



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

Important considerations for successful qualification proposals for digital technologies.

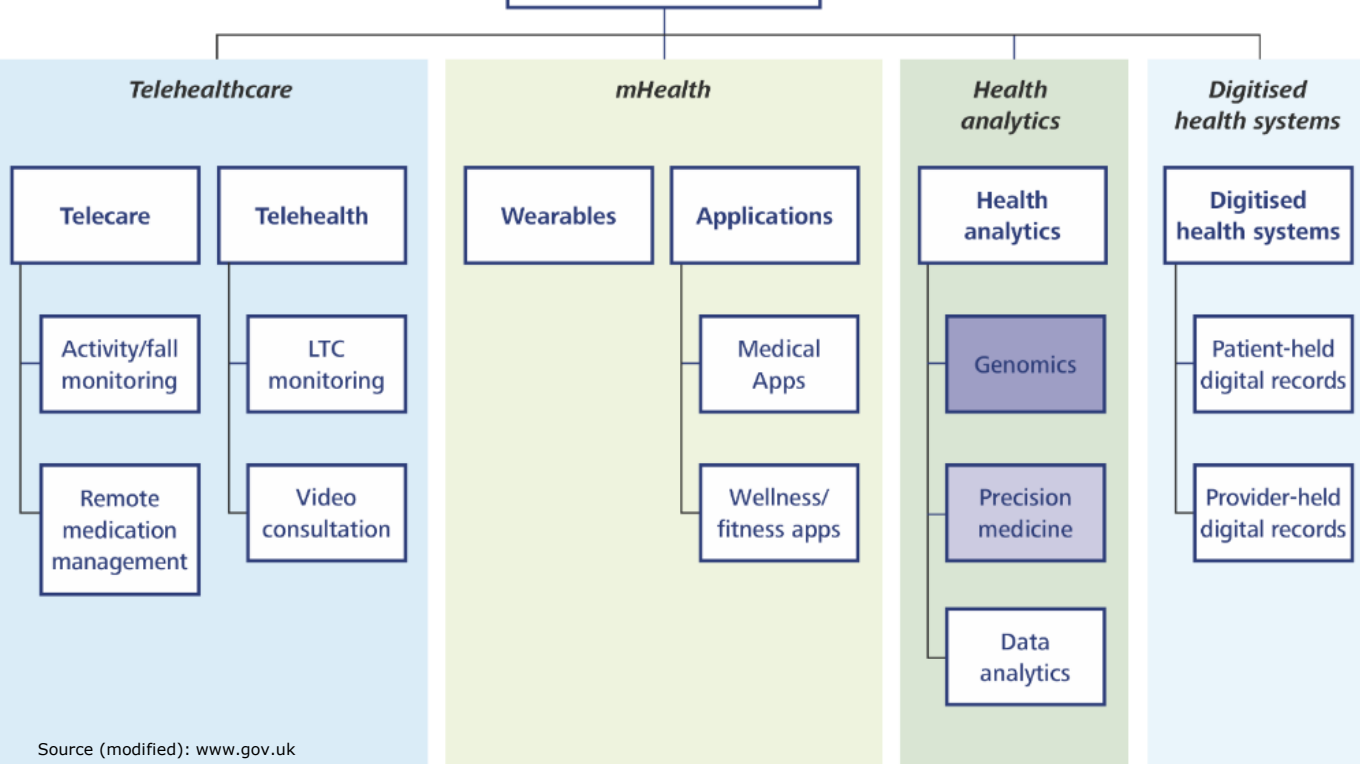
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Industry Stakeholder Platform on R&D support
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Digital Health



EMA ROLE

- Remit
- Awareness
- Support innovation
- Support seamless decision making
- Guidance (within remit)

Self-care ◇◇◇ HC provider/patient relationship ◇◇◇ Medicines authorisation

Possible Benefits of digital health in clinical trials

- Potential to streamline clinical investigations (rare diseases, health records, recruitment optimisation)
- Potential for rapid response
- Decrease missing data/automated checks
- Patient functioning in real-world setting
- Off-site and remote data capture
- Enrol/monitor patients in distant locations
- Support Adherence

Currently:

- *Complement rather than substitute*
- **Function**
- **Feel (?)**
- **Data collection Systems**



*Data must be linked to **meaningful clinical benefit***
Wearable technologies qualification is no exception

Identify Patient
Population
**Context of Use &
Concept of Interest**
for Meaningful
Treatment Benefit

Select or Develop
Outcome
& Pilot Test

Evaluate
Measurement
Properties

Develop
Meaningful
Change
Guidelines



EMA Qualification Opinion/Advice



Too much of a good thing?

Some real examples:

- Fast internet speed needed for data upload (eg 100 data points/sec in 3 axes)
- Interpretation of findings may be different from investigator rated scale (Variability of mobility patterns by time of day/region; Compliance of monitor wearing drop)
- Estimands for missing data? (missing times)

Data collection systems

- EMA Remit
- National Competent Authority remit
- Law beyond pharmaceutical (GDPR)
- Global applicability
- Interoperability (even at local level): burden/cost

EMA experience

- Development of novel outcome measures (e.g., COA, biomarker) for use in multiple drug development programs (e.g. Sarcopenia, Duchenne)
- eSource: GCP implications for RCTs (compliance, traceability...)
- Ingestible sensor for adherence measurement
- Scientific advices and ITF meetings on adherence / appropriate medication (chronic diseases : COPD, diabetes)
- Participation to IMI initiatives (e.g. SPRINT-T)

EMA is interested and open to innovation and engagement early and throughout clinical trial endpoint development

Challenges and opportunities

- Potential to **simplify and improve** data collection
- **Data** handling may depend on purpose (Local, Cloud, data protection, data integrity).
- **multiple** stakeholder responsibilities and **remit** (likely in EU)
- Compliance with some legal requirements required+assumed?
- May be more straightforward to **validate** as PRO rather than clinical outcome.
- **HTA** involvement welcome – ADL and function
- Strengthen/forged link with **notified bodies (?)**
- Fine line between adherence and “promotion”?



Early regulatory engagement is essential, if dossier/proposal will be heavily reliant on these data

Background information:

[eSource Qualification opinion](#)

[Guidance](#) on qualification of novel methodologies

[Ingestible sensor](#) qualification opinion

[Data privacy workshop](#)

["Big data" workshop](#)



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Thank you for your attention

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