

EMA Workshop on Hemophilia Registries

Industry Perspectives

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- Hemophilia products
 - Plasma-derived
 - Recombinant
 - Long-acting
- Industry looking for ways to improve circumstances and outcomes for patients > can registries help?
- Not enough has been learned about patients > can registries help?
- Opportunity and value of genotyping in predicting immunogenicity > can registries help?

General limitations:

- Large number of competing registries
 - competition for limited resources & potential for biased participation
- Collection of large amount of data, without clear focus on answering particular question
 - large databases with data entry compliance issues
- Some registries designed to answer very specific questions
 - if data mined for non-originator questions - answers are incomplete or misleading

General limitations (continued):

- Data entry not consistently monitored/ tracking not in place
 - Data from single patient potentially entered across multiple participating centers
 - > avoid double reporting/counting
 - Patient often lost to follow up (move/death), thus patient status may be inaccurate
 - > ensure adequate follow up
- Examples of different registries:
 - >PedNet (RODIN study)
 - >EUHASS

1. Experience with product-specific and disease-specific registries and pros & cons:
 - Valuable tool for collecting information on rare events/ rare diseases, but also on epidemiology and public health profile

EUHASS registry:

- Product-specific and disease-specific
- Well-designed registry collecting information to answer specific question
- Inclusion of large network of participating centers, with monitoring and confirmation of data
- Can be used to answer specific clinical questions

2. How to strengthen the outcome of registries?

- Consolidate existing registries into basic registry/ies to answer specific question/s and obtain concise pertinent information > relevant scientific information is added
- Ensure data entry is up-to-date and accurate > requires proactive review program
- Design registries to answer specific questions with defined core data set
- Collect data more systematically, avoid administrative hurdles
- Data mostly generated in hemophilia treatment centers (HTCs)

3. How can industry contribute?

- Support and technical know-how
- Support consolidation of many individual registries into 1-2 covering most important questions and complying with clean data entry
 - > avoids patchwork distribution of data and misleading information (if data mined for questions not part of original database purpose)
- Assist in setting up centralized data entry process > data entered through single portal
 - > minimizes demands on site staff and helps with simplification and site participation

- Point to consider:
 - Registries are a public health tool > shouldn't support ideally come from public health domain?

How can registries help

- Answers to particular, well-defined clinical, laboratory or genetic questions:
 - Monitoring of patients' outcomes (inhibitor development)
- Inform on design of future drug development and clinical trials:
 - Currently no formal link between registries and ongoing clinical trials > utilization as predictive tool and risk reduction for patient safety and drug development through:
 - Immunogenicity prediction/assessment implementation
 - HLA typing and genotyping (considering ethnicity, geographical location)
 - Patient stratification, especially with small patient populations

4. How could/ should regulators contribute?

- Commitment to include registry data in phase IV clinical trial assessment
- Revision of requirements for rare disease assessment based on availability (and quality) of registry data
- Support development of unique patient identifiers for registries

- FDA Immunogenicity Workshop: September 17 - 18, 2015 (NIH, Bethesda, Maryland, USA)
- Topics: Genetic basis of immunogenicity of coagulation proteins
 - Glycobiology and immunogenicity
 - Animal models
 - Fusion proteins
 - **Registries**
- Participants:
 - PPTA task force
 - Steering committee: FDA, NIH, PPTA, NHF, Clinicians



For further information, comments or questions, please contact:

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The Pfizer logo, featuring the word "Pfizer" in white script font inside a blue oval.