

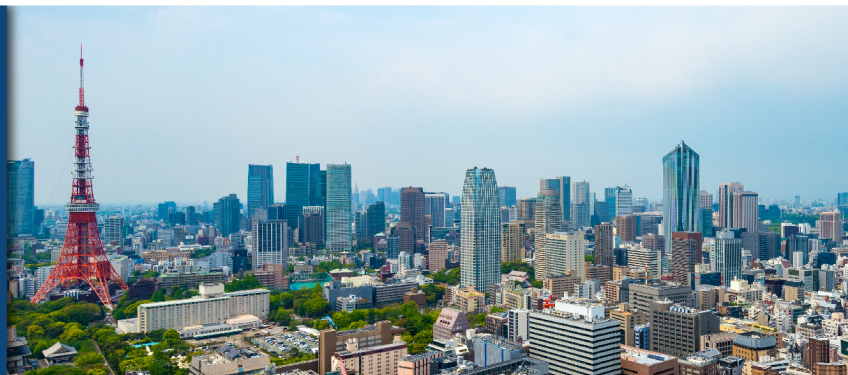


2023

JAPAN

INTERCHANGE

TOKYO | 10-11 JULY



## Unlocking the Potential: Exploring Overlooked FDA Guidance for CDISC Implementers

Presented by Angelo Tinazzi, Senior Director  
CDISC Europe Coordinating Committee (E3C)



# Meet the Speaker

Angelo Tinazzi

**Title:** Senior Director

**Organization:** CDISC Europe Coordinating Committee (E3C)

Angelo is a member of the CDISC Europe Coordinating Committee since 2015, where he is also leading the Italian speaking User network.

Angelo has more than 25 years of experience in different biometric organizations. He has a passion for clinical standards as well as programming and he has done several data submissions to both the FDA and the PMDA.

Angelo is also an authorized CDISC instructor for ADaM.

Angelo is Italian, living in France and working in Switzerland.



# Disclaimer and Disclosures

- *The views and opinions expressed in this presentation are those of the author(s) and do not necessarily reflect the official policy or position of CDISC.*
- *I have no real or apparent conflicts of interest to report.*



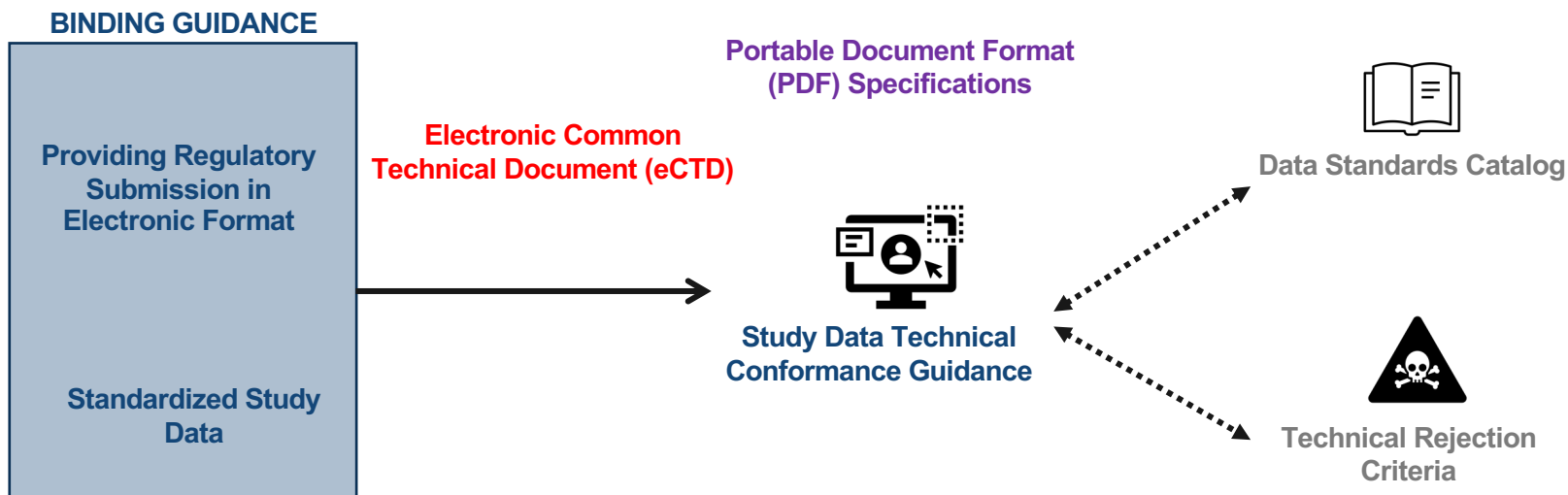
## Agenda

1. FDA Data Submission Technical Guidance
2. Overview of the “Additional” FDA Data Technical Guidance
3. Conclusions



# FDA Data Submission Technical Guidance

# FDA Data Technical Specifications Guidance



# FDA Data Technical Specifications Guidance Other Guidance / Document

- Referenced **CDISC TAUGs** in the FDA SDTCG
- Providing Regulatory Submissions in Electronic Format - General **Considerations, 1999 (Legacy Submission)**
- **Bioresearch Monitoring** Technical Conformance Guide Technical Specifications
- Creating **Simplified TS.XPT** Files
- Submit an eCTD or Standardized Data **Sample** to the FDA (<https://www.fda.gov/drugs/electronic-regulatory-submission-and-review/submit-ectd-or-standardized-data-sample-fda>)
- Model Data Format for submitting **pharmacometric data and models** (<https://www.fda.gov/about-fda/center-drug-evaluation-and-research-cder/model-data-format>)

# FDA Data Technical Specifications Guidance





# Can you cite any other FDA guidance?

✓ Endpoint **Bioequivalence** Study  
Analysis Datasets for Abbreviated NDA

✗ Technical Specifications for Submitting  
Clinical Trial Datasets for **Treatment of  
Advanced Breast Cancer**

✓ Technical Specifications for Submitting  
Clinical Trial Data Sets for **Treatment  
of NASH**

✗ **Diabetes** Technical Specification  
Guidance

✓ **Vaccines** Technical Specification  
Guidance

✓ Submitting Select Clinical Trial Data  
Sets for **Human Immunodeficiency  
Virus-1 Infection**

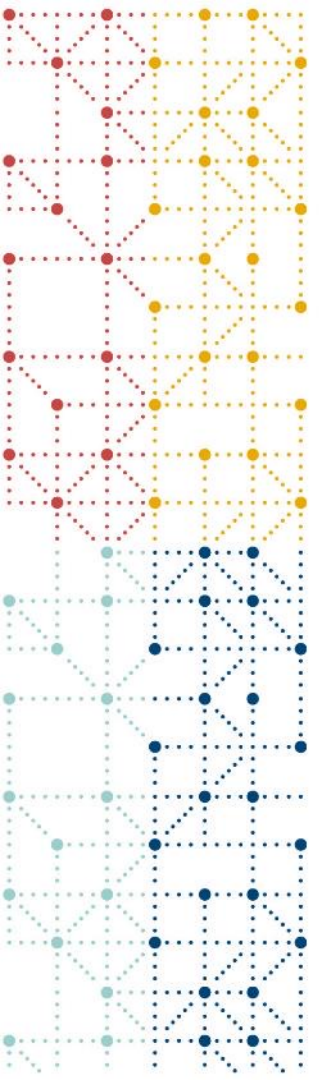
✗ **ISS and ISE** Datasets Integration  
for NDA

✓ **QT Studies** Technical Specification  
Document

# Can you cite any other FDA guidance?

All these guidance are referenced in the **FDA SDTCG in the section 5 “List of FDA Technical Specification Documents”** and at the **Study Data Standards Resources FDA webpage** in the section **“3. Technical Guidance”** and listed in the table **FDA Study Data Standards Resources**

<https://www.fda.gov/industry/fda-data-standards-advisory-board/study-data-standards-resources>



## Overview of the “Additional” FDA Data Technical Guidance

# Overview of Additional FDA Data Technical Guidance

#	FDA Additional Data Standards Guidance References	SDTM	ADaM	Other
1	<b>Vaccines</b> Technical Specification Guidance v2.1 (Apr 2018 / Dec 2019) <u>10 Pages</u>	✓		CRF design recommendations
2	<b>QT Studies</b> Technical Specification Document v1.0 (Jun 2019) <u>24 Pages</u>		✓	Good examples
3	Submitting Select Clinical Trial Data Sets for Drugs Intended to Treat <b>Human Immunodeficiency Virus-1 Infection</b> v1.0 <u>29 Pages</u> (Mar 2018)		✓	Big Summary SL dataset
4	Technical Specifications— <b>Comparative Clinical Endpoint Bioequivalence Study</b> Analysis Datasets for Abbreviated New Drug Applications v.1.0 (Sep 2018) <u>46 Pages</u>		✓	
5	Technical Specifications for Submitting Clinical Trial Data Sets for Treatment of <b>Noncirrhotic Nonalcoholic Steatohepatitis (NASH)</b> v1.1 <u>44 Pages</u> (Aug 2021 / Jan 2022)	✓	✓	Controlled Terminology NSV Good examples

# Overview of Additional FDA Data Technical Guidance

## Vaccines Technical Specification Guidance



**CBER Division (OVRR Unit)**



**SDTM Only**

Required domains

**IS/MB vs LB**

Use of **RELREC** is recommended

Efficacy Data Mapping

CRF design and mapping recommendations for **Reactogenicity** (flat vs nested model)



**Ref. Vaccine CDISC TAUG**

# Overview of Additional FDA Data Technical Guidance

## QT Studies Technical Specification Document



CDER Division



ADaM Only

ADEG (examples, use of BASETYPE)

ADPC

Recommend use of **consistent CT** e.g., for AVISIT



Ref. QT CDISC TAUG

# Overview of Additional FDA Data Technical Guidance

## Submitting Select Clinical Trial Data Sets for Drugs Intended to Treat Human Immunodeficiency Virus-1 Infection



**CDER Division**



**ADaM Only**

ADAE (non-OCCDS)

ADLB (list of main laboratory parameters of interest, including Viral Load)

**ADEFFOUT** (ADSL-like focusing on efficacy endpoints plus many other “**summary**” variables)



**Ref. HIV CDISC TAUG**

# Overview of Additional FDA Data Technical Guidance

## Technical Specifications—Comparative Clinical Endpoint

### Bioequivalence Study Analysis Datasets for Abbreviated NDAs



**CDER Division**



**ADaM Only**

ADSL (cross-over study) and other **ADaM specific for each type of study Bioequivalence study**

Definition of mITT population

**Suggested PARAMCD/PARAM**



# Overview of Additional FDA Data Technical Guidance

## Technical Specifications for Submitting Clinical Trial Data Sets for Treatment of Noncirrhotic Nonalcoholic Steatohepatitis (NASH)



**CDER Division, 44 pages**



**SDTM (14 domains)**

**Events adjudication** recommendations (ZA)

Correct mapping into **MB for Hepatitis A Virus Antibody**

Recommend **RELREC** e.g., to link AE and CM



**ADaM (7 domains)**

“**Dual**” **standard unit** reporting SI and US Conv Unit

Key **time to event** e.g., Time to Liver Transplant

Several baseline characteristics / “value” (ADSL)

Good Traceability

# My Experience with the FDA Reviewers and these Additional Requirements / Guidance



MAINLY **CBER** FOR  
VACCINE SUBMISSION



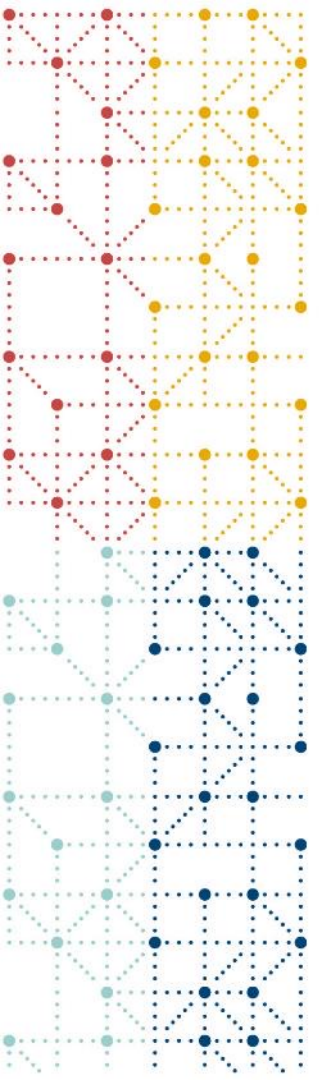
VERY DETAILED  
**ASSESSMENT OF OUR  
SDSP AND SAMPLE CRF**



**ADHERENCE TO  
VACCINE TAUGS AND  
VACCINES TECHNICAL  
SPECIFICATION  
GUIDANCE**



SOME REQUESTS  
**COULDN'T BE SATISFIED**  
E.G., IMPACTING CRF  
DESIGN (DOCUMENTED  
DISCUSSION /  
AGREEMENT IN THE  
SDSP)



## Conclusions



# Conclusions

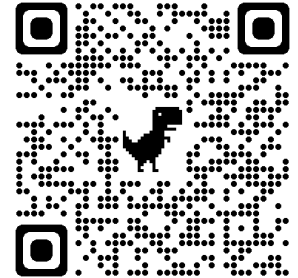
- Be **aware** of these additional guidance and Avoid the **unexpected**
- Impact on Sponsors **Data Governance**
- **CDISC Teams Review** is Needed (Peer Review)
- Still a bit of **variability** across divisions and reviewers
- **Lack of examples** (except NASH and QT)
- **Opportunity** for further standardization

**Thank You!**



**Angelo Tinazzi**

*CDISC Europe Coordinating Committee  
angelo.tinazzi@cytel.com*



CDISC JAPAN INTERCHANGE 2023 – Session 7 – Global Regulatory Submissions | #CDISCJAPAN #ClearDataClearImpact

# References

- 1 “CDISC Therapeutic Areas”  
<https://www.cdisc.org/standards/therapeutic-areas>
- 2 “Therapeutic Area User Guidance – The Hidden Gems” (A. Tinazzi, Cytel Blog, July 2020)  
<https://www.cytel.com/blog/therapeutic-area-user-guidance-the-hidden-gems>
- 3 “A Systematic Review of CDISC TAUGs”, A. Tinazzi, PharmaSUG-China, 2019, Shanghai  
<https://www.pharmasug.org/proceedings/china2019/DS/Pharmasug-China-2019-DS69.pdf>
- 4 “FDA Study Data Technical Conformance Guidance » (FDA, March 2023)  
<https://www.fda.gov/media/153632/download>
- 5 “Pilot OCE/OOD Safety Team Standard Data Requests” (FDA, February 2021)  
<https://www.fda.gov/media/133252/download>
- 6 “The FDA “Real-Time Oncology Review” Process” (A. Tinazzi, Cytel Blog, November 2021)  
<https://www.cytel.com/blog/the-fda-real-time-oncology-review-process-an-opportunity-challenge-for-sponsors>
- 7 “Challenges with Implementation of New Standards and Guidance – A Sponsor’s Experience with the April 2018 CBER Vaccine Guidance”, S. VanPelt Nguyen and L. Zhang, PHUSE US Connect 2020  
<https://www.lexjansen.com/phuse-us/2020/ds/DS05.pdf>
- 8 “Vaccines Technical Specification Guidance” v2.1 (FDA, December 2019)  
<https://www.fda.gov/media/112581/download>
- 9 “Providing Regulatory Submission in Electronic Format” (FDA, December 2014)  
<https://www.fda.gov/media/88120/download>
- 10 “Providing Regulatory Submission in Electronic Format - Standardized Study Data” (FDA, Revision 2 June 2021)  
<https://www.fda.gov/media/82716/download>
- 11 “LB, MB & IS Domain Scope Changes for the SDTMIG v3.4 and Impact on Controlled Terminology” (CDISC webinar)  
<https://www.cdisc.org/events/webinar/lb-mb-domain-scope-changes-sdtmig-v3-4-and-impact-controlled-terminology>

# References (cont.)

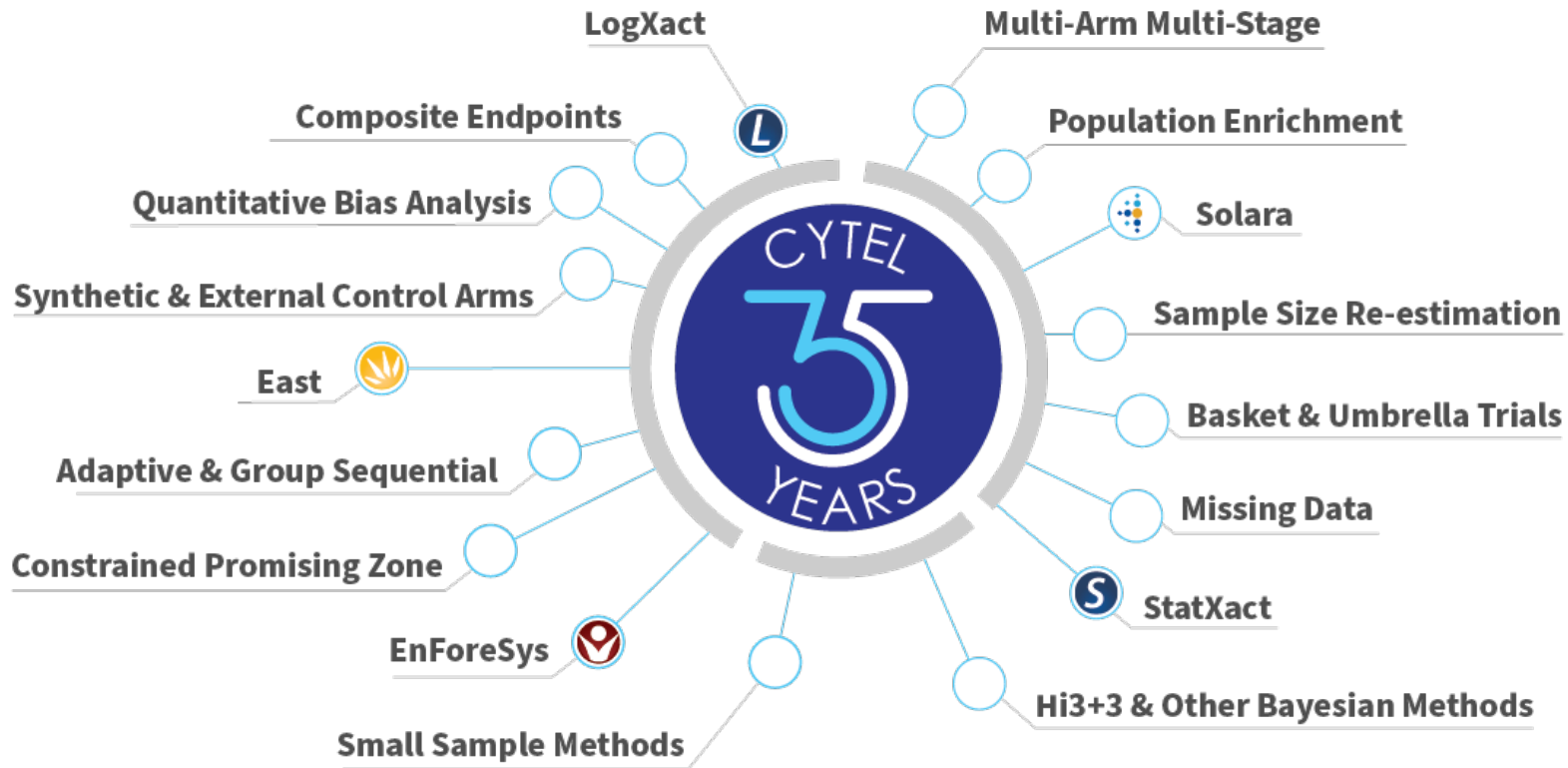
- 12 “Data Standards Catalog” (FDA, August 2022)  
<https://www.fda.gov/regulatory-information/search-fda-guidance-documents/data-standards-catalog-v90>
- 13 “Technical Rejection Criteria for Study Data” (FDA, May 2018)  
<https://www.fda.gov/files/drugs/published/Technical-Rejection-Criteria-for-Study-Data.pdf>
- 14 “Portable Document Format (PDF) Specifications” (FDA, September 2016)  
<https://www.fda.gov/media/76797/download>
- 15 “Electronic Common Technical Document (eCTD)” (FDA, March 2023)  
<https://www.fda.gov/drugs/electronic-regulatory-submission-and-review/electronic-common-technical-document-ectd>
- 16 “Bioresearch Monitoring Technical Conformance Guide Technical Specifications” (FDA, August 2022)  
<https://www.fda.gov/media/85061/download>
- 17 “Submit an eCTD or Standardized Data Sample to the FDA” (FDA, January 2022)  
<https://www.fda.gov/drugs/electronic-regulatory-submission-and-review/submit-ectd-or-standardized-data-sample-fda>
- 18 “Providing Regulatory Submissions in Electronic Format - General Considerations” (FDA, January 1999)  
<https://www.fda.gov/media/71200/download>
- 19 “Creating Simplified TS.XPT Files” (FDA, November 2019)  
<https://www.fda.gov/media/132457/download>
- 20 “Model Data Format for submitting pharmacometric data and models” (FDA, August 2021)  
<https://www.fda.gov/about-fda/center-drug-evaluation-and-research-cder/model-data-format>
- 21 “Impact of FDA Technical Specifications on CDISC Implementation for NASH Trials”, Cécile Cornou; Henning Pontoppidan, Novo Nordisk A/S CDISC EU Interchange 2022
- 22 PHUSE “Best Practices for Submission of Event Adjudication Data” (October 2019)  
<https://phuse.s3.eu-central-1.amazonaws.com/Deliverables/Optimizing+the+Use+of+Data+Standards/Best+Practices+for+Submission+of+Event+Adjudication+Data.pdf>

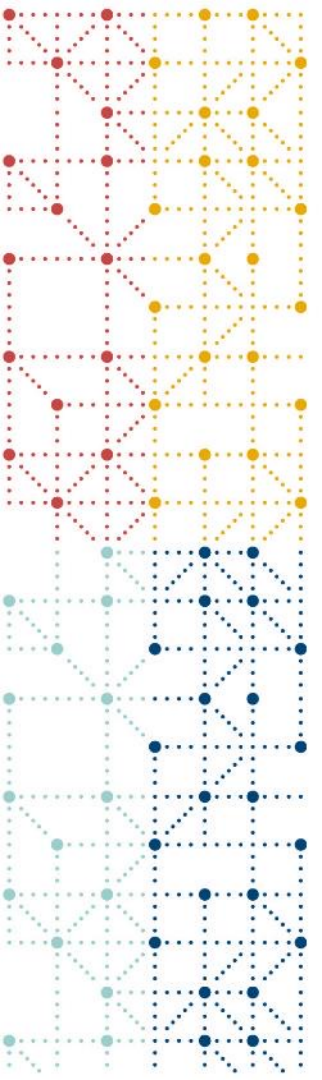


# Abstract

*This presentation aims to raise awareness about the underutilized FDA guidance documents for CDISC implementers. In the presentation we will delve into key topics covered in these additional resources and we will share our experiences with the FDA, and in particular with some of their divisions, commenting on our data packages by referencing these guidance.*







## Backup Slides

# Key Contents

#	FDA Additional Data Standards Guidance References	Content
1	<b>Vaccines</b> Technical Specification Guidance v2.1 (Apr 2018 - Dec 2019) <a href="https://www.fda.gov/media/112581/download">https://www.fda.gov/media/112581/download</a>	<ul style="list-style-type: none"> <li>- CBER<sup>1</sup> OVR<sup>2</sup></li> <li>- SDTM</li> <li>- CRF design and mapping recommendations for Reactogenicity data (flat vs nested model)</li> <li>- Vaccines CDISC TAUG</li> </ul>
2	<b>QT Studies</b> Technical Specification Document v1.0 (Jun 2019) <a href="https://www.fda.gov/media/128187/download">https://www.fda.gov/media/128187/download</a>	<ul style="list-style-type: none"> <li>- CDER<sup>3</sup></li> <li>- ADaM e.g., ADEG, ADPC</li> <li>- QT CDISC TAUG</li> </ul>
3	Submitting Select Clinical Trial Data Sets for Drugs Intended to Treat <b>Human Immunodeficiency Virus-1 Infection</b> v1.0 (Mar 2018) <a href="https://www.fda.gov/media/112667/download">https://www.fda.gov/media/112667/download</a>	<ul style="list-style-type: none"> <li>- CDER</li> <li>- ADaM e.g., ADAE (non-OCCDS), ADLB (list of main laboratory parameters of interest) ADEFFOUT (ADSL-like focusing on efficacy endpoint)</li> <li>- HIV CDISC TAUG</li> </ul>
4	Technical Specifications—Comparative <b>Clinical Endpoint Bioequivalence Study Analysis Datasets</b> for Abbreviated New Drug Applications v1.0 (Sep 2018) <a href="https://www.fda.gov/media/116187/download">https://www.fda.gov/media/116187/download</a>	<ul style="list-style-type: none"> <li>- CDER</li> <li>- ADaM e.g., ADSL and other ADaM specific for each type of study Bioequivalence study</li> </ul>
5	Technical Specifications for Submitting Clinical Trial Data Sets for Treatment of <b>Noncirrhotic Nonalcoholic Steatohepatitis (NASH)</b> v1.1 (Aug 2021 – Jan 2022) [20] <a href="https://www.fda.gov/media/151864/download">https://www.fda.gov/media/151864/download</a>	<ul style="list-style-type: none"> <li>- CDER</li> <li>- SDTM (14 domains) Events adjudication recommendations (ZA), Liver Imaging results (ZI)</li> <li>- ADaM (7 domains)</li> </ul>

# CDISC Topics Covered in Individual Guidance (cont)

Guidance	Topic	Domain	Content Discussed	Additional Details
NASH	SDTM	BE BS MI SUPPMI	BE / BS (collected biopsies material/quality) MI (Histology of liver biopsies) SUPPMI (adequacy of slide assessment)	<ul style="list-style-type: none"> <li>• Mapping details BEDECOD.</li> <li>• Reference to SDTM PGx 1.0</li> <li>• Use of MIACPTFL</li> <li>• Full details of MITESTCD with expected results and MITSTDTL (qualifier of MITESTCD)</li> <li>• Terminology for SUPPMI</li> </ul>
NASH	SDTM	RS	Disease response to therapy, clinical classification using MELD scoring....	<ul style="list-style-type: none"> <li>• Precise guidance on how to model a non-standard criterion with suggested TESTCD/TEST</li> <li>• Way of linking related records in LB through use of RELREC and --LNKID</li> </ul>
NASH	SDTM	ZI	Results of imaging of liver stenosis, inflammation, etc.	<ul style="list-style-type: none"> <li>• Reference of SDTMIG-MD to capture device used</li> </ul>
NASH	SDTM	ZA	Clinical events and outcomes related to DILI. Like MI with individual assessment of adjudicators	<ul style="list-style-type: none"> <li>• FA structure, clear instructions on how to set ZAOBJ e.g., DILI or CARDIAC MACE and ZATEST e.g., EVALUATED EVENT ONSET DATE (earliest date). ZACAT for 'FIRST ADJUDICATION' or a 'READJUDICATION' etc. Table with specifications of all variables</li> </ul>
NASH	SDTM	DM	Reference start date as 1st treatment	
NASH	SDTM	CM	Particular attention to specific drug lipid-lowering agents, statins, antihypertensive, antidiabetic, thiazolidinediones, vitamin E, and anticoagulants and antiplatelets	
NASH	SDTM	MH	Of particular interest are preexisting medical conditions that may impact NASH disease progression and/or DILI assessment	

# CDISC Topics Covered in Individual Guidance (cont)

Guidance	Topic	Domain	Content Discussed	Additional Details
NASH	SDTM	LB	List of expected labs per category	For example, hematology, metabolic, liver parameters, renal parameters, lipid parameters, coagulation, auto immune system. Biomarkers (controlled terminology provided with reference to CDISC-CT)
NASH	SDTM	MB	Serologic test results for hepatitis (hepatitis A, B, C, and E)	Controlled terminology provided with reference to CDISC-CT
NASH	SDTM	SU	Example of a subject who consumes one, regular-sized beer per day may contain the following data points:	
NASH	SDTM	TS	How to reference the FDA NASH guidance	
NASH	SDTM	RELREC	AE/CM BS/MI ZI/PR AE/ZI (for gastroesophageal variceal hemorrhage) AE/DS/DD (for deaths)	
NASH	ADAM	Programs	To be submitted	
NASH	ADAM	ADSL	Copy of variables into other ADaM e.g., demographics...	<ul style="list-style-type: none"> <li>Detailed Specifications.</li> <li>Key baseline variables e.g., Vital signs at baseline DIABL, HRBL, etc. or labs ALTBL and ALTCAT in category, etc.</li> <li>Concomitant medications, MELD Score</li> </ul>
NASH	ADAM	ADAE	Nothing major, apart mentioning use of SMQ	<ul style="list-style-type: none"> <li>Sponsor to note in metadata approach of recording multiple records in AE each time the event changes in severity, relationship, etc. then this should be noted in the metadata. Flag record with worst severity.</li> <li>Derivations of the hepatic injury flags (to be discussed with the FDA)</li> </ul>
NASH	ADAM	ADLB	BDS 5 GB nothing major	<ul style="list-style-type: none"> <li>All tests and records carried into ADLB. Example provided in appendix</li> </ul>
NASH	ADAM	ADDILI	Derived from ADLB	<ul style="list-style-type: none"> <li>Example provided in appendix</li> </ul>
NASH	ADAM	ADMI	Evaluation of biopsies by evaluator	
NASH	ADAM	ADRS	From LB and RS	

# CDISC Topics Covered in Individual Guidance (cont)

Guidance	Topic	Domain	Content Discussed	Additional Details
NASH	ADAM	ADTTE	TTE endpoints	<ul style="list-style-type: none"> <li>Sponsors should provide clear explanations in the ADaM define.xml for how AVAL is derived for each parameter.</li> <li>Time to Histological Progression to Cirrhosis and other TTE</li> </ul>
QTC	ADAM	ADEG	TAUG-QT referenced	Example provided
QTC	ADAM	ADPC	Pk parameter	<ul style="list-style-type: none"> <li>To facilitate proper mapping of time matched Pk and ECG rows</li> <li>FDA's QT Interdisciplinary Review Team (IRT)</li> </ul>
HIV	ADAM	ADEFFOUT	<p>This is a one-record-per-subject data set that contains a comprehensive set of variables pertaining to the subject and their measures of efficacy</p> <p>Efficacy Outcomes Dataset</p> <p>Ref HIV CDISC TAUG</p>	<ul style="list-style-type: none"> <li>TRTDURD for indicating days Variables using underscore, fragment not always used.</li> <li>Duplicating / Summarizing information from multiple ADAM / SDTM datasets</li> <li>One record per subject with standard variables from ADSL plus several additional variables to facilitate the statistical and medical review. This includes : additional study/treatment discontinuation variables, changes in background therapies, genotypic and phenotypic data for baseline background regimens, additional background drug indicator, other baseline characteristics such as count of CD4, CD8 at baseline, viral load at baseline and study discontinuation, other summary variables such as any AE ongoing at study end, efficacy measures of Viral Load</li> </ul>
HIV	ADAM	ADAE	Flag records that indicated worst toxicity when multiple AE reporting strategy is followed	CDC Class C Event
HIV	ADAM	ADLB	It includes HIV-RNA (viral load) and many other LB parameter	

# CDISC Topics Covered in Individual Guidance

Guidance	Topic	Domain	Content Discussed	Additional Details
Bioequivalence	ADAM		<ul style="list-style-type: none"><li>• The adhesion study for transdermal delivery systems (TDS) and topical patches</li><li>• The irritation/sensitization study for transdermal delivery systems (TDS) and topical patches</li><li>• The comparative clinical endpoint bioequivalence study using the following primary endpoints: lesion count, 100% clearance of all actinic keratosis (AK) lesions, total nasal symptom score, treatment success based on Physician's Global Assessment (PGA) and Psoriasis Area Severity Index (PASI), Intraocular pressure (IOP) and therapeutic cure based on clinical and mycological cures</li></ul>	