

Presented by Bess LeRoy Head of Standards Development, CDISC 10 June 2021







Meet the Speaker

Bess LeRoy

Title: Head of Standards Development Organization: CDISC

Bess LeRoy is the Head of Standards Development at CDISC. Bess has been a CDISC team member since 2011. She is a member of the CDISC Technical Leadership Team and leads the Global Governance Group. Bess has over 15 years' experience working in public health research and has held positions at the Framingham Heart Study, the Rotterdam Study, the Arizona Cancer Center, and the Critical Path Institute.

Bess has a BS from the University of Michigan, an MPH from Boston University School of Public Health, and is currently pursuing a DrPh from Johns Hopkins Bloomberg School of Public Health.



Agenda

- 1. What happened over the last year?
- 2. What are we working on now?



What Happened Over the Last Year?



Standards and TAUGs Published in the Last Year

Foundational Standards

- SENDIG v3.1.1
- SEND Conformance Rules v3.0
- Conformance Rules for Define-XML v2.1

Therapeutic Area User Guides

- Heart Failure Therapeutic Area User Guide v1.0
- Diabetes Type 1 Therapeutic Area User Guide v1.0 -Pediatrics and Devices Modules
- Psoriasis Therapeutic Area User Guide v1.0
- Acute Kidney Injury
 Therapeutic Area User
 Guide v1.0



Other Documents Published in the Last Year

COVID-19 Resources

- Interim Guide
- Ongoing Studies
- Resources for Public Health Researchers

Example Documents

- LOINC LB Mapping Spreadsheet
- SDTM Metadata
 Submission Guidelines v2.0



Development of ADaM QRS Supplements

 First Questionnaire Supplement to the Analysis Data Model Implementation Guide - Geriatric Depression Scale Short Form (GDS SHORT FORM)





New QRS Supplements				
	Short Name (CAT)	SDTM Domain/ADaM Dataset	Permission	Version Release Date
Kurtzke Functional Systems Scores	KFSS	RS	Public Domain	Version: 2.0 3 Apr 2021
Abnormal Involuntary Movement Scale	AIMS	RS	Public Domain	Version: 2.0 3 Apr 2021
Eastern Cooperative Oncology Group Performance Status	ECOG	RS	Public Domain	Version: 2.0 3 Apr 2021
Karnofsky Performance Scale	KPS SCALE	RS	Public Domain	Version: 2.0 3 Apr 2021
Inflammatory Bowel Disease Questionnaire	IBDQ	QS	Granted	Version: 1.0 3 Apr 2021
Disability Rating Scale	DRS	RS	Public Domain	Version: 2.0 3 Apr 2021

FOLLOWS STANDARD DEVELOPMENT PROCESS OUTLINED IN COP-001

POSTED FOR 30-DAY PUBLIC REVIEW



PUBLISHED IN BATCHES MULTIPLE TIMES A YEAR

https://www.cdisc.org/standards/foundational/qrs





CDISC Conformance Rules

Conformance Rules Operational Group



Operational group representing all CDISC Foundational teams



Harmonize as much as is reasonable



Help define and support a clearly defined structure for management within the CDISC Library



Boost knowledge and expertise across teams that develop rules

Development of Rules Catalog for Each Standard



The published rules catalog is cumulative (e.g., SDTMIG v3.3, SDTMIG v3.4)

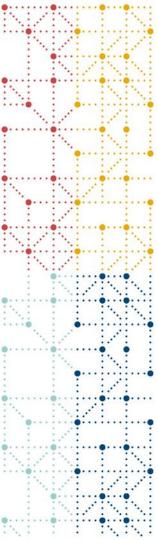


When the current catalog is published, the previous catalog will be archived but accessible from the CDISC website for that standard



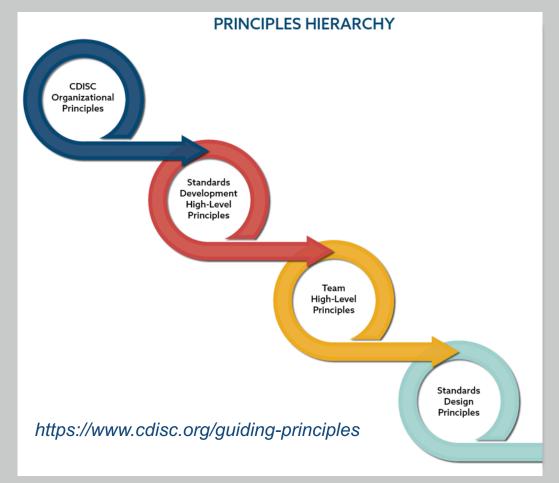
Teams may also publish a supplemental "read me" document with additional information about rules (e.g., development approach)





CDISC Guiding Principles

CDISC Guiding Principles







CDISC Implementation Primer

CDISC Primer

Content to introduce new users to CDISC

- Topics covered:
 - How to get started with CDISC
 - Links among CDISC standards
 - Traceability

https://www.cdisc.org/primer



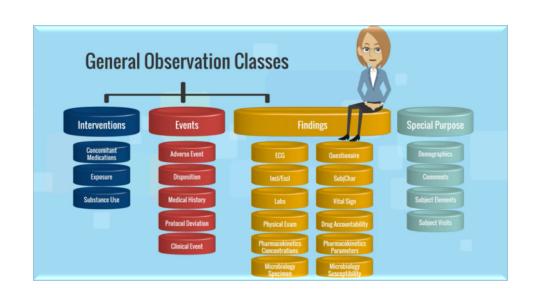




Getting Started with CDISC

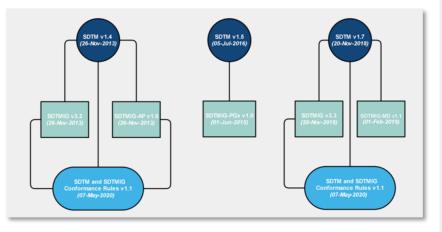
3-Minute Videos Covering

- CDISC Foundational Standards
- Controlled Terminology
- Therapuetic Area User Guides
- Regulatory Requirements





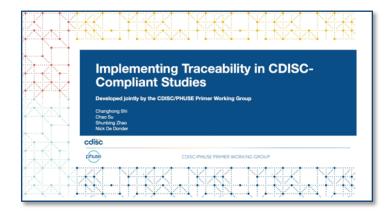
Links Among Standards

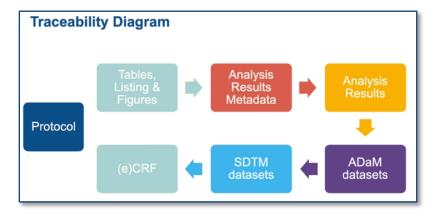


A Study Data Tabulation Model Implementation Guide (SDTMIG) is developed in reference to a specific SDTM model. However, the SDTM is cumulative - each new release builds on the previous model. Therefore, the models are backward compatible. For example, SDTMIG-AP v1.0 was developed in reference to SDTM v1.4, but it may be used in a submission Implementers should be aware that if they are referencing a model for which the IG was not originally developed, variables may have been added or deprecated from the model. In addition to models and implementation guides, conformance rules have been developed, which help to ensure that generated data structures conform to the standards. These rules aim to identify all conformance rules and case logic from the SDTM and SDTMIG, classifying and codifying them in a form that supports quality processes and tool development. Related SDTMIG v3.3 SDTMIG for Medical Devices v1.1 SDTMIG-PGx v1.0 Conformance Rules v1.1 for SDTMIG v3.2 and v3.3 SDTMIG v3.2 SDTM v1.4 SDTMIG for Medical Devices v1.0 SDTMIG-AP v1.0 Conformance Rules v1.1 for SDTMIG v3.2 and v3.3 SDTMIG for Medical Devices v1.1 SDTM v1.7 SDTMIG for Medical Devices v1.0 SDTM v1.4 23 January 2012 SDTMIG-PGx v1.0 SDTM v1.5 1 June 2015 SDTMIG-AP v1.0 SDTM v1.4 Conformance Rules v1.1 for SDTMIG v3.2 and v3.3



Traceability









What Are We Working On Now?





Foundational Standards and Therapeutic Area User Guides

Updated Standards Release Schedule

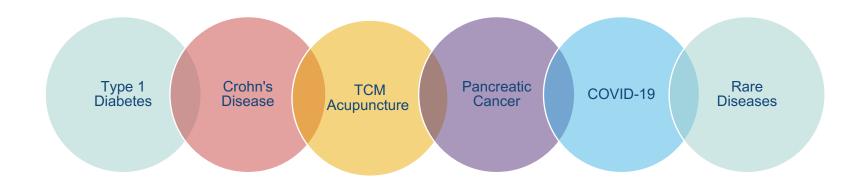




- Informative content and Normative Standards released once completed COP-001
 - Normative content is released with conformance rules
 - Relevant CDISC Library content released at time of publication
- CT and QRS released quarterly
- To provide predictability and transparency, a specific foundational standard will be released no more than once every other year, with a preferred cadence of 3-5 years



Therapeutic Area User Guides Currently In Development



https://www.cdisc.org/standards/in-development



2021 Anticipated Foundational Standards Publications

ADaMIG v1.3 and Conformance Rules

ADaMIG OCCDS v1.1 and Conformance Rules

ADaMIG Medical Devices v1.0 and Conformance Rules

ADaMIG Non-compartmental Analysis v1.0 and Conformance Rules

CDASH v1.2

CDASHIG v2.2

SDTM v2.0

SDTMIG v3.4

SEND Conformance
Rules v4.0



SDTMIG-PGx v1.0 Deprecation

- CDISC will be deprecating SDTMIG-PGx v1.0 and much of its content will be subsumed into the upcoming release of SDTMIG v3.4
- Why is this change being made?
 - All PGx Domains are applicable to other SDTMIG laboratory domains (LB, MB, MS, MI, etc.)
- Certain domains will be deprecated and others will be incorporated into SDTMIG v3.4
 - The provisional PF domain will be deprecated and superseded by the GF domain
 - The BE, BS, and RELSPEC domains will be incorporated into the SDTMIGv3.4 as is and may be updated in a future version of the SDTMIG
 - The provisional PG, PB, SB domains will be deprecated. Reinstantiation of this content may be considered in the future if valid use cases are presented to CDISC



2021 Anticipated Example Documents Publications

ADaM Traceability Examples

ADaM Guidance for Ongoing Studies Disrupted by COVID-19 Pandemic

HL7 FHIR to CDISC Mapping



HL7 FHIR to CDISC Mapping

- Fast Healthcare Interoperability Resources (FHIR) is a new standard published by HL7 for exchanging healthcare information electronically
- Goal of mapping is to achieve greater interoperability and exchange of data from Electronic Health Records (EHRs) to clinical research submission-ready datasets
- Scope: Adverse Events, Adverse Events, Medications, Concomitant Medications, Demographics, Medical History, Procedures, Vital Signs, Laboratory Test Results
- Mappings jointly balloted by CDISC and HL7 using their respective governance processes



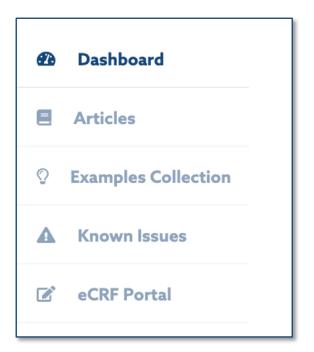






Knowledge Base

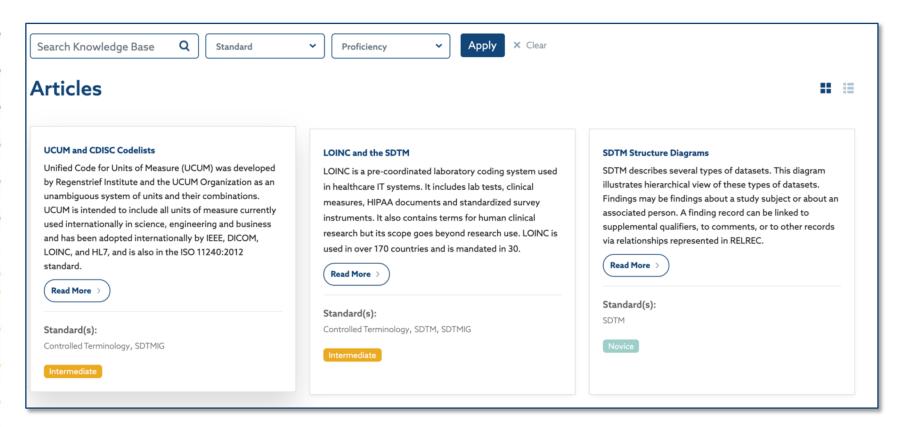
CDISC Knowledge Base



- An open, assessible, searchable and user-friendly interface on the CDISC Website to host new and existing website content for CDISC implementers
- Contains articles, known issues, eCRF portal, and examples collection



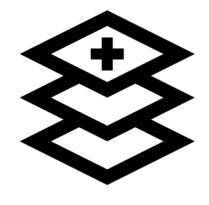
Articles





Examples Collection

- Examples exist across many Implementation and User Guides in PDFs
- Goal is to make examples easily accessible for implementors through the CDISC Knowledge Base
- Users will be able to select examples by biomedical concept, therapeutic area, observation class, domain, etc.
- Curation to ensure examples remain consistent with one another
- Initial scope: Diabetes v1.0, Diabetic Kidney Disease v1.0, Type 1 Diabetes v1.0
- First round of content is now available





Q × Clear Search Knowledge Base Standard Proficiency Apply **Examples Collection** Self-Monitoring Blood Glucose aCRF **Urine Protein 1** This is a sandbox area for exploring what could or might go into an This example shows 24-hour urine protein results for two subjects. example. It is not a proper example, but a test page. Read More Read More Standard(s): Standard(s): SDTMIG, SDTM CDASH Diabetes Complications aCRF Urine Protein 2 This example shows data collection for diabetes complications and This example shows albumin excretion rate result values for the their dates of diagnosis. same subject at different visits. Read More Read More Standard(s): Standard(s): CDASH SDTMIG, SDTM



Urine Protein 1

This example shows 24-hour urine protein results for two subjects.

Read More >

Standard(s):

SDTMIG, SDTM



Known Issues

- A known issue is a problem or concern with a CDISC standard that CDISC is aware of and may be working actively to mitigate or resolve.
- Unlike errors or errors that affect conformance, known issues have no obvious solution when they are first identified; and some known issues may prove to be irresolvable.





Known Issue Example

Variable Labels more than 40 characters			
Short Name	Variable Labels more than 40 characters		
Affected Standard	SDTMIG v3.2		
Description of Error	Variable labels listed below are more than 40 characters, but 40 characters is the maximum length of a label in the SAS v5 transport format required by regulators		
Efforts to Correct Error	Variable labels no more than 40 characters in length are included in SDTMIG v3.3.		





CDASH eCRF Portal

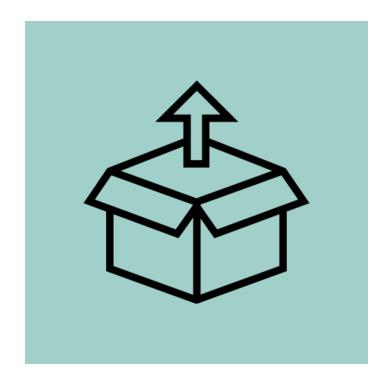
CDASH eCRF Portal

- The eCRF Portal adds functionality to the CDASH model.
 - Visual representation of CRF layout with CDASH annotations
 - Machine-readable ODM format
- Will include:
 - CRFs from the CDASH Implementation Guide
 - CRFs from Questionnaires, Ratings and Scales (QRS instruments)
 - CRFs from Therapeutic Area User Guides
- Formedix offered the CDISC community MDR use at no cost to help deliver the eCRF Portal.



CDASH eCRF Portal Benefits

- "Out-of-the-box" solution for new users
- Meets the basic needs for many users, but also customizable
- Increase use of CDASH
- Align with CDISC 360's vision for end-to-end automation



CDISC 2021 Japan Interchange | #CDISCJapan #ClearDataClearImpact



CDASH eCRF Portal – Project Status

- 22 eCRF Packages posted on the CDISC website publicly available
- New CRFs to be added incrementally





Learn More!

Session 4C: CDISC Foundational, Part I

15:30 - 16:00

Introduction to the CDASH eCRF Project

Alana St. Clair, CDISC





Analysis Results Standard

Enhancing ADaM standards



Add features that support automation of analysis results by extending Analysis Results Metadata (ARM) for Define-XML



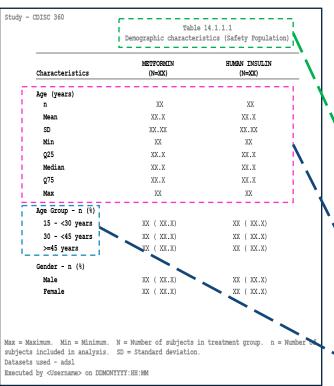
Create a standardized structure for analysis results to support reuse and dynamic data display generation



Decrease implementation variability by tightening the standardization of ADaM metadata for generally accepted analyses



Extending Analysis Results Metadata (ARM) for Define-XML



Study	Analysis	Group		Order	Displayl	ID	Display	Version	Filena	me	Type	StyleID
CDISC	CDISC 360 Safety			1	T14111_	SAF_DEMOG	1		tdemog_saf		rtf	table_rtf
DISC CDISC 360 Sa		Safety		2		SAF_AE2TIER	2TIER 1		tae_soc_pt_sa		rtf	table_rtf
CDISC	CDISC 360	Efficacy		3	T1421_E	FF	1		tmace	_edpt_fas	rtf	table_rtf
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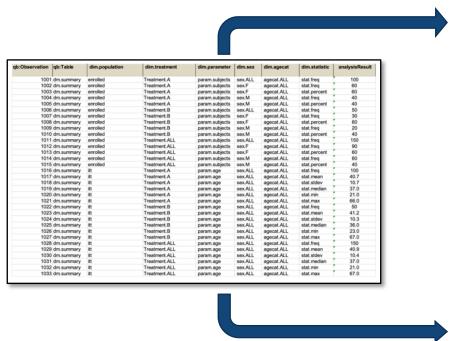


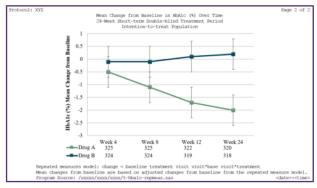
Analysis Results Dataset

:Observation	qb:Table	dim.population	dim.treatment	dim.parameter	dim.sex	dim.agecat	dim.statistic	analysisResu
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	dm.summary	enrolled	Treatment.A	param.subjects	sex.F	agecat.ALL	stat.freq	60
	dm.summary	enrolled	Treatment.A	param.subjects	sex.F	agecat.ALL	stat.percent	60
	dm.summary	enrolled	Treatment.A	param.subjects	sex.M	agecat.ALL	stat.freq	40
	dm.summary	enrolled	Treatment.A	param.subjects	sex.M	agecat.ALL	stat.neq	40
	dm.summary	enrolled	Treatment.B	param.subjects	sex.ALL	agecat.ALL	stat.freq	50
	dm.summary	enrolled	Treatment.B	param.subjects	sex.F	agecat.ALL	stat.freq	30
	dm.summary	enrolled	Treatment.B	param.subjects	sex.F	agecat.ALL	stat.percent	60
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	dm.summary	enrolled	Treatment.ALL	param.subjects	sex.F	agecat.ALL	stat.freq	90
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	dm.summary	enrolled	Treatment.ALL	param.subjects	sex.M	agecat.ALL	stat.freq	60
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	dm.summary	itt	Treatment.ALL	param.age	sex.ALL	agecat.ALL	stat.stdev	10.4
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Standardized Analysis Results Support Dynamic Data Display Generation and Reuse





	HbAlc (%) Longitudinal Repeated Me 24-Week Short-term Double-blind T	reatment Period	
	Intention-to-treat Popul		
		Drug A N=125	Drug B N=125
BASELINE	N#	125	125
	Mean (SD)	X.XX(X.XXX)	X.XX (X.XXX)
WEEK 4	30#	3000	3000
	Change from baseline: Mean (SD)	X.30K (X.300K)	X.XX (X.XXX)
	Adjusted change from baseline: Mean (SD)	X.30K (X.300K)	X.30X (X.300X)
	95% Confidence interval for adjusted mean	(XX.XX, XX.X)	(XX.30C, XX.X)
	Difference vs. Drug B (SE)		300.300 (30.30000)
	95% Confidence interval for difference		(XX.XX, XX.X)
	P-value vs. Drug B		X.30000
WEEK 12	N#	X.XX(X.XXX)	X.XX (X.XXX)
	Change from baseline: Mean (SD)	3000	3000
	Adjusted change from baseline: Mean (SD)	X.30K (X.300K)	X.30X (X.300X)
	95% Confidence interval for adjusted mean	X.XX (X.XXX)	X.XX (X.XXX)
	Difference vs. Drug B (SE)	(XX.XX, XX.X)	(XXX.XXX, XXX.XX)
	95% Confidence interval for difference		300.300 (X.30000)
	P-value vs. Drug B		(XX.30C, XX.X)
			X.3000X
the number	of subjects in the Intention-to-treat (ITY) Population. of subjects in the ITY population with non-missing baseline a	nd non-missing Week t value.	
peated measu	res model: change = baseline treatment visit visit*treatment		
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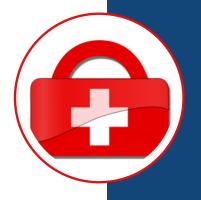




Safety User Guide

Safety User Guide

- Currently there is lack of a unified CDISC Safety User Guide that spans from data collection through analysis results
 - Each CDISC Foundational Standard has information on Safety Data that is commonly collected across studies of a wide-variety of indications
 - The TAUGs also often collect disease-specific safety information and examples
- Safety User Guide is aiming to align collection, tabulation, analysis and display of the most common safety data collected in research







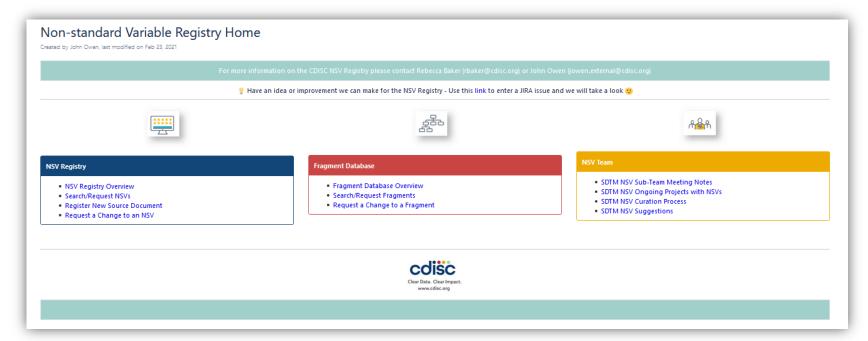
Non-Standard Variable (NSV) Registry

Purpose and Goals

- NSVs and Supplemental Qualifiers appear in Therapeutic Area User Guides and Implementation Guides but are not always used consistently
- Ensure the development teams use the NSVs consistently
- Help identify NSVs for promotion to the model/IG
- Allow CDISC users to access the NSV information so they can use them within their organizations



NSV Registry Landing Page

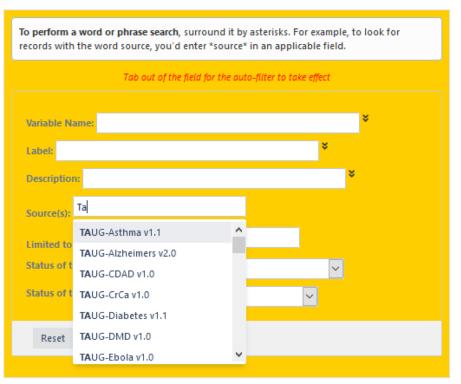


https://wiki.cdisc.org/display/NSVREG/Non-standard+Variable+Registry+Home



NSV Registry Search

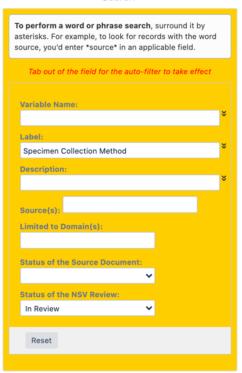
Search





NSV Example

Search



NSV Registry Results

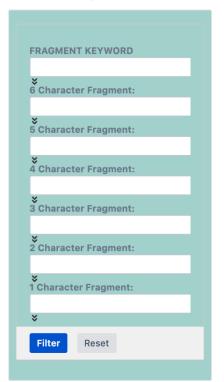
Status of	Status	Variable	Label	Simple	XML	Define-	Codelist	External	Notes	Description	Role	Qualifying	Status of	Limited to
the	of the	Name		Datatype	Datatype	XML		Dictionary				Variable(s)	the	Class(es)
Source	NSV					Datatype							Source	
Document	Review												Document	
	In	CLMTH	Specimen	Char	string	text			Examples:	The	Non-			Findings
	Review		Collection						INCISIONAL	method or	Standard			
			Method						BIOPSY,	process by	Variable			
									NEEDLE	which the	Qualifier			
									BIOPSY	specimen				
										was				
										collected				

≪ Export ▼ Records: 1 Size: 1.5 KB



Fragment Database

Search



Fragment Database Results

Status	Fragment Keyword	6 Character	5 Character	4 Character	3 Character	2 Character	1 Character
		Fragment	Fragment	Fragment	Fragment	Fragment	Fragment
APPROVED	ACTION	ACTION	ACTON	ACTN	ACN	AC	Α
APPROVED	ADJUSTMENT	ADJUST	ADJST	ADJT	ADJ	AJ	Α
APPROVED	ANCHOR	ANCHOR	ANCHR	ANCR	ANR	AN	Α
APPROVED	ASSAY		ASSAY	ASAY	ASY	AS	Α
APPROVED	BASELINE	BASLNE	BASLN	BSLN	BLN	BL	В
IN-REVIEW	BIRTH		BIRTH	BRTH	втн	ВТ	В
IN-REVIEW	BODY			BODY	BOD	BD	В
APPROVED	CANCER	CANCER	CANCR	CANC	CAN	CA	С
APPROVED	CATEGORY	CATGRY	CATGY	CATG	CAT	СТ	С
APPROVED	CHARACTER	CHARCT	CHARC	CHAR	CHR	CR	С
IN-REVIEW	CLASS		CLASS	CLAS	CLS	CS	С
APPROVED	CLINICAL	CLINCL	CLINC	CLIN	CLN	CL	С
APPROVED	CODE			CODE	COD	CD	С
APPROVED	COMMENT	COMMNT	COMNT	СОМТ	СОМ	СО	С
IN-REVIEW	CONCOMITANT				CON	СМ	С
APPROVED	CONDITION	CONDTN	CNDTN	COND	CND	CN	С
IN-REVIEW	CONGENITAL			CONG			
APPROVED	COUNTRY	CONTRY	CNTRY	CTRY	CNR	CR	С
APPROVED	CRITERIA	CRITRA	CRITR	CRIT	CRT	CR	С
IN-REVIEW	DAY				DAY	DY	
IN-REVIEW	DEATH				DTH		
IN-REVIEW	DECODE		DECOD				
IN-REVIEW	DERIVED				DRV		
IN-REVIEW	DESCRIPTION			DESC			
APPROVED	DETAILS	DETAIL	DETAL	DETL	DTL	DE	D
IN-REVIEW	DISABILITY		DISAB				
IN-REVIEW	DOSAGE			DOSE	DOS		
IN-REVIEW	DOSES		DOSES	DOSE	DOS	DS	D





CDISC Certification



Certification Program Highlights

Tabulate
Certification Pilot

• NOV 2020 – APR 2021 Tabulate Certification Analysis

• MAY – JUN 2021

Final Tabulate Exam Available

• JUL 2021

2nd Certification Exam Development

• Q4 2021

Contact certification@cdisc.org or visit the CDISC website for more information



