to You and How You Select Endpoints?

MODERATOR

### Linda S. Deal, MS

Head of Patient-Reported Outcomes  
Shire

Topics discussed in this session include:

- All stakeholders want differentiation – are we talking about the same thing?
- What is(are) the priority(ies)? How are these determined/traded off? Are there specific scenarios that influence this e.g. first in class, best in class, second generation of same mechanism of action (i.e. potential generic competition), etc.?
- Speaker representatives of the stakeholder functions to participate
- The regulatory tight rope

1:45-2:30PM

## Tools to Help Gain Alignment in the Project Team

### Charles Gombar, PhD

Senior Vice President, Project Management and Pharmaceutical Development  
Endo Pharmaceuticals

There is more than one way to develop most new drugs. A key challenge in pharmaceutical R&D is establishing and maintaining alignment on the development strategy and plan in the project team. This session will highlight some tools that can be used to ensure that a development plan is aligned with the value proposition for the new product.

2:30-2:45PM REFRESHMENT BREAK

2:45-3:30PM

## Beginning with the End in Mind – Who Should Care?

### Evan Loh, MD

Chairman  
Board of Directors  
Chief Medical Officer  
Paratek Pharmaceuticals

As project teams advance products during development, there is a natural tension between the merits of any single project and “the portfolio” views considered by executive governance. As project teams move forward passionately, who should care about the merits and applicability of the strategy to achieve the endpoints demonstrating differentiation as well as the strength of the clinical data that enables teams to learn and confirm whether a given compound will become a medicine of tomorrow. That all being said, will the internal company culture of decision-making, governance and leadership truly result in bold and courageous commitments on which compounds will ultimately possess the greatest value for patients, physicians, and other stakeholders.

3:30-4:00PM WRAP UP AND SUMMARIZE THE DAY



Join the 30,000+  
members on  
LinkedIn



Follow  
@DrugInfoAssn for  
real-time updates



Watch Exciting  
Videos



Like us on  
Facebook

## WEDNESDAY, MARCH 19

8:30-8:45AM WELCOME, REFRESH OF DAY 1, AND INTRODUCTION OF DAY 2 AGENDA

---

### What Does it Take to Achieve the Study Endpoint Goals Discussed in Day 1?

**Linda S. Deal, MS**

Head of Patient-Reported Outcomes  
Shire

8:45-9:30AM

---

### Adaptive Designs and Endpoint Selection

**Scott Berry, PhD**

President and Senior Statistical Scientist  
Berry Consultants

The selection of endpoints in the learn phases of trials can be a very difficult problem typically involving the time of the trial, the relevance of the endpoint, and the power of the study. Many times decisions to select short term endpoints, for the sake of speed of getting to phase III can create poor dose selection, incorrect go/no-go decisions, and inefficient drug development. The issue can be more complex in an adaptive trial design because of the need to provide information for the adaptations. A strength of the adaptive design is that it can utilize endpoints in different ways — early markers can be used as possibly correlated to the more appropriate long-term endpoint, and this correlation can be modeled and informed by the trial, and thus the design can be made more efficient and yet the focus is on the more relevant long-term clinical endpoint.

In this talk the selection of endpoints, the modeling of different endpoints, within the building and simulation of an adaptive clinical trial will be discussed. Real examples of endpoint selection within adaptive designs will be presented.

9:30-10:15AM

---

### Overcoming Regulatory Challenges in Targeting Patient-Centered Outcomes in Psychiatric Drug Development

**Thomas Laughren, MD**

Director  
Laughren Psychopharm Consulting, LLC.

Selecting the primary measure for a definitive trial and defining the primary study endpoint are critical steps in any drug development program. There is increasing interest in using patient-reported outcome (PRO) measures in registration trials, and these measures present many challenges, including regulatory challenges. Included among the regulatory challenges are redundancy with investigator rated measures and pseudo-specificity. This session will discuss possible approaches to overcoming these and other regulatory challenges associated with PROs.

10:15-10:30AM REFRESHMENT BREAK

---

10:30-11:15AM

---

### Patient-Centered Outcomes Targeting Payers and Regulators

**Ethan M. Basch, MD**

Director  
Cancer Outcomes Research Program  
Associate Professor of Medicine  
University of North Carolina at Chapel Hill

Payers seek information about the comparative value of products, and increasingly consider the patient experience as an important component of value. Patient-reported outcome (PRO) data may be desired or requested by payers including information about symptoms, functional status, harms of care, treatment preferences, and/or quality of life. There is some overlap with the informational needs and published guidance of regulators. New standards for PROs have also emerged from several entities involved with evaluating comparative effectiveness and quality of care.



Follow [@DrugInfoAssn](#) for real-time updates.

11:15AM-12:00PM

## Study Endpoints and Patient-Centered Outcomes: Payer Needs vs Regulatory Limits

### Paul Radensky, MD

Partner  
McDermott Will & Emery LLP

Payers are increasingly asking for value information to support coverage and pricing decisions about new drugs and medical devices. Sometimes the data payers want do not fit squarely within the labeling of the medical product. Many were hopeful that Section 114 of FDAMA and the guidance on patient-reported outcomes would reduce uncertainty about what manufacturers could communicate to payers about their products, but much uncertainty—and potential risk—remains. This talk will explore the regulatory landscape for payer communications and consider some options to bridge payer needs and regulatory limits.

12:00-12:15PM Q &amp; A

12:15-1:15PM LUNCH

1:15-1:30PM RECAP OF MORNING SESSION AND INTRODUCTION TO AFTERNOON SESSION

### Linda S. Deal, MS

Head of Patient-Reported Outcomes  
Shire

### Elektra Papadopoulos, MD, MPH

Medical Officer  
Study Endpoints and Labeling Development  
CDER, FDA

## Measurement to Achieve Labeling and Promotion Claims

Good measurement principles form the foundation for clinical outcome measurement. Investment in measurement will ultimately benefit people with diseases, drug developers, clinical trialists, and regulatory authorities. This session will provide an overview of the comprehensive process of creating and implementing a new outcome measure or modifying an existing instrument. The development of a patient-based, clinical outcome measure that will support a labelling claim requires advance planning in the early phases of product development. Establishing the context of use and planning the protocol for qualitative research that thoroughly explores the conceptual basis for measurement are fundamental. This session emphasizes the importance of identifying what is meaningful to be measured based on the context of use for measurement, getting the content right, and finally, ensuring that the measure is meaningful and interpretable.

1:30-3:00PM

## Navigating Instrument Development Using the Wheel and Spokes

SESSION CHAIR

### Jessica Voqui, PharmD, MS

Regulatory Review Officer  
Study Endpoints and Labeling Development  
CDER, FDA

This session will give an overview of the process of instrument development as illustrated by the Wheel and Spokes diagram. Responses by EMA and OPDP representatives will explain the relevance of this diagram to their regulatory settings.

## Roadmap to Patient-Focused Outcome Measurements in Clinical Trials

### Elektra Papadopoulos, MD, MPH

Medical Officer  
Study Endpoints and Labeling Development  
CDER, FDA

## EMA Response (Via Telecommunications)

### Maria Isaac, MAsc, MD, PhD

Scientific Administrator  
European Medicines Agency (EMA), European Union

## OPDP Response

### Elaine Hu Cunningham, PharmD

Senior Regulatory Review Officer  
OPDP  
CDER, FDA

## Panel Discussion

MODERATOR

### Jessica Voqui

PANELISTS

### Elaine Hu Cunningham

### Maria Isaac

### Elektra Papadopoulos

3:00-3:15PM REFRESHMENT BREAK



Follow [@DrugInfoAssn](https://twitter.com/DrugInfoAssn) for real-time updates.

3:15-4:30PM

## Spoke 1: Defining the Clinical Trial Context of Use

SESSION CHAIR

### Ashley F. Slagle, MS, PhD

Endpoints Reviewer  
Study Endpoints and Labeling Development  
CDER, FDA

Good measurement depends on a clearly defined context of use, including explicit consideration of the targeted disease definition, patient population, clinical trial design and objectives, clinical practice, and other aspects of the study setting.

## Context of Use: An FDA Perspective

### Ashley F. Slagle

Endpoints Reviewer  
Study Endpoints and Labeling Development  
CDER, FDA

## Context of Use: Industry Perspective

### Debra Silberg, MD, PhD

Senior Director  
Clinical Development  
Shire

## Context of Use: Patient Advocate Perspective

### Cynthia Bens, MBA

Vice President  
Public Policy, Accelerate Cure/Treatments for  
Alzheimer's Disease (ACT-AD)  
Alliance for Aging Research

## Panel Discussion

MODERATOR

### Ashley F. Slagle

PANELISTS

### Cynthia Bens

### Debra Silberg

4:30-4:45PM

WRAP-UP AND ADJOURNMENT OF THE DAY

4:45-5:45PM

NETWORKING RECEPTION

## A Model of Patient, Payer, and Product Developer Collaboration to Support Innovating for Value

April 22-23 | Washington, DC



This conference will be an important step toward ensuring that patients, payers, and product developers are each contributing to the creation of cost-effective, quality-producing therapies.

Co-sponsored by:



## THURSDAY, MARCH 20

8:30-8:45AM WELCOME, REFRESH OF DAY 2, AND INTRODUCTION OF DAY 3 AGENDA

### Attention to Measurement in Clinical Trials: Why it Matters

#### Elektra Papadopoulos, MD, MPH

Medical Officer  
Study Endpoints and Labeling Development  
CDER, FDA

8:45-10:15AM

### Conceptualization and Generation of a Draft Measure

SESSION CHAIR

#### Elektra Papadopoulos, MD, MPH

Medical Officer  
Study Endpoints and Labeling Development  
CDER, FDA

Along with a clearly defined context of use, clear conceptualization provides the foundation for the process of instrument development. This is particularly important in clinical trials for regulatory purposes because the concept of interest becomes the labeling claim. Once there is clarity in conceptualization, the qualitative research process may begin.

### Spoke 1: Conceptualization and Making the Case for Content Validity

#### Donald Patrick, PhD, MPH

Professor  
Health Services, School of Public Health  
University of Washington

### Spoke 2: Interview, Qualitative Analysis, and Item Development Techniques

#### Ashley Slagle, PhD, MS

Endpoints Reviewer  
Study Endpoints and Labeling Development  
CDER, FDA

#### James Stansbury, PhD, MPH

Consumer Safety Officer  
Study Endpoints and Labeling Development  
CDER, FDA

10:15-10:30AM REFRESHMENT BREAK

10:30-11:45PM

### Spoke 2: Interview, Qualitative Analysis, and Item Development Techniques continued

#### Ashley Slagle, PhD, MS

Endpoints Reviewer  
Study Endpoints and Labeling Development  
CDER, FDA

#### James Stansbury, PhD, MPH

Consumer Safety Officer  
Study Endpoints and Labeling Development  
CDER, FDA

### Panel Discussion

MODERATOR

#### Elektra Papadopoulos

PANELISTS

#### Cynthia Bens

#### Donald Patrick

#### Ashley Slagle

#### James Stansbury

11:45AM-12:45PM LUNCH



Follow @DrugInfoAssn for real-time updates.



12:45-2:15PM

## Confirming Content Validity: Finalizing a Measure with an Interpretable Score

SESSION CHAIR

### Jessica Voqui, PharmD, MS

Regulatory Review Officer  
Study Endpoints and Labeling Development  
CDER, FDA

This session builds from the basis of the well-conceptualized draft instrument, looking at methods for finalizing a clinically meaningful instrument that provides interpretable measurement in a specific context of use. The session focuses on exploratory use of mixed methods that incorporate quantification to refine meaning and content.

## Spoke 2 continued:

### Jeremy Hobart, PhD, FRCP

Professor  
Clinical Neurology and Health Measurement  
Peninsula College of Medicine and Dentistry  
United Kingdom

## Panel Discussion

MODERATOR

### Jessica Voqui

PANELISTS

### Cynthia Bens

### Jeremy Hobart

### Ashley Slagle

### James Stansbury

2:15-2:30PM

REFRESHMENT BREAK

2:30-3:45PM

## Spoke 3 and 4: Completing the Dossier: Reliability, Construct Validity, Ability to Detect Change, and Interpretation Metrics

SESSION CHAIR

### Paivi Miskala, MSPH, PhD

Endpoints Reviewer  
Study Endpoints and Labeling Development  
CDER, FDA

After content validity is demonstrated, other measurement properties specific to the context of use, need to be demonstrated. This session is dedicated to research methods for identifying the other measurement properties—reliability, construct validity, and the ability to detect change. In addition the metrics of clinically meaningful change in the particular context of use will be discussed.

## Practical Consideration when Planning the Evaluation of Measurement Properties

### Patrick Marquis, MD, MBA

President  
TwoLegs Consulting, LLC

## Longitudinal Psychometric Evaluation

### Laura Lee Johnson, PhD

Statistician  
National Center for Complimentary and Alternative Medicine  
National Institutes of Health

## Interpretation of Scores

### Lisa Kammerman, PhD

Master Reviewer  
Office of Biostatistics  
CDER, FDA

## Panel Discussion

MODERATOR

### Paivi Miskala

PANELISTS

### Cynthia Bens

### Jeremy Hobart

### Laura Lee Johnson

### Lisa Kammerman

### Patrick Marquis

### Elektra Papadopoulos

3:45-4:00PM

WRAP UP

## Elektra Papadopoulos, MD, MPH

Medical Officer  
Study Endpoints and Labeling Development  
CDER, FDA

4:00PM

MEETING ADJOURNED