



CHALLENGES IN CLINICAL STUDY DESIGN IN RARE DISEASES

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Disclosure of Interests

Company A

Company B

Company C

Company :

Company :

Company Y



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 - Medical Research Council
 - European Commission
 - National Institutes of Health



SOLUTIONS
CHALLENGES IN CLINICAL STUDY DESIGN IN
RARE DISEASES

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Questions to address

What are the sample size and study design considerations in a rare disease study?

How do they differ or are they similar to considerations in diseases that are not rare?

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Questions to address

Is it justifiable to *combine* etiologically heterogeneous diseases with similar clinical, biochemical and histopathological features in the same study? If so, how would you design such a study?

Given the rarity of these diseases, can or should adults and children with the same disease be *combined* in the same study?

Is it justifiable to *extrapolate* clinical trial results obtained in one disease to other, etiologically and/or phenotypically related conditions in order to obtain broader drug approval? If so, what are the criteria for extrapolation (including consideration of genetic and histopathological information)?



Umbrella studies

Many candidate
treatments



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One condition



Umbrella studies

Basket studies

Many candidate
treatments



One condition

Many conditions



One candidate
treatment

Questions to address

combine heterogeneous diseases into the same study?

adults and children in the same study?

extrapolate results from one disease to another?

From a (statistical?) study design perspective – not impossible

But...

Interpretation / conclusions likely to rest substantively on how well we really understand disease biology and mechanism of drug action



Questions to address

What is the value of observational data, (e.g. registries, natural history studies), as supporting information?

My opinion... 100%...

THE COMBINATION OF RANDOMIZED AND HISTORICAL CONTROLS IN CLINICAL TRIALS

STUART J. POCOCK

J Chron Dis 1976, Vol. 29, pp. 175–188. Pergamon Press. Printed in Great Britain



Questions to address

What outcomes should be targeted in clinical studies?

clinical endpoints?

surrogates or other outcome measures?

patient-reported outcomes (not just QoL)

Non-renal manifestations of renal disease:

hypertension outcomes or cardiac outcomes?

what are the important cognitive, psychosocial, and developmental outcomes for adults and children?

- Implications/acceptance by drug regulatory authorities?
- We all want treatments that give *real* benefits to patients
- Treatments may be licensable – but indication wording may be limited



Questions to address

What are some of the ethical challenges in designing clinical trials in rare and ultra-rare diseases, especially in pediatrics?

Role of patient advocacy groups: How can different priorities and perceptions of stakeholders be best negotiated into the design of clinical trials?

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Questions to address

What are the major conceptual differences in clinical study design between academic and industry-driven clinical trials?

Quality, science, organisation, ...

Implications?

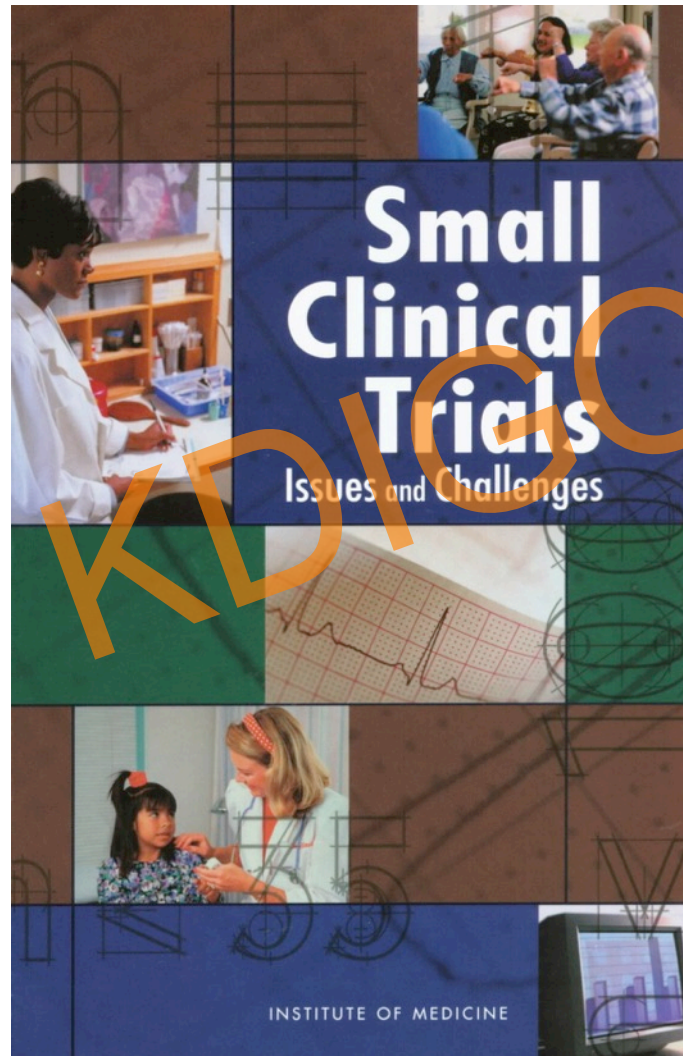
What's good and what's bad?

Is there a risk that better-funded industry studies may decrease patient availability for academic research?

Role of patient advocacy groups: How can different priorities and perceptions of stakeholders be best negotiated into the design of clinical trials?



We're not alone...



2001

*KDIGO Controversies Conference on Common Elements in Uncommon Kidney Diseases
June 16 - 19, 2016 | Amsterdam, Netherlands*



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European Medicines Agency

London, 27 July 2006

Doc. Ref. CHMP/EWP/83561/2005

**COMMITTEE FOR MEDICINAL PRODUCTS FOR HUMAN USE
(CHMP)**

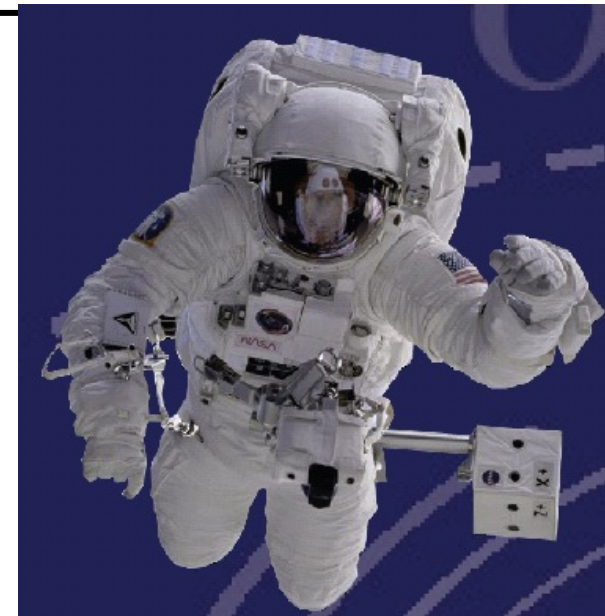
GUIDELINE ON CLINICAL TRIALS IN SMALL POPULATIONS

2006



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Rare Diseases: Common Issues in Drug Development Guidance for Industry



2009 – 2012(???)

2015

DRAFT GUIDANCE



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CONSULTANTS FORUM

Pharmaceutical
Statistics

(wileyonlinelibrary.com) DOI: 10.1002/pst.477

Published online 8 December 2010 in Wiley Online Library

A guide to the design and analysis of small clinical studies

Farid Kianifard* and M. Zahur Islam

Clinical studies, which have a small number of patients, are conducted by pharmaceutical companies and research institutions. Examples of constraints that lead to a small clinical study include a single investigative site with a highly specialized expertise or equipment, rare diseases, and limited time and budget. We consider the following topics, which we believe will be helpful for the investigator and statistician working together on the design and analysis of small clinical studies: definitions of various types of small studies (exploratory, pilot, proof of concept); bias and ways to mitigate the bias; commonly used study designs for randomized and nonrandomized studies, and some less commonly used designs; potential ethical issues associated with small underpowered clinical studies; sample size for small studies; statistical analysis methods for different types of variables and multiplicity issues. We conclude the paper with recommendations made by an Institute of Medicine committee, which was asked to assess the current methodologies and appropriate situations for conducting small clinical studies. Copyright © 2010 John Wiley & Sons, Ltd.

Keywords: exploratory study; pilot study; proof of concept; sample size



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