

Datahåndtering i praksis

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Hva er hensikten med å utføre datahåndtering i en klinisk studie?

- Det overordnede målet med datahåndtering er å opparbeide en database hvor data er identiske med de innsamlede data slik de foreligger i kildedokumentene
- Database skal inneholde data som er identifiserbare, av god kvalitet, lett anvendelige og tilpasset sitt formål
- Database som foreligger ved studiens slutt skal inneholde sporbare data.
- Og hva er av god kvalitet? Datakvalitet kan defineres som fravær av feil som har betydning for resultatet av studien.

Så hva er studiedata

Studiedata omfatter all informasjon som genereres, samles inn eller brukes i forbindelse med studien, alt fra eksisterende kilde-data til studiespesifikke vurderinger.

- Studiedataene skal inneholde nødvendig informasjon for:
 - å utføre den statistiske analysen spesifisert i protokollen og statistisk analyseplan
 - å overvåke deltakerens sikkerhet
 - å gjennomføre studien i henhold til protokoll
 - å sikre dataintegritet og datakvalitet

Flere typer studiedata

Data generert/rapportert spesifikt for studien (primær datainnsamling/ aktive data)	Data hentet fra kilder utenfor studien (sekundær databruk/passive data)
via CRFer, laboratoriemålinger, elektronisk pasientrapporterte utfall PRO/PROM eller mobile/digitale verktøy	tidligere kliniske studier, nasjonale registre som dødsårsaksregistret og reseptregisteret, sykdomsregistre som kreftregisteret, og medisinske og administrative journaler fra rutinemessig medisinsk praksis



EDC/DDC



EHR/EMR



Imaging



Payments



Laboratory



Sensor or
Wearables



Patient Reported
Outcome

Data Integrity means that the **Data is managed the right way**

Data Quality means that the **Data is credible and reliable**

Dataintegritet

Data er håndtert på en riktig måte, dvs. at kravene til ALCOA og god dokumentasjon er oppfylt

A ttributable
L egible
C ontemporaneous
O riginal
A ccurate

+

C omplete
C onsistent
E nduring
A vailable

Guidance primarily addresses data integrity & **not** data quality since the controls required for integrity do not necessarily guarantee the quality of the data generated. **MHRA 2018**

Datakvalitet

Data er troverdig og pålitelig. Data er egnet til formålet, vitenskapelig plausibel og pålitelig

High-quality data may be defined as data strong enough to support conclusions and interpretations equivalent to those derived from error-free data

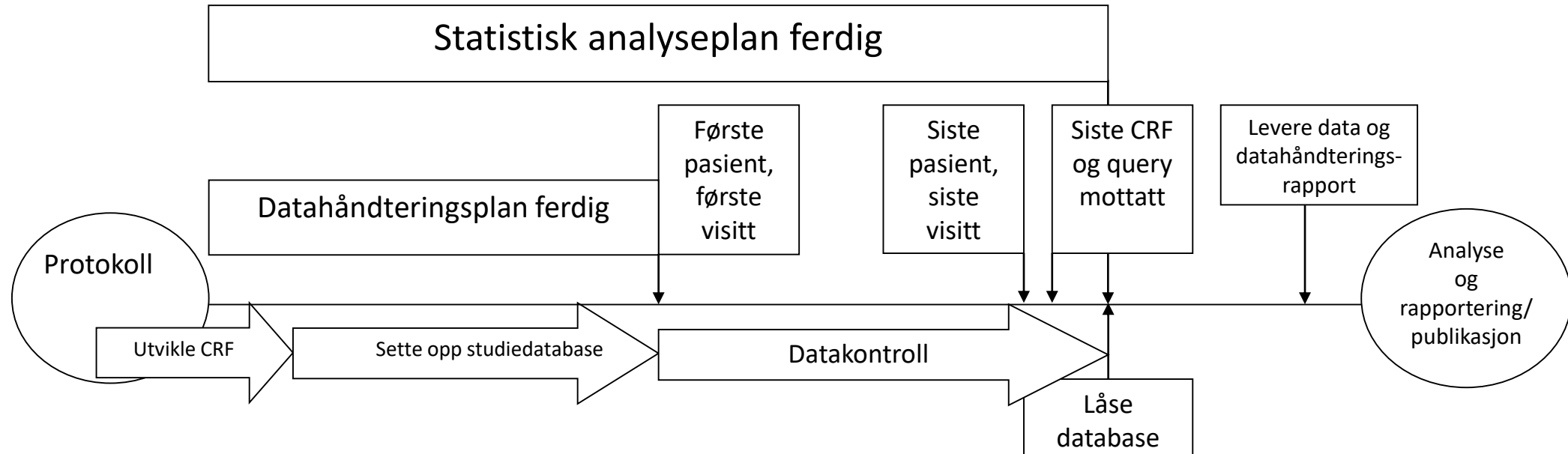
INSTITUTE OF MEDICINE 1999

The assurance that data produced is exactly what was intended to be produced and fit for its intended purpose.

This incorporates ALCOA. **MHRA 2018**

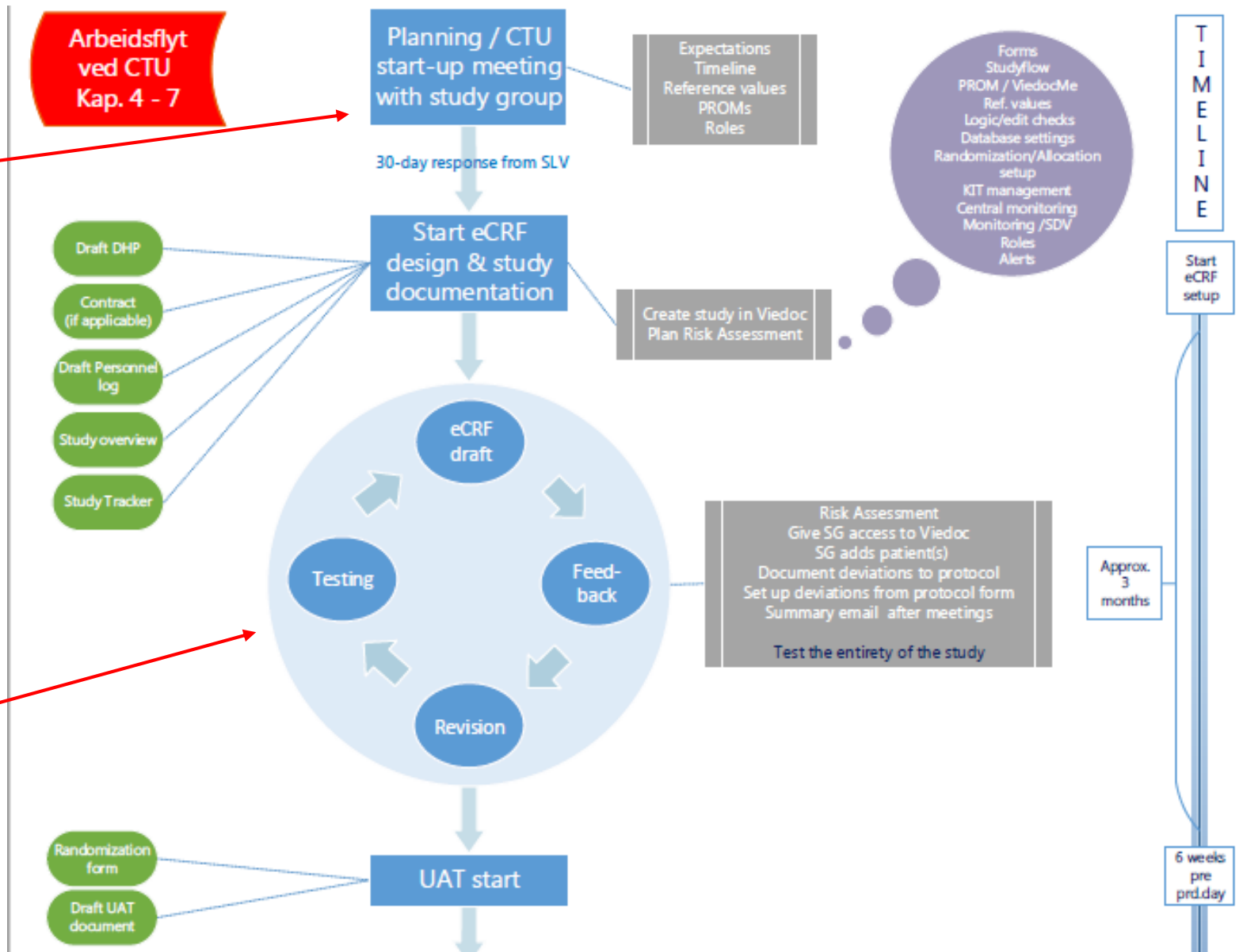
Dvs. kontrollere dataintegritet og sikre kvalitet på dataene vil bidra til troverdige studieresultater

Tradisjonell datahåndteringsprosess i en klinisk studie



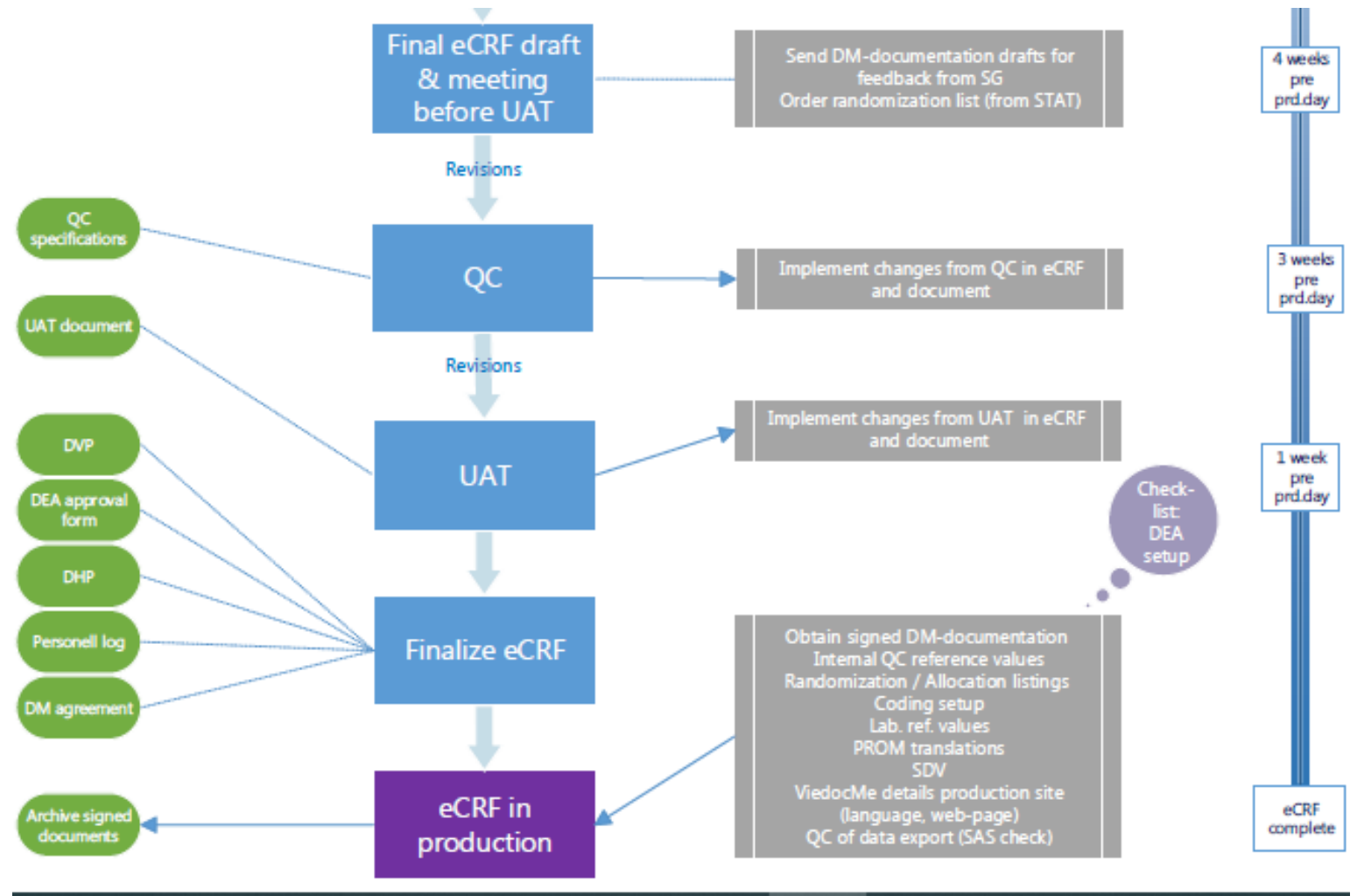
Oppstartsfase

- Tverrfaglig (TF) kartleggingsmøte
- Review av protokoll med DM perspektiv
- Legge en tidsplan
- En dedikert kontaktperson i SG
- Variabler og formater fra SG om mulig
- TF møter også underveis i utviklingen



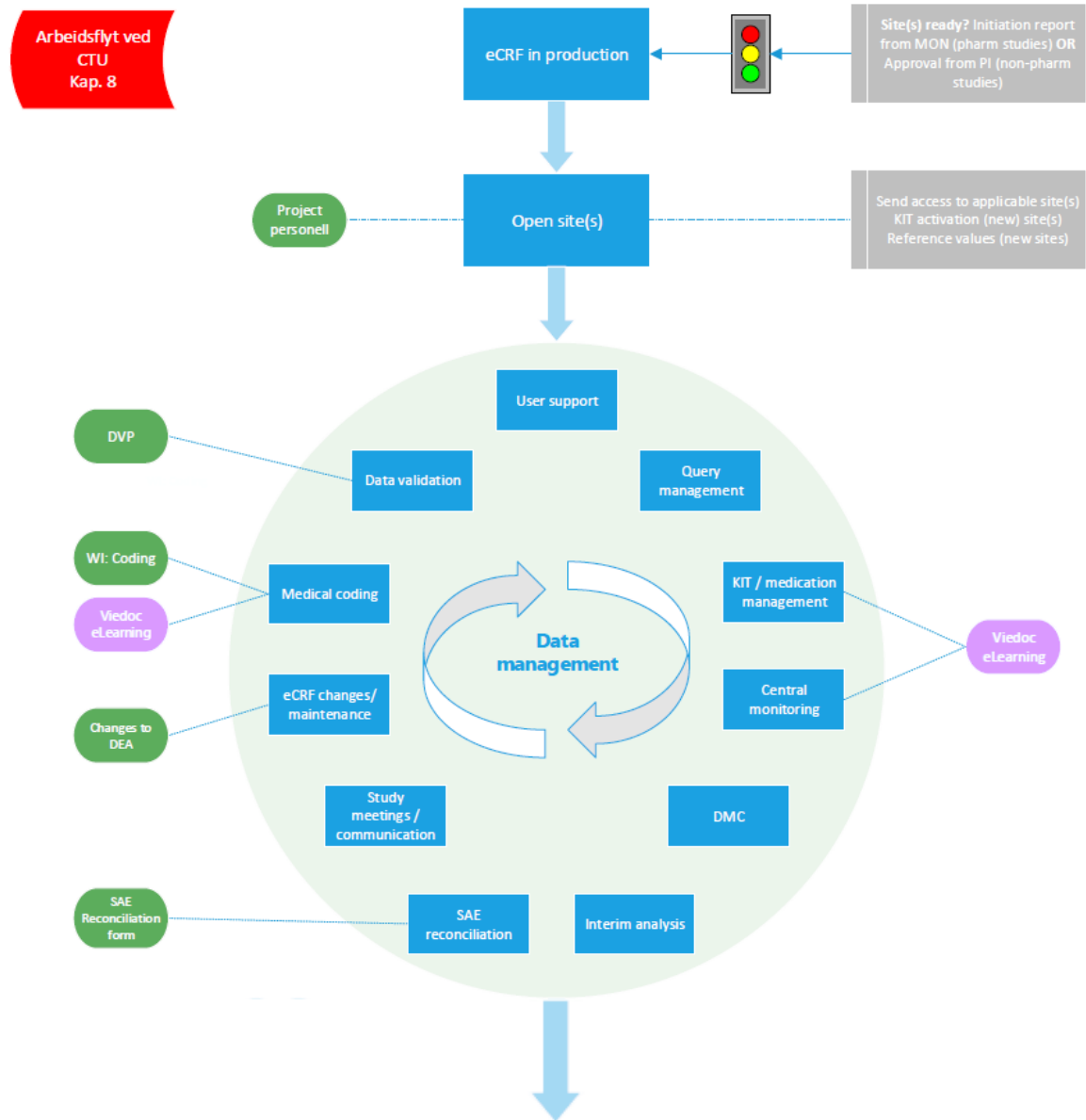
Oppstartsfasen forts.

- Oversettelser av PROMs til andre språk, testet av brukere/SG
- TF involvering i UAT (User Acceptance Testing)
 - Statistikere -> primære / sekundære utfallsmål
 - Monitorer -> SDV og monitoreringsplan vrs valideringsplan
- Involverer QC av en annen datahåndterer
- Godkjenning av eCRF skal dokumenteres



Gjennomføringsfase

- Kan være korte eller lange studier
- Et eller flere sentra
- Nasjonale /internasjonale
- Komplekse utfallsmål -> utfordrende validering
- Safety rapportering til et eller flere legemiddelfirmaer med ulike krav til omfang og tidsfrister
- Interimsanalyser og leveranser til DMCer
- Koding av medisinske termer
- Randomisering med Drug Logistics, håndtering av legemidler fra produsent til site
- **Viktig med regelmessige møter med interne og eksterne i teamet!!!!**

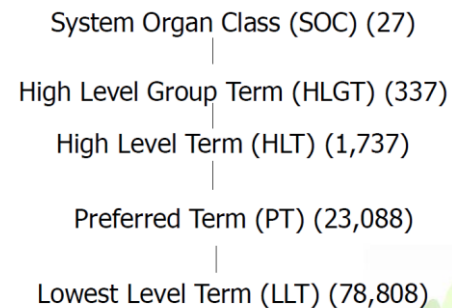


Koding av medisinske termer

Her kommer AI/ML inn og kan bidra til mindre bruk av tid og ressurser!!

Incidence of Adverse Events in Individual Studies						
SOC / Adverse event	Reported incidence by Treatment Groups					
	Study X			Study Y		
	Drug X 60mg bid N=104	Drug x 30mg bid N=102	Placebo N=100	Drug x 60mg bid N=200	Drug Y 100mg qid N=200	
Nervous system disorders						
Headache	N (%)	N (%)	N (%)	N (%)	N (%)	N (%)
Dizziness	N (%)	N (%)	N (%)	N (%)	N (%)	N (%)
Gastrointestinal disorders						
Nausea	N (%)	N (%)	N (%)	N (%)	N (%)	N (%)
Vomiting	N (%)	N (%)	N (%)	N (%)	N (%)	N (%)
Flatulence	N (%)	N (%)	N (%)	N (%)	N (%)	N (%)

Synonym	LLT	PT
Progressive headache	Headache aggravated	Headache
Worsening episodic headache	Headache aggravated	Headache
Light pressure on head	Head pressure	Headache
Head pressure in the morning	Head pressure	Headache



Drug logistics

Study supply overview

All countries All sites

VALID 1 ALLOCATED 19 RETURNED 0 QUARANTINED 4 EXPIRED 93 INVALID 12 TOTAL 129

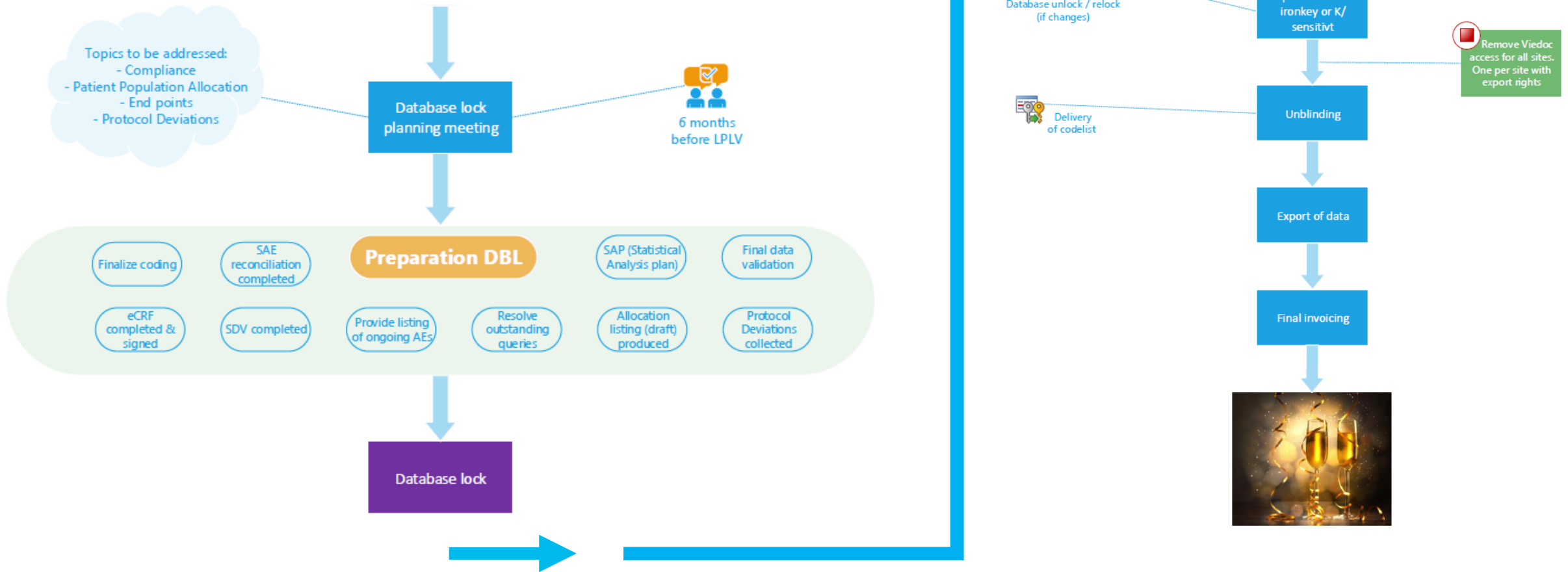
#	Site	Kit type	Valid	👤	↩️	⚠️	🕒	🚚	❌	Kits in total
1	Central depot	Active - Active	0	0	0	0	22 🚚 +2	5 (5)		29
		Placebo - Placebo	0	0	0	0	21 🚚 +2	5 (5)		28
2	Basel	Active - Active	1	0	0	0	14	1 (1)		16
		Placebo - Placebo	0	1	0	0	10	1 (1)		12
3	Geneva	Active - Active	0	2	0	0	5	0		7
		Placebo - Placebo	0	5	0	0	4	0		9
4	RIO	Active - Active	0	3	0	2	3 🚚 2	0		8
		Placebo - Placebo	0	3	0	2	3 🚚 2	0		8
5	Sao Paulo	Active - Active	0	2	0	0	3	0		5
		Placebo - Placebo	0	3	0	0	4	0		7

Showing 1 - 5 of 5 | Previous | Next

View per page 10 | 20 | 50 | 100



Gjennomføringsfase forts. og DB låses



Hva er det nye innen faget datahåndtering?



https://scdm.org/wp-content/uploads/2022/03/2019_Evolution-of-CDM-to-CDS-Part-1-Drivers.pdf

Så utvikler prosessen seg med risikobasert tilnærming

E2e RBQM: On-Site, Remote, Central Monitoring and rb-CDM
Scientific and Operational Data Oversight: Workload, Audit Trail, etc.

Traditional CDM Process



Risk-Based CDM Process



RBQM is integrated e2e by Design
This is not an independent activities or just an add on

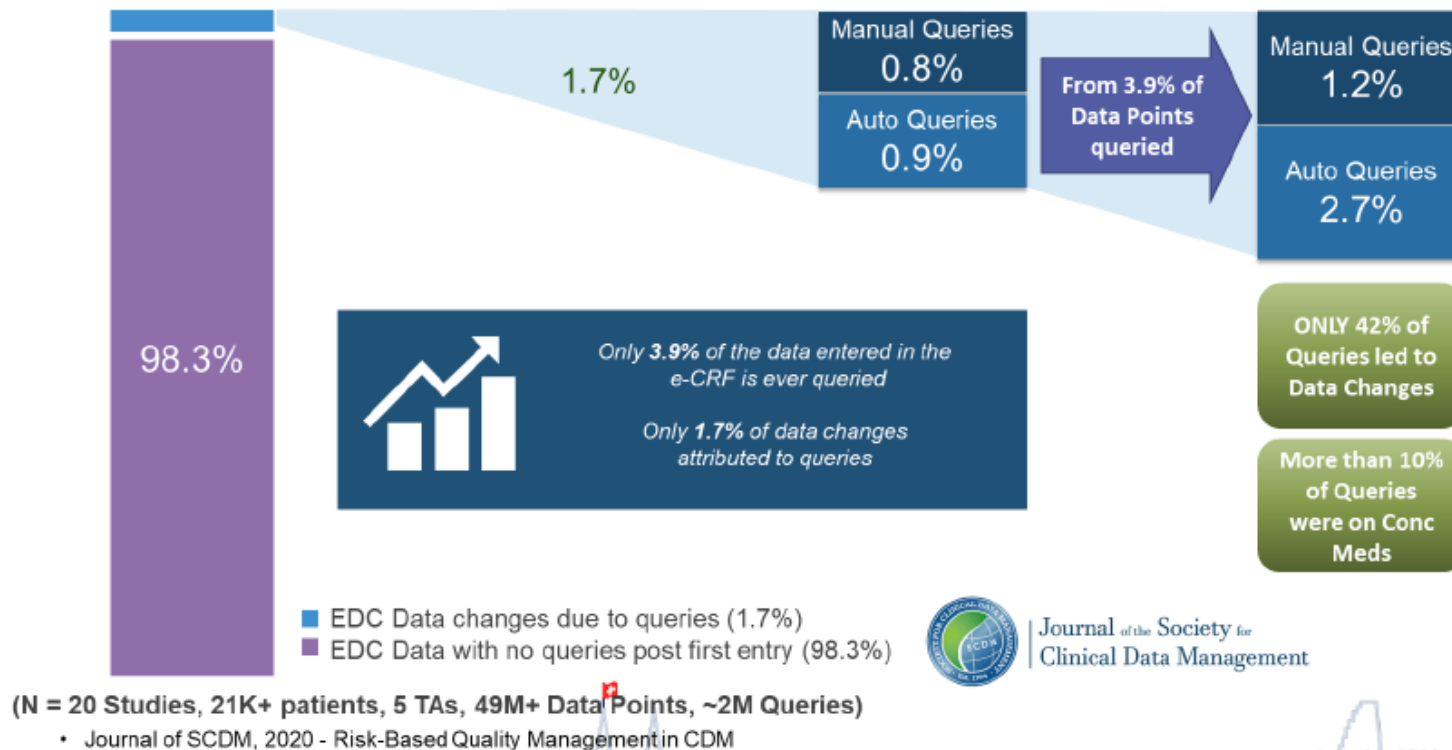


[SCDM-rb-CDM-July-6th.pdf](#)

Hva får vi ut av tradisjonell validering?

Her kommer AI/ML inn og kan bidra til mindre bruk av tid og ressurser!!

Data Changes in EDC due to Queries



Sentral monitorering

- På tvers av studiedeltagere og senter i en studie, ved hjelp av målinger av indikatorer og bruk av statistiske metoder

Noen generelle momenter som gjelder for de fleste studier

- Hvor lang tid til besøk blir fylt ut
- Antall queries per senter, type queries, tid til besvarelse
- AE og SAE per senter og antall pasienter, husk normalisering f.eks. på tid i studie

Studiespesifikke beregninger

- Varians og standardavvik av viktige variabler
- OBS: Skal ikke forveksles med interimanalyser og vurdering av effekt

Risk Indicators ↓ by Key Risk Indicator ↓

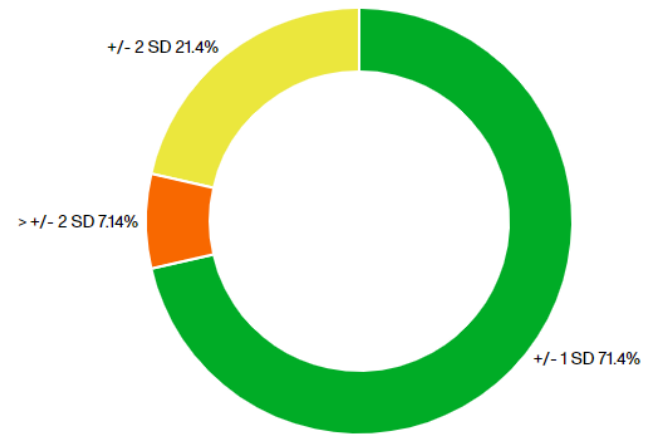
xlsx ↓ **Download**

status for key risk indicator # of AE per subject



Select key risk indicator

- # of AE per subject
- Confirmed missing items per subject
- Unconfirmed missing items per subject
- Open queries per subject
- Closed queries per subject
- Rejected queries per subject
- Query response lag (in days)
- eCRF data entry lag (in days)
- Overdue events per subject
- Pending forms per subject
- Data changes per form
- Signature lag (in days)
- SFR %
- DOR %



Name	Country	Site Code	Site Name	Key Risk Indicator	Site Value	Study Mean	Study Deviation	Thresholds
ANT	Lithuania	14	Lithuania	# of AE per subject	0.57	3.69	1.41	
ANT	Norway	11	Levanger	# of AE per subject	5.20	3.69	1.41	
ANT	Norway	2	Ahus	# of AE per subject	5.16	3.69	1.41	
ANT	Norway	8	Førde	# of AE per subject	6.33	3.69	1.41	
ANT	Norway	1	OUS	# of AE per subject	4.43	3.69	1.41	



Indikatorer og toleranseverdier for kvalitet

Key Risk Indicators - spesielle faktorer for den enkelte studie

- Hva er kritisk i denne spesifikke studien?
- F.eks. antall «**Withdrawals (WD)**» og så definere QTL (Quality Tolerance limit) for denne indikatoren. Parameteren kan være **#WD**, **#WD/# included participant** eller **#WD/# participant visits**

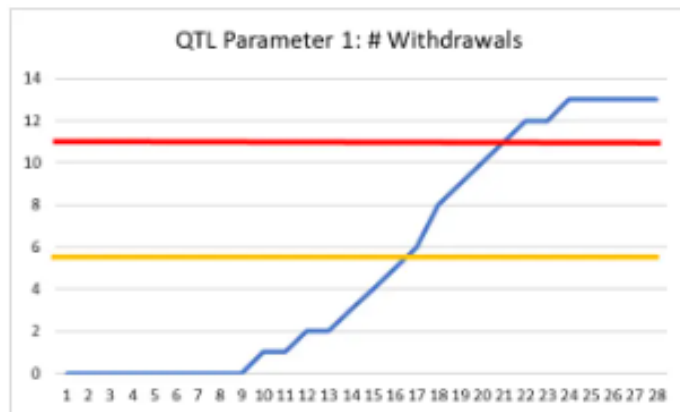


Figure 2a

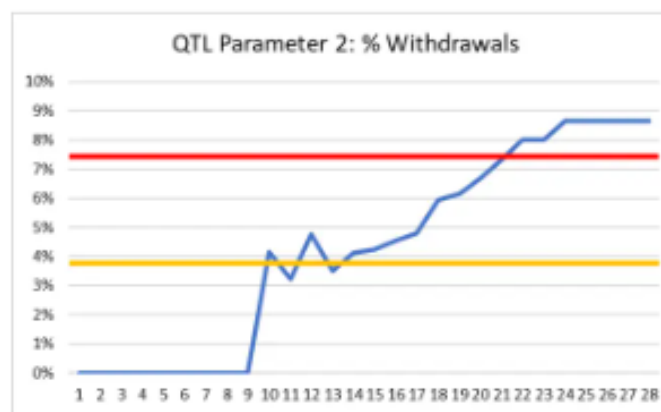


Figure 2b

[Defining Quality Tolerance Limits and Key Risk Indicators that Detect Risks in a Timely Manner: Reflections from Early Adopters on Emerging Best Practices \(Part 3\) \(appliedclinicaltrials.com\)](#)

Regulatoriske krav til til DH og datafangstverktøy i LM


- GCP ICH R2
 - https://www.ema.europa.eu/en/documents/scientific-guideline/guideline-good-clinical-practice-e6r2-4-step-2b_en.pdf
 - Pålagt å ha er kvalitetssystem / prosedyrer
 - «Investigators copy» uten sponsors tilgang
- EMA Guideline on Computerised Systems and Electronic Data in Clinical Trials (erstatter PIC/S, kom 1 mars 2023)
 - [Guideline on computerised systems and electronic data in clinical trials \(europa.eu\)](#)
 - Inspection ready
 - Sponsor/hovedutprøver skal vite om leverandørens kvalitetssystem/system life cycle
- eCF Requirements for Electronic Data for Regulated Clinical Trials
 - [Downloads \(eclinicalforum.org\)](#) Dette er en sammenfatning av krav, kan brukes som en sjekklister






Krav til at Sponsor/hovedutprøver skal vite om leverandørens kvalitessystem/system life cycle

AKF OUS Save changes Close

Organization Settings








Details SSO **VIRP**

 **Viedoc Inspection Readiness Packet (VIRP)**
Please find below the complete list of available VIRPs for download.
The rationale behind the packet can be found [here](#).

Version	Release date	
 Viedoc 4.77	2023-10-05	Download
 Viedoc 4.76	2023-06-21	Download
 Viedoc 4.75	2023-04-25	Download
 Viedoc 4.74	2023-03-07	Download
 Viedoc 4.73	2022-11-29	Download










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File Rediger Vis Bokmerker Verktøy Hjelp

Legg til Pakk ut Prøv Kopier Flytt Slett Egenskaper

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Navn	Størrelse
 Viedoc 4.60 Release certificate JP.pdf	577 569
 Viedoc 4.60 Release certificate.pdf	281 202
 Viedoc 4.60 Acknowledgement Form.pdf	114 545
 Viedoc 4.60 JPMA EDC Checklist.xls	130 560
 Viedoc 4.60 Quality System TOC.pdf	373 012
 Viedoc 4.60 Release Notes.pdf	70 008
 Viedoc 4.60 User Requirement Specification.pdf	572 590
 Viedoc 4.60 User Requirement Traceability Matrix.pdf	489 064
 VIRP Introduction.pdf	233 386

Litt ekstra om Viedoc

The essentials

viedoc clinic™

For the investigator
Manage all your trial data in one engaging solution

viedoc admin™

For the study manager
Get your study started – and keep it running smoothly

viedoc designer™

For the study builder
Create your own professional study – no advanced design or coding skills needed

Secure

All data is safeguarded using high-level security measures, including robust backup systems, advanced data encryption, and audit trails of all activity.

Future-proof

New updates are released regularly, all backward-compatible. No additional system validation is required for new releases.

Inspection-ready

Full documentation that meets inspection requirements, updated with every release.

The addons

viedoc me™

For the subject
Reliable data collection, directly from the source

viedoc connect™

For the decentralized trial
Fully integrated support for Televisits and eConsent

viedoc logistics™

For the supply manager
Smooth, secure and seamless inventory tracking and randomization

viedoc tmf™

For the sponsor
Powerful documentation management on investigator and sponsor level

viedoc reports™

For the data manager
Tailorable reporting for quicker, deeper insights

The essentials Viedoc Clinical

Electronic Data Capture

Features for collection, viewing and reviewing of CRF data in an ICH GCP compliant manner, including capture of binary data (images / documents)

Sign data on form, visit or patient level

Link data between forms (e.g. AE and CM)

Laboratory reference values with time, location and factor scope

Medical coding

Feature supporting MedDRA, WHO Drug B3- and C3-formats (certified by UMC)

ATC classification system and IDF

Batch coding

Coding approval

Data review and cleaning

Data management review

Clinical review

Data lock on form, visit patient and study level

Selective SDV on item level

Role based query management

Randomization and allocation

Pre-computed static list or a dynamically generated / randomized list

Individual and Global allocation lists

RTSM (trial supply management in Viedoc Logistics)

Data export, API and metrics

24 / 7 output to Excel, CSV, SAS, PDF / A (compliant to FDA submission, eCTD) and CDISC ODM formats

Scheduled exports

Online data preview and chart visualization

API for import and export of data in CDISC ODM

Real-time metrics on data quality and performance

Training and certification

Online documentation and eLearning (documents, links, videos)

Certification with automatic creation of user diploma

User logs (PDF and Excel)

Messages

Email alerts for data events, data status and milestones

Local-language SMS / text messages / reminders sent to subjects

Other

ISO 27001 compliance

Two-factor authentication

SSO (single-sign-on)

Support for eSource DDC

Multilingual

Regulatory compliance – EMA, FDA, JPMA, CFDA

Compliance with personal data protection laws – GDPR (EU), APPI (Japan), HIPAA (US), PISS (China)

Audit trail and electronic signatures compliant with FDA 21 CFR part 11

Contemporaneous and independent investigator copy created at each CRF save

Support for simultaneously running unlimited versions of a study configuration

The essentials Viedoc Admin

General study maintenance

Role delegation service
Study level database lock feature
Study-recreation from a previous snapshot (CDISC ODM)
Unique and fully self-service study decommissioning feature including status reports and archiving recommendations
Documentation and certification management
Assignment of study designs
Study settings
Study license management
API management
TMF management
RTSM management
Reference data management
Medical coding dictionary management

Site and user management

Site creation, with code, time zone, type (production / training), recruitment metrics
User management, with invites, resets, and removals

System / organization management

System user management
SSO configuration
VIRP (Viedoc Inspection Readiness Packet)

The essentials Viedoc Designer

Study building

Drag-and-drop form design with more than 18 different item types to choose from

Form preview allowing the designer to verify layout, conditions and checks directly onscreen

Automatic creation of blank and annotated CRFs

CDISC CDASH form library with over 20 ready-to-use forms

Ready-to-use study templates in CDISC ODM XML format

Form translator for managing multiple study languages

Best-in-class support for complex study designs/requirements

Version management

Seamless support for mid-study changes due to protocol amendments, updated requirements or adaptive trial design

No migration of data like in other systems

Support for simultaneously running unlimited versions of a study configuration

Transportability / import / export and off-line examination / revision of the configuration in CDISC ODM XML format

Automatic creation of abbreviated and complete study configuration report

Conditions / Validation / Logic

Support for configurable responsive / interactive visibility conditions on a role-, study schedule- or data dependency-level

Automatic design validation upon publishing a study design

Java script expression editor for faster, more high-quality code

Support for configurable calculated values (close to unlimited in algorithm complexity level)

Realtime field-level edit checks, cross-form checks and data derivations

Value added services

Custom study build services

Study build certification