

General Assembly - Paediatric Clinical Trials sustainability in the framework of the Paediatric Regulation Maria J. Mellado

Scientific Meeting and General Assembly
The Paediatric theme in the forthcoming
clinical research scenario.

Bambino Gesù Hospital. Rome 19 December 2016.

European Network of Excellence for Paediatric Clinical Research

PCT SUSTAINIBILITY. AIMS

- To discuss the challenging matter of the sustainability of PCT in the framework of the Paediatric Regulation
- To provide expertise on this with issue based in the experience conducted within the FP7 funded projects
- How to make a PCT more feasible.



1. MULTI-STEPS STRATEGY AND PLANNING TO AVOID PATIENT'S RETENTION

• **Expertise** of previous Networks/ Centres PCT

- Develop a "<u>Go further Guidelines</u>" as an strategy before the start CT by team directive
- Pre-determinate <u>rapid key step's</u> patient's movements in Trial phases.
- <u>Effective Feed back</u> to the promotor, Ethics committee, and Medical Agencies



HOW TO PROMOTE THE PATIENTS RETENTION AT PCT

- After acepted go on CT: innovative <u>follow up</u>: call phone i
- Adolescents: <u>possible reward</u> (money, tablets...) no too big, avoiding participating only by reward.
- Key point: CT Health-benefit, not only academic answer
- Informed consent: <u>confident person</u> with parents and patients involved on minor care (young, critical situations)



2. 'PATIENTS TAILORED APPROACH' INCLUDING CHILDREN, FAMILIES AND ASSOCIATION

- "<u>To achieve a consolidate patients organization in each area</u>"
 Only well stablished in chronical diseases
- Need set up a "<u>Real Conscientious Association</u>": Easier when a structure are yet implementing: Oncology, HIV...
- Challenge: Push no expert families, new diagnosis, neonates...
- Create: <u>Training Team for CTP in families-children</u>" in each CT: working before starting; specially in adolescents, acute tasks.
- Meet <u>"face to face"</u> Family Association- Regulatory-Industry



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2. 'PATIENTS TAILORED APPROACH' INCLUDING CHILDREN, FAMILIES AND ASSOCIATION

Initiatives as KIDS Barcelona/ Young people UK

Involved children/parents on <u>information consent</u>

 Invoved children/parents on <u>CT desing</u>: Prior accepting difficults samples or technicals by <u>achieving a real compromise</u>.



3. UNIQUE PROCEDURE AND A UNIQUE ACTA "PACKAGE OF DOCUMENTS' FOR ECS AND CAS SUBMISSION

- "CT Unique Acta- Unique Procedutre": Be the rule in PCT proposal by promotor as a condition for CT implementing
- Regulatory bodies supported this plan from a <u>telematics</u> door
- CT promotor develop the procedure in all areas/centres.
- Information to <u>Ethics Committees</u> about Unique CT Procedure for all researching points: Facilitating approvals



4. TRIAL MANAGEMENT ORGANIZATION: SOPS, DATA- DRUG MANAGEMENT, PHARMACOVIGILANCE, MONITORING AND QUALITY ASSURANCE

- "Transversal Global Trial Management Organization" stablished and consolidate on PCT at in draft period ...OBLIED???
- Similar CRO: Important infra-structure requirements
- Including PCT: daily clinical practice as a profession, not doing CT at free time
- Stakeholders's accepted before CT starting.
- **TGTMO**: Achieve quickly study implementation and provide <u>safety</u>: homogenization monitoring and help researcher less experienced
- TGTMO: dissemination before CT set up
- More guaranties for implementing to the countries/centres.



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5. DEDICATED PROJECT MANAGER/ TRIAL LEADER

- "Transversal Global Trial Management Organization" team head- Procedure safety stablishement
- Setting <u>new tools Group for feasibility</u>
- Systematic management <u>CTP training expert group</u>
- <u>Implementing across Europe</u>: solve differences between countries before CT
- Critical mass expertise Group useful at ongoing PCT

6. RISK BASED MONITORING APPROACH TO THE PCT

- Planned Data Base recovering <u>PCT risk on events</u>
- Unique available tools (E.g. "Red cup"): free, intuitive DB for recovering together events no predictable CT.
- Part of systematic training Group on PCT
- Type monitoring are conditioned by type of drugs and pathology
- Children population have to monitoring: weithg /heith curves, sexual development and neurodevelopment



FINALLY: "Apply lesson learned"

- PENTA-ID, PRINTO, pTBnet, RITIP, pTBred
 Networking structure
 Methodology
 Ethics
- Disseminating and also training also <u>PCT</u>
 <u>expertise</u>

