

# Session 4: Real World Evidence – Qualification of data sources

## The Cystic Fibrosis experience

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# European Cystic Fibrosis Society Patient Registry

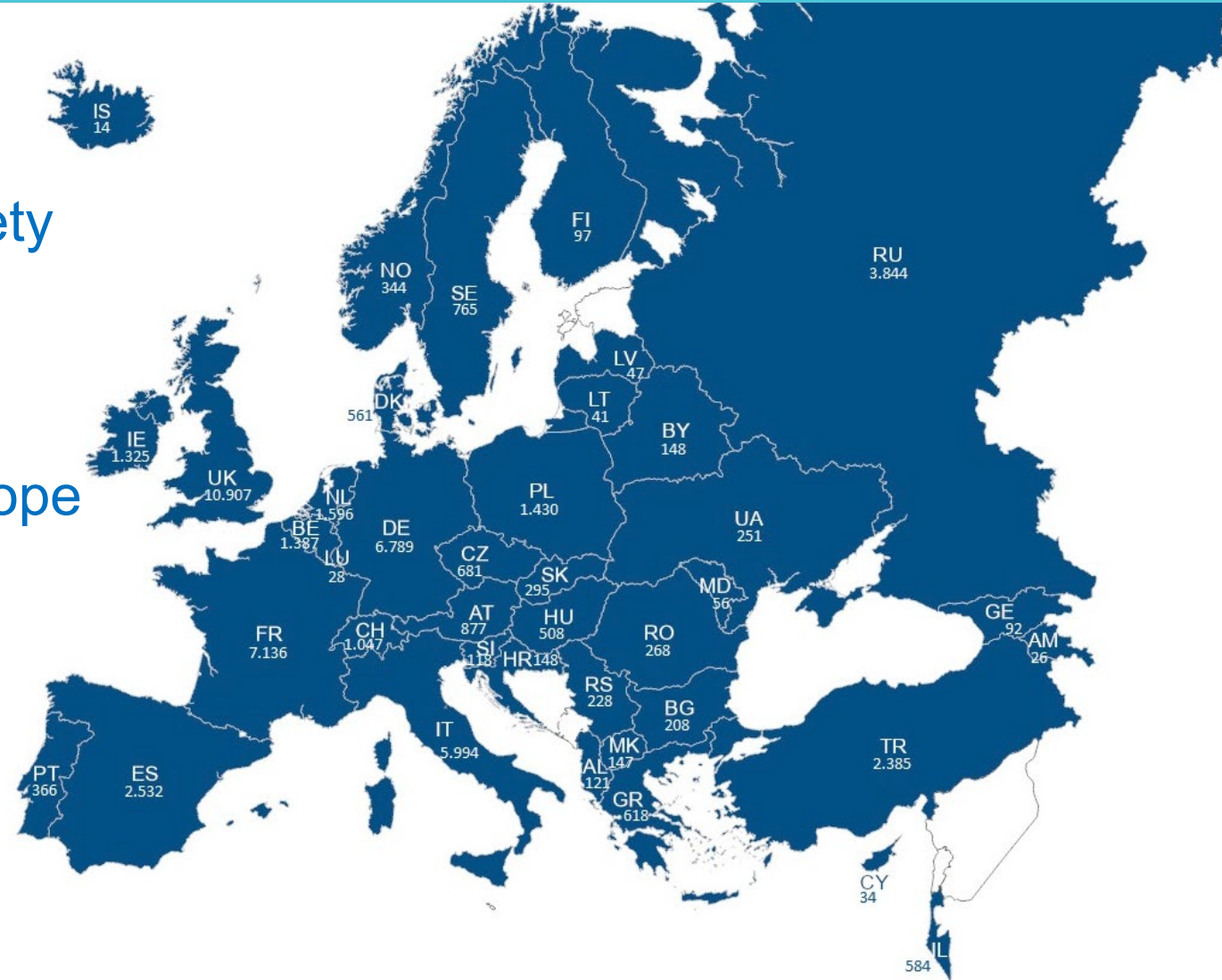
Holder: European Cystic Fibrosis Society

Founded: 2003

To collect data and compare CF in Europe  
(definition: WHO region)

Stakeholders:

Clinicians, Patient, Researchers,  
Health Authorities



# European Cystic Fibrosis Society Patient Registry

2021:  
**54.043 patients**  
from **40 countries** (17 National Registries)

Output:  
Annual Data reports, Scientific publications



# European Cystic Fibrosis Society Patient Registry

KEY`s TO SUCCESS:

**HARMONISED**

Dataset, Quality Control,  
Governance, GDPR

**SUSTAINABLE**

**TRANSPARENT**

**INDEPENDENT**



# ECFSPR - Pharmacovigilance



EUROPEAN MEDICINES AGENCY  
SCIENCE MEDICINES HEALTH

- 2016 Start discussions with European Medicine Agency  
-> ECFSPR as model for other rare diseases
- 2017 Workshop on CF registries  
([www.ema.europa.eu/en/documents/report/report-cystic-fibrosis-registries\\_en.pdf](http://www.ema.europa.eu/en/documents/report/report-cystic-fibrosis-registries_en.pdf))
- 2018** **Qualified by EMA** as an appropriate data-source for post-authorisation safety (PASS) and efficacy studies (PAES) of new therapies  
([www.ema.europa.eu/en/documents/regulatory-procedural-guideline/qualification-opinion-european-cystic-fibrosis-society-patient-registry-ecfspr-cf-pharmaco\\_en.pdf](http://www.ema.europa.eu/en/documents/regulatory-procedural-guideline/qualification-opinion-european-cystic-fibrosis-society-patient-registry-ecfspr-cf-pharmaco_en.pdf))
- 2019 First application for a pharmacovigilance study (EUPAS43022)



# Pre Qualification Process

Workshop with MAH, EMA, Patient representatives and Registry holder:

- ❖ GOVERNANCE
- ❖ INFORMED CONSENT, DATA PROTECTION AND DATA SHARING
- ❖ PROCESS FOR DATA UPLOAD
- ❖ DATA ELEMENTS
- ❖ DATA QUALITY



# Pre Qualification process - Topics

- ❖ GOVERNANCE
  - Communication to public, MAH and Regulators
  - Central contact point for Europe
- ❖ INFORMED CONSENTS, DATA PROTECTION AND DATA SHARING
  - Informed consent (Secondary use of registry data (GDPR) vs. separate informed consent)
  - Aggregated data vs raw data
- ❖ DATA QUALITY
  - Agreed set of data quality indicators (completeness and accuracy)
  - Source data verification
- ❖ DATA ELEMENTS
  - Registry description
  - **Annual dataset** vs encounter dataset
  - **Disease specific complications** vs all complications/all AE
  - **Disease specific medications** vs all medications



# Pre Qualification process - Suggestions

- Triangle discussion between MAH, EMA, Registry (including Patients) is critical!
  - Clarification of limitation`s and challenge`s
  - Governance
  - Data quality
- Guidelines on registry based studies
- Checklist REQueST TOOL





# Qualification process – Experience

- ❖ Framework needed to be established from scratch
- ❖ Process:  
Clear, strict, direct and good communication
- ❖ Timeline:  
Challenging for a large consortium like the ECFSPR
- ❖ Structure:  
Questions and background information
- ❖ Issues:  
Short timelines



# Qualification process – Experience

- ❖ Framework needed to be established from scratch
- ❖ Process:  
Clear, strict, direct and good communication
- ❖ Timeline:  
Challenging for a large consortium like the ECFSPR
- ❖ Structure:  
Questions and background information  
→ **Structured description**
- ❖ Issues:  
Short timelines → **need for a Clock-stop**



# Qualification process – ECFSPR Experience

- ❖ Reputation inside the ECFS and outside
- ❖ Commitment to work on EMA`s requirements
- ❖ Resources to close the gap between commitment and demands
  - ❖ Keep the balance between core business/commitment and PMV-studies
- ❖ PMV requests:
  - ❖ Drug utilization of an Orphan drug over 40 countries (EUPAS43022) (2020-2024)
  - ❖ PAES for an Orphan drug and a specific age group including 11 countries (2020-2024)



# Post Qualification process – Experience

- ❖ Triangle discussions is lacking → **active role of EMA**
  - MAH – EMA
  - Indirect involvement of the Registry
- ❖ Follow up by the EMA
  - Indirect feedback → **direct feedback on methodology**
  - Regular updates
- ❖ Transparency of impact and uptake of a methode is difficult → **ENCePP**
  - Confidentiality
  - PMV study period
- ❖ Reconfirmation / Requalification → **continuous dialogue**



# Conclusion – The CF experience

The Qualification Opinion was a challenge and a milestone:

- ✓ Different aims /perspectives / “languages“
- ✓ Balance between quality and quantity of data
- ✓ Balance between resources and demands
- ✓ Balance between commitment and professionalising
- Continuous adjustment and enhancement of the Registry
- Continuous dialogue with MAH and EMA

