PROM's and multi-stakeholder meetings



Eurordis Summerschool 2017

Elizabeth Vroom, Duchenne Parent Project / UPPMD

Patient opinions - input in drug development



Prom: effect of a treatment or drug

Multistakeholder meetings: input in policies and guidelines



Duchenne Muscular Dystrophy

Pediatric

Progressive



Fatal



Initiators

Lobbying

Duchenne Parent Project

Funding



Clinical research

Trial Design



Selection of Centers

Recruitement

Interactions with Industry





Outcome measures



Clinically meaningful

Ask the patients!!!

Patient reported Outcome Measures



Extension/Access



First trials: Outcome measures

6 MWT

No specific PROM

NO Duchenne specific outcome measures

Duchenne Muscular Dystrophy

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Pent

Generic (pediatric) PROM's are used, such as PODCI / PedsQL (NM module) / PARS / SOLE

Specific PROM for DMD UL-PROM developped.

Performance of Upper LImb

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Mayhew A, Mazzone ES, Eagle M, Duong T, Ash M, Decostre V, Vandenhauwe M, Klingels K, Florence J, Main M, Bianco F, Henrikson E, Servais L, Campion G, **Vroom** E, Ricotti V, Goemans N, McDonald C, Mercuri E; Performance of the Upper Limb Working Group..

Patient Reported Outcome (measures)



A patient-reported outcome (PRO) is a health outcome directly reported by the patient who experienced it.

It stands in contrast to an outcome reported by someone else, such as a physician- or nurse reported outcome.

Not to be confused with



PCOs, or patient-centered outcomes. The latter implies the use of a questionnaire covering issues and concerns that are specific to a patient.

PREMs (patient reported experience measures), which focus more on a patient's overall experience versus a focus on specific treatment outcomes.

Patient Reported Outcome (measures)



PRO is an umbrella term that covers a whole range of potential measurements, but it specifically refers to "self-reporting" by the patient or proxy

The patient-reported perspective can be an important asset in gaining treatment or drug approval

Questionnaires may be



Generic (designed to be used in any disease population and cover a broad aspect of the construct measured)

Condition-targeted (developed specifically to measure those aspects of outcome that are of importance for a people with a particular medical condition).

PROM regulator's perspective

Patients provide an unique perspective on treatment effectiveness

Adequacy of a PROM instrument to support a medical product claim depends on evidence that the PROM effectively measures the particular concept that is studied its measurement properties

Auchenze

PROM regulator's perspective



> Concept and domains to be measured, intended application should be well defined

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> Reliability, validity, ability to detect changes, definition of MCID and definition of responders should be established





The **minimal important difference** (**MID**), is the smallest change in a treatment outcome that a patient would identify as important and which would mandate a change in the patient's management



Several techniques to calculate the MID have been described and can be subdivided in roughly three categories: distribution-based methods, anchor-based methods and the Delphi method.

Distribution-based methods

Derived from statistical measures of spread of data: standard deviation, standard error of the measurement and effect size (which is based on standard deviations)

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Anchor based





The anchor based method compares changes in scores with an "anchor" as reference. An anchor establishes if the patient is better after treatment compared to baseline according to the patients own experience.

A popular anchor is the anchor question, at a specific point in time after treatment the patient might be asked: "Do you feel that you are improved by your treatment?"



The Delphi method relies on a panel of experts who reach consensus regarding the MCID.



The concept measured by the instrument should be relevant to the patient, i.e. reflecting their experience at the time of completion.

Parents/caregivers perspective versus the boys and young man with DMD (overall poor agreement between child self-report and parent/proxy report)

PROM patient perspective



What is really important to the patients?

Performance of Upper Limb, based on the 'wishes' of Duchenne boys was the basis of this PROM

DMD UL-PROM development



Multistakeholder activity initiated and funded by patients

Capturing clinical meaningful and relevant aspects by including patients/patients representatives in the creation of the tool

Publication



Development of a patient-reported outcome measure for upper limb function in **Duchenne** muscular dystrophy: DMD Upper Limb PROM. Dev Med Child Neurol. 2017 *Klingels K, Mayhew AG, Mazzone ES, Duong T, Decostre V, Werlauff U, Vroom E, Mercuri E, Goemans NM; Upper Limb Clinical Outcome Group..*





Generally assumed that a reduced physical ability and greater disease severity are the main factor determining impaired quality of life however a whole series of factor personal, cognitive, socialncontextual, relational, environmental, can impact greatly on QoL (subjective and multidimensional concept)



Multistakeholder Meetings



Researchers Clinicians







Multi-stakeholder Meetings

Insights

Guidelines

Indentification of gaps



Duchenne



EMA June 2013: Draft Guidelines

EMA May 2014: Small-scale meeting

EMA April 2015: Large stakeholder meeting

Duchenne US



Parents: Paper on patient preferences

Meeting with FDA

Development of Guidelines (patients in the lead)



Harmonisation Guidelines















Publications

Stakeholder cooperation to overcome challenges in orphan medicine development: the example of Duchenne muscular dystrophy. Lancet Neurol. 2016 Jul

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Straub V, Balabanov P, Bushby K, Ensini M, Goemans N, De Luca A, Pereda A, Hemmings R, Campion G, Kaye E, Arechavala-Gomeza V, Goyenvalle A, Niks E, Veldhuizen O, Furlong P, Stoyanova-Beninska V, Wood MJ, Johnson A, Mercuri E, Muntoni F, Sepodes B, Haas M, Vroom E, Aartsma-Rus A.

Publications





Muntoni F; Meeting Steering Committee and TREAT-NMD Network..

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