



# **Quality Framework for Clinical Trials:**

Delphi consensus on a comprehensive framework to Increasing QUality In academic clinical REsearch (INQUIRE)

von Niederhäusern B, <u>Briel M</u>, Pauli-Magnus C

SwissTPH Summer Symposium 2018



#### **Disclosures**

I have no actual or potential conflict of interest in relation to this presentation.

# Funding





# Trigger 2014





THE LANCET

A new Lancet Series



increasing value reducing waste in research

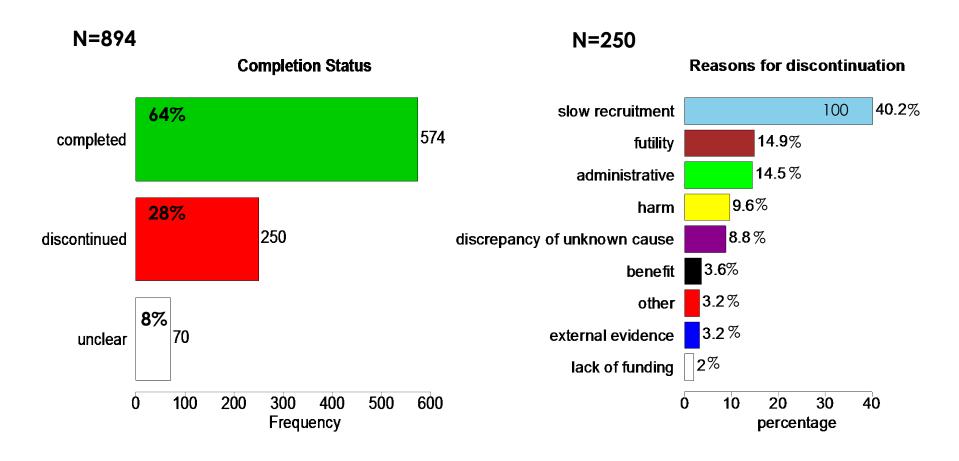
" (...) it is estimated that

85% of all biomedical

research is **waste**." (...)

# Many clinical trials are prematurely discontinued...

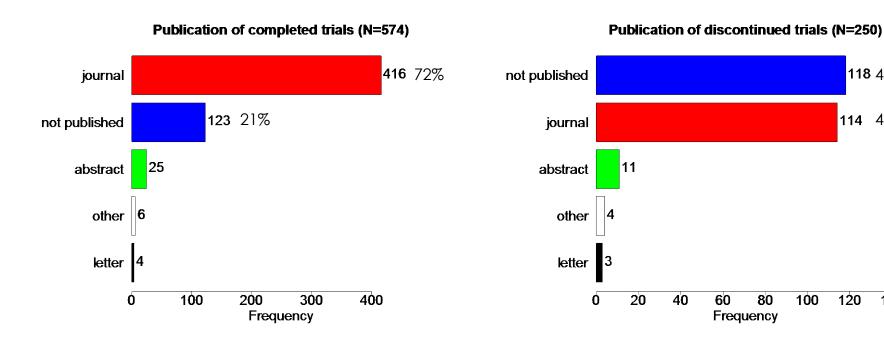
Most frequent reason: insufficient recruitment



Kasenda et al., JAMA 2014;311:1045-1051

## Many clinical trials are not published...

## discontinued trials in particular



Kasenda et al., JAMA 2014;311:1045-1051

118 47%

114 46%

120

140

## Who's listening?

# Trigger 2016

Review

# Increasing value and reducing waste in biomedical research: who's listening?



David Moher, Paul Glasziou, Iain Chalmers, Mona Nasser, Patrick M M Bossuyt, Daniël A Korevaar, Ian D Graham, Philippe Ravaud, Isabelle Boutron

The biomedical research complex has been estimated to consume almost a quarter of a trillion US dollars every year. Unfortunately, evidence suggests that a high proportion of this sum is avoidably wasted. In 2014, *The Lancet* published a series of five reviews showing how dividends from the investment in research might be increased from the relevance and priorities of the questions being asked, to how the research is designed, conducted, and reported. 17 recommendations were addressed to five main stakeholders—funders, regulators, journals, academic institutions, and researchers. This Review provides some initial observations on the possible effects of the Series, which seems to have provoked several important discussions and is on the agendas of several key players. Some examples of individual initiatives show ways to reduce waste and increase value in biomedical research. This momentum will probably move strongly across stakeholder groups, if collaborative relationships evolve between key players; further important work is needed to increase research value. A forthcoming meeting in Edinburgh, UK, will provide an initial forum within which to foster the collaboration needed.

Lancet 2016; 387: 1573-86

Published Online

September 28, 2015 http://dx.doi.org/10.1016/ S0140-6736(15)00307-4

Clinical Epidemiology Program, Ottawa Hospital Research Institute, Ottawa, ON, Canada (D Moher PhD, Prof I D Graham PhD); School of Epidemiology, Public Health and Preventive Medicine, University of Ottawa, ON, Ottawa, Canada (D Moher,

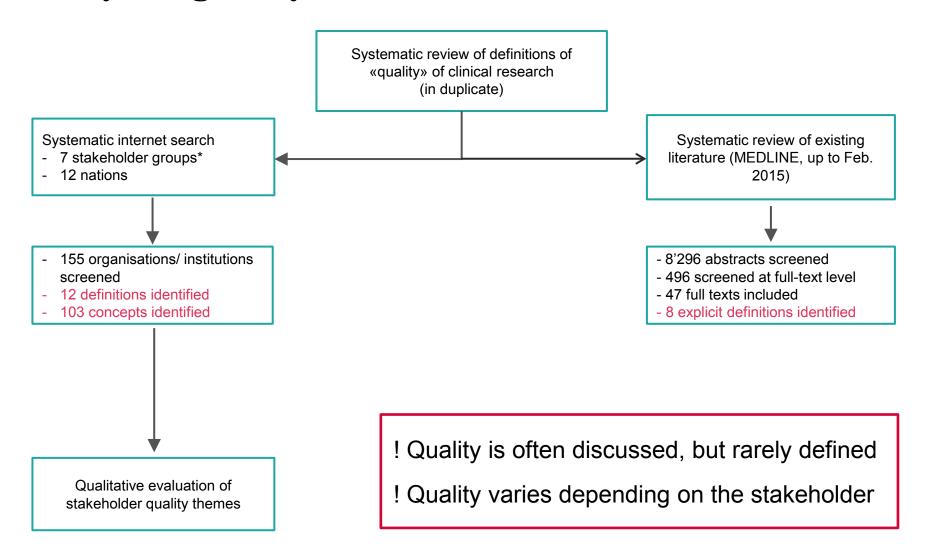
# Study aim

To develop a comprehensive framework for the quality of clinical research based on stakeholder consensus – and operationalization in and for the academic setting





# Study design I. Systematic review



<sup>\*</sup> governmental bodies, regulatory agencies, pharmaceutical industry / CROs, academic research initiatives / CTUs, ethics committees, patient organizations, funding agencies

# Quality varies depending on the stakeholder

#### **Governmental bodies / Jurisdiction**

"Relevant, transparent & ethical"

#### **Regulatory Agencies**

"Adherence to guidelines"

#### Ethics committees / IRBs

"Risk/benefit ratio & subject protection"

#### **Patients**

"Patient involvement & applicability"

#### **Funding Agencies**

"Feasible, generalisable & objective"

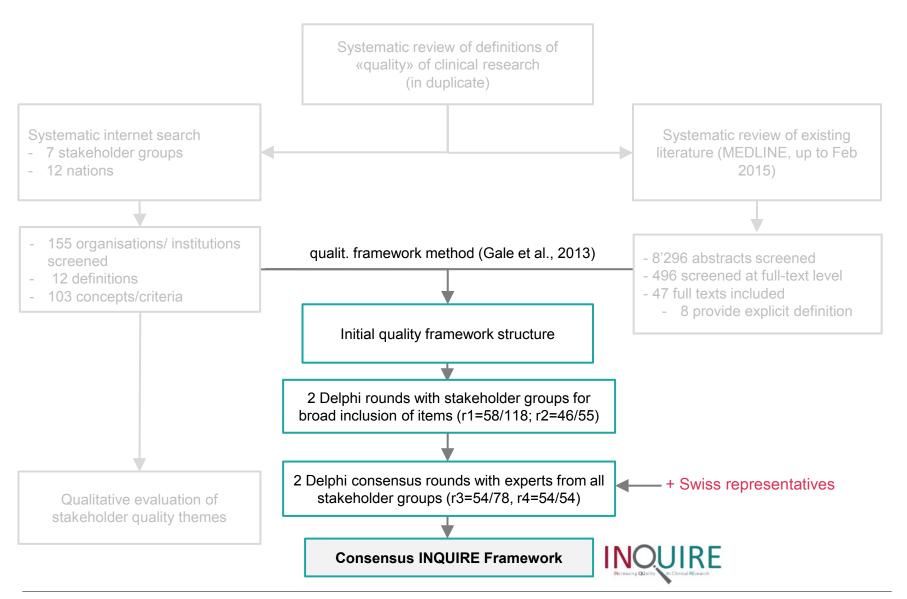
#### Pharmaceutical Industry / CROs

"High quality data"

#### **Academic Research / Initiatives**

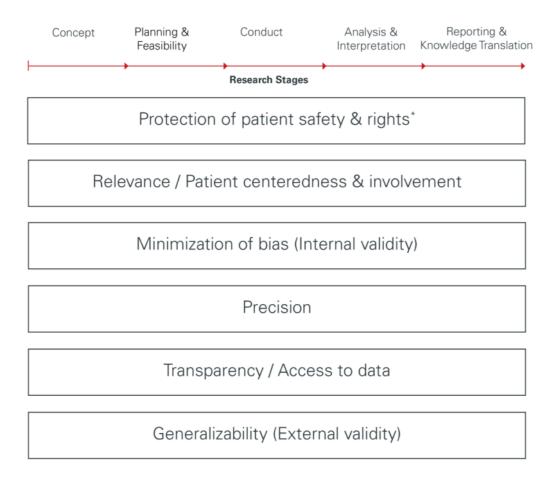
"Absence of bias, relevant & transparent"

# Study design II. Framework development

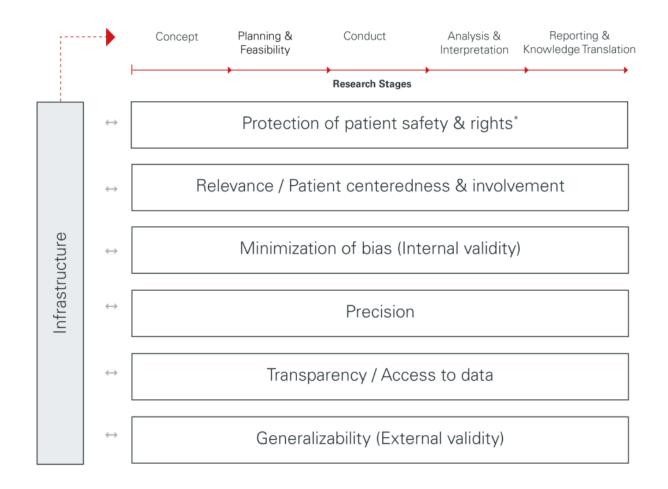




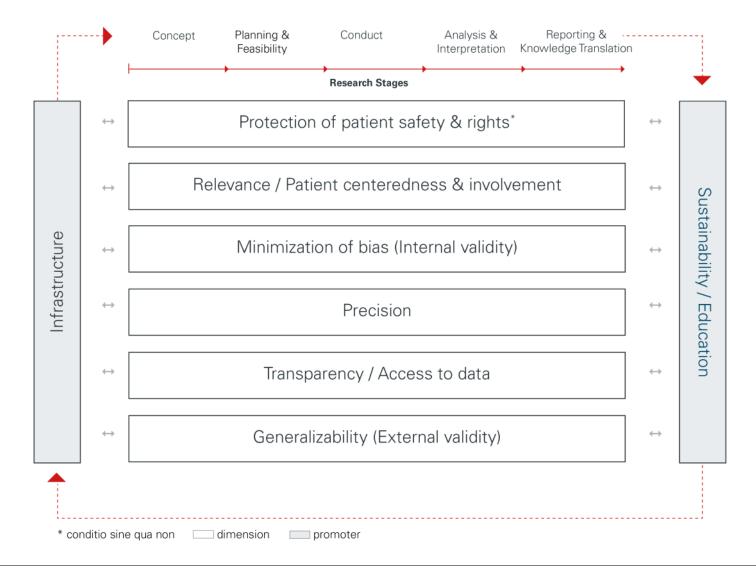




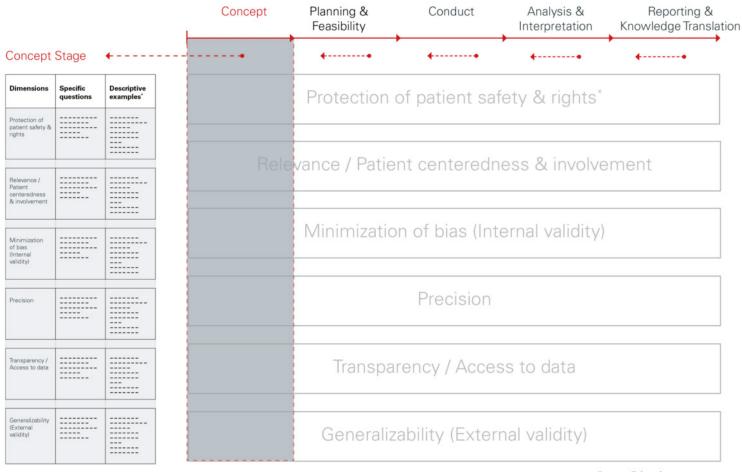








# **Results. INQUIRE Operationalization**



<sup>\*</sup> Appendix D \* conditio sine qua non



Milestone: Research question including study type defined and viable		
Dimension	Main question	
Protection of patient safety & rights	Can the research question be answered in the given setting?  Specific	
	Does study consider equity appropriately?	
	Is the research design adequate for the stage of an investigated technology to ensure patient safety?  Do the (assumed) short and long term benefits of the study outweigh potential risks associated with the study (consistent with clinical equipoise)?	
Relevance / Patient centeredness & involvement	Is significant add-on value to already existing evidence given, taking into consideration burden of disease and anticipated benefit of treatment?	
	Are patient representatives/ advocates and thein eeds and values adequately involved in the development of the research question?	
	Are outcome measures patient-relevant?	
Minimization of bias (internal validity)	Is the selected study type/design appropriate to minimize bias?  Are potential sources of bias anticipated,	
	evaluating the magnitude and the likely direction?	
	Are outcome measures well-defined, prespecified, valid, reliable and measured at appropriate times?	
Precision	Has estimate of the required sample size been made (for feasibility purposes, see "Protection of patient safety & rights")?	



quality questions

Dimension	Main question	Examples
Protection of patient safety & rights	Can the research question be answered in the given setting?	Based on a rough resource assessment, and potentially available study participants, is it feasible to answer the research question?  Based on a rough budget estimate, is it feasible to answer the
	Does study consider equity appropriately?	research question with a specified study type?  Are participants selected so that:  vulnerable individuals are neither targeted for risky research nor withheld from research relevant to these populations?  socially powerful individuals are not favored for potentially beneficial research?
	Is the research design adequate for the stage of an investigated technology to ensure patient safety?	Are sufficient data on toxicity/teratogenicity of an intervention available from animal studies or phase I studies?
	Do the (assumed) short and long term benefits of the study outweigh potential risks associated with the study (consistent with clinical equipoise)?	Descriptive example
Relevance / Patient centeredness & involvement  Relevance / Patient centeredness & Ar ne de	Is significant add-on value to already existing evidence given, taking into consideration burden of disease and anticipated benefit of treatment?	Are uncertainties in existing evidence identified and discussed in a systematic review?  Does research:  Expand or challenge current knowledge?  Open additional areas for new research activity?  Justify replication of existing evidence, if applicable?
	Are patient representatives/ advocates and their needs and values adequately involved in the development of the research question?	
	Are outcome measures patient-relevant?	Are outcomes patient-relevant, including quality of life, if applicable, and with judicious use of surrogate endpoints?
Minimization of bias (internal validity)  Are of evaluation of bias (special validity)  Are of special validity)	Is the selected study type/design appropriate to minimize bias?	Is the study randomized or, if not, appropriately controlled for confounding?
	Are potential sources of bias anticipated, evaluating the magnitude and the likely direction?	
	Are outcome measures well-defined, prespecified, valid, reliable and measured at appropriate times?	Are outcomes: well-defined (upfront)?
		valid (measure what they intend to measure)? reliable(stable and consistent when repeatedly measured)? sensitive to important change? measured at appropriate times?
Precision	Has estimate of the required sample size been made (for feasibility purposes, see "Protection of patient safety & rights")?	standardized across studies (core outcome sets, if applicable)

### Implications. The Swiss academic setting

#### NATIONAL (POLICY)

- Integration in Swiss Clinical Trial Organization (SCTO) quality strategy
- Support and contribution to REWARD campaign (register as supporting institutions)
- Raising awareness on waste and value (publications, events)

#### **NETWORK MEMBERS**

- Development of performance measures for CTU activities in project applications for the Swiss National Science Foundation's investigator-initiated clinical trial calls
- Agreement on performance measures for SCTO platforms (based on value indicators)
- Provision of tools and incentives for the operationalization of framework contents in clinical research projects

#### **RESEARCHERS**

- Provision of incentives for national Studies Within A Trial (SWAT) to evaluate impact of network activities
- Monitoring of clinical study conduct (retrospective/prospective)
- Teaching/Education

#### **Conclusions**

- Quality of clinical research is often discussed, but rarely defined & focus varies across stakeholders.
- Comprehensive framework on quality based on stakeholder consensus to (1) provide common guidance for researchers
   (2) establish a common goal among stakeholders
- Framework supports stakeholders (predominantly academic institutions) in the assessment of overall research quality at each stage of the research process and for multiple study types
- To effectively increase quality of research in Switzerland further work on the practical implementation / take-up / adaptations for specific settings and purposes are needed



Department of Clinical Research



# Thank you for your attention.

**Team Quality** (Basel, McMaster) Belinda von Niederhäusern Priya Satalkar Stefan Schandelmeier Lars Hemkens Marie Mi Bonde Marielle Rutquist Nicole Brunner Neera Bhatnaghar Gordon Guyatt **Matthias Briel** Christiane Pauli-Magnus

#### **Contact**

Matthias Briel (<u>matthias.briel@usb.ch</u>) Christiane Pauli-Magnus (<u>christiane.pauli-magnus@usb.ch</u>) Department of Clinical Research, University Hospital Basel