



CDISC 360i: Lessons Learned and Road Ahead

Peter Van Reusel
Chief Standards Officer
CDISC

Meet the Speaker

Peter Van Reusel

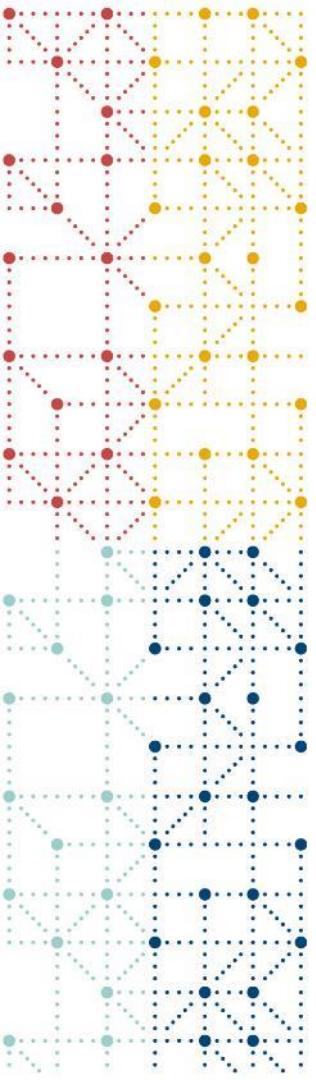
Title: Chief Standards Officer

Organization: CDISC



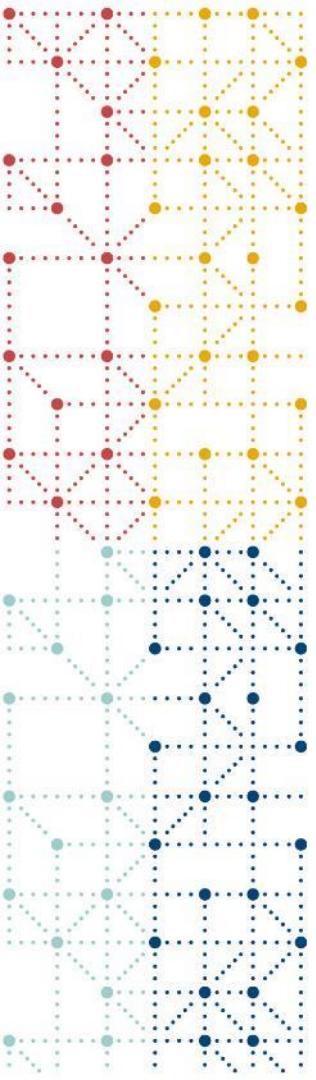
Peter Van Reusel provides executive leadership to the development and implementation of clinical standards in line with CDISC's strategy and operational plans, working closely with the President and CEO, as well as CDISC staff and stakeholders. He has over 20 years' experience in senior roles in pharma and at CROs, providing standards expertise and carrying out other standards work in various organizational settings. A long-time, CDISC-authorized instructor, Peter has helped significantly in developing CDISC training courses.

He previously served as CDISC's European Liaison, fostering relationships with key European regulatory, academic, and biopharma stakeholders. Peter is also an active PHUSE collaborator.



Agenda

1. Purpose & Approach
2. Achievements, Challenges & Insights
3. Looking forward: Art of the Possible



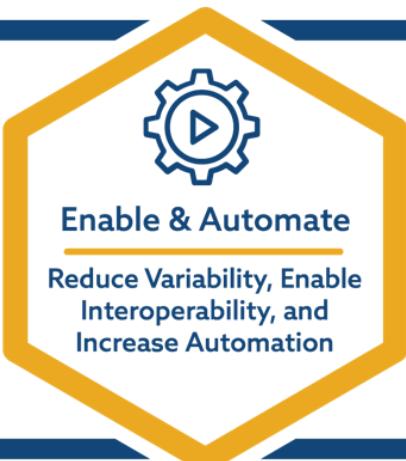
Purpose & Approach

Realizing CDISC's Mission



CDISC's *vision* is to amplify data's impact to advance research by...
creating connected standards across the study information lifecycle to enable accessible,
interoperable, and reusable data for more meaningful and effective research

CDISC Strategic Plan & Roadmap



Strategic Goal:

Expand and Enable standards-driven automation across end-to-end study information lifecycle from study design through results.

CDISC will expand and realize the original 360 vision.

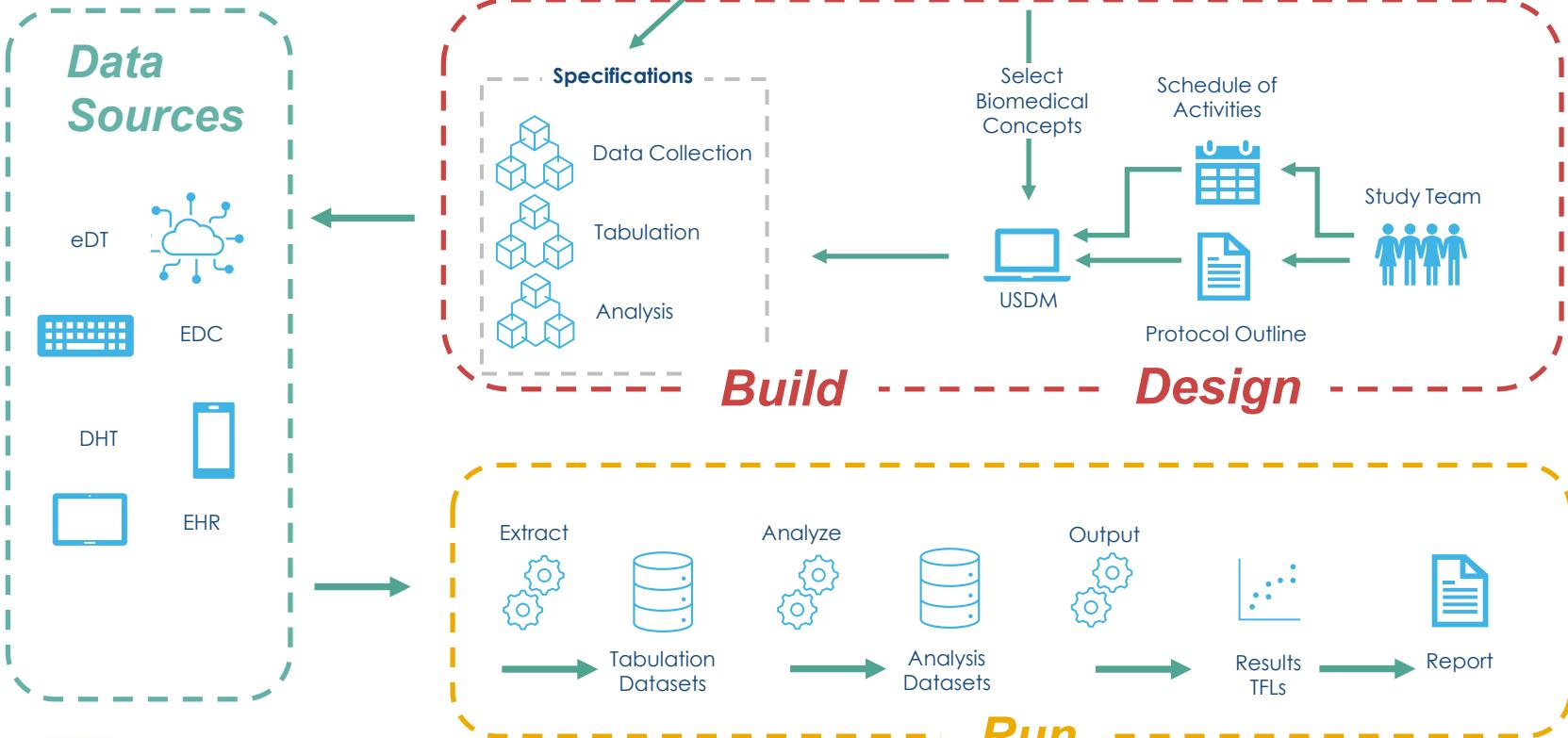
360i Goals



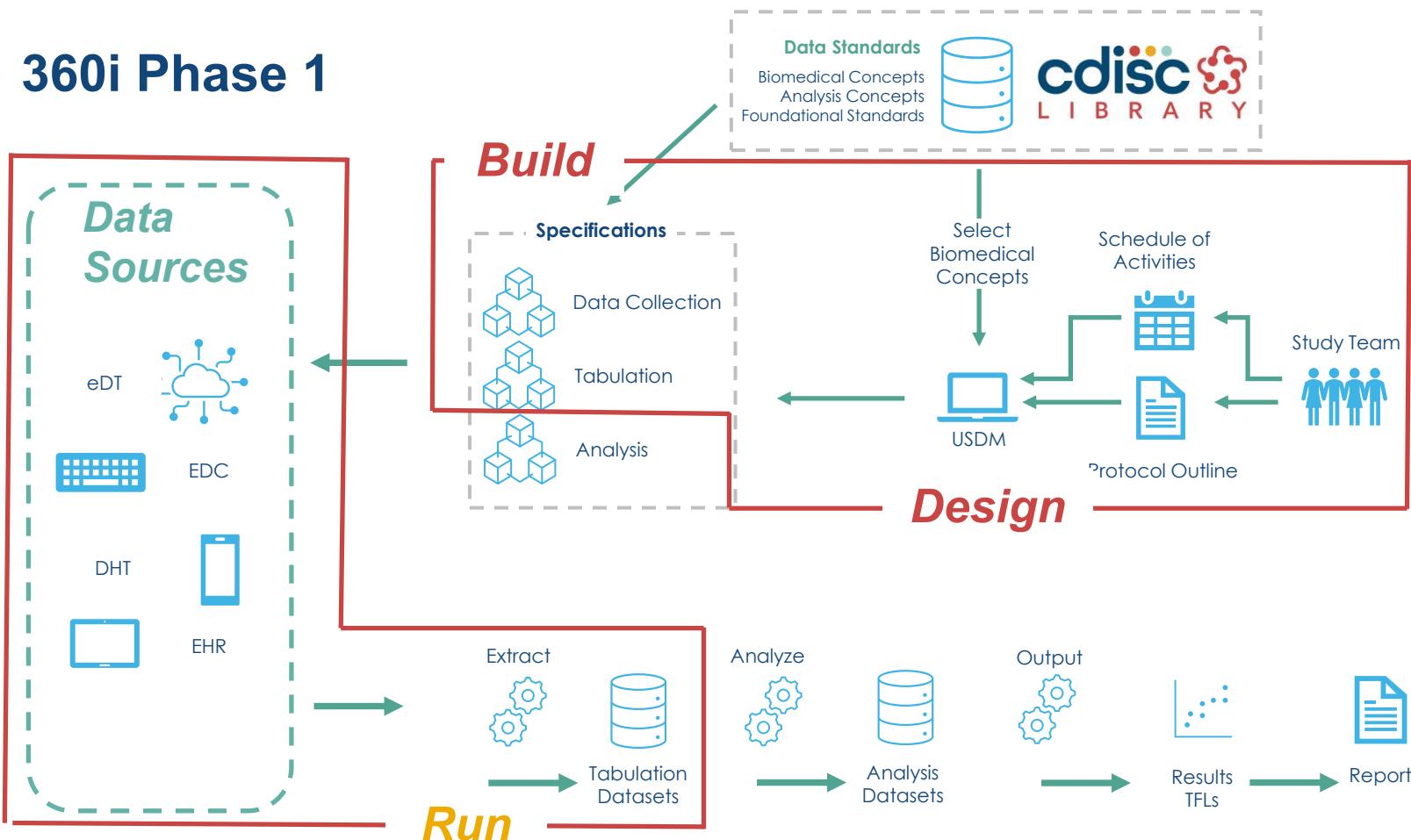
- Define end to end standards
 - Digitalize information from protocol to reporting
 - Link concepts to representation standards
 - Forms definition, eDTs, DHT, SDTM specs, ADaM specs, TFL specs, ...
 - Enrich with transformation & derivation logic
- Study design & build
 - Select concept and concept groups in digital Schedule of Activities
 - Automates study build
 - Forms definition, SDTM specs, ADaM specs, TFL specs, ...
- Automate data flow
 - Demonstrate end to end automation
 - Starts with linking Schedule of Activities to Concepts (and Concept Groups)
 - Automate transformations & derivation between data states
 - Collection, tabulation, analysis, results



360i Focus



360i Phase 1



360i Operational Team

88



Operational Steering Committee

12

Design

- **Co-Leads**
 - Mikkel Traun
 - Valerie Sheft
- **Sub-teams**
 - Study Design Team

23

Build

- **Co-Leads**
 - Lex Jansen
 - Nicolas de Saint Jorre
 - Sam Hume
 - Jeremy Teoh
- **Sub-teams**
 - ODM/CRF/aCRF
 - Define-XML/Shell Dataset

16

Run

- **Co-Leads**
 - Bess Le Roy
 - Dianna Di Russo
 - Christine Connolly
 - Anthony Chow
- **Sub-teams**
 - Data
 - sdtm.oak
 - Conformance

26

Reviewers

15

Program Manager

- Charles Shadle

CDISC Executive Team

- Chris Decker
- Peter Van Reusel
- Nicole Harmon
- Julie Smiley

Co-Leads

- Sam Hume
- Bess LeRoy
- Anthony Chow
- Dianna Di Russo
- Christine Connolly
- Mikkel Traun
- Nicolas De Saint Jorre
- Valerie Mildred Sheft
- Jeremy Teoh
- Lex Jansen

Parallel Focus Teams

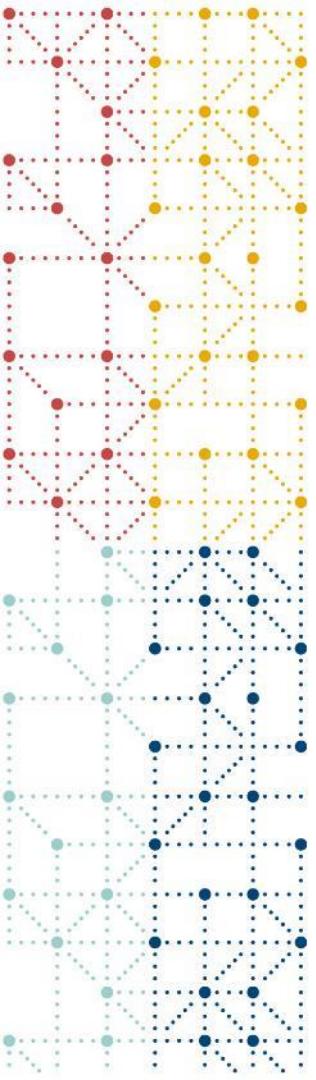
BC Curation

CDISC Open Rules

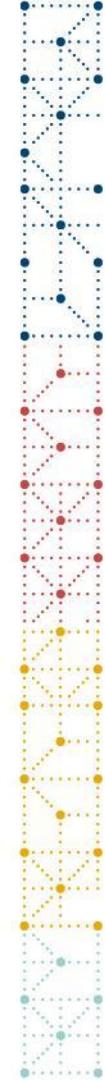
Analysis Concepts

TMF Digital Model

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40



Achievements, Challenges & Insights



Design

Achievements

- Detailed user stories for Study Design and Study Amendment
- Digital Schedule of Activities linked to biomedical concepts

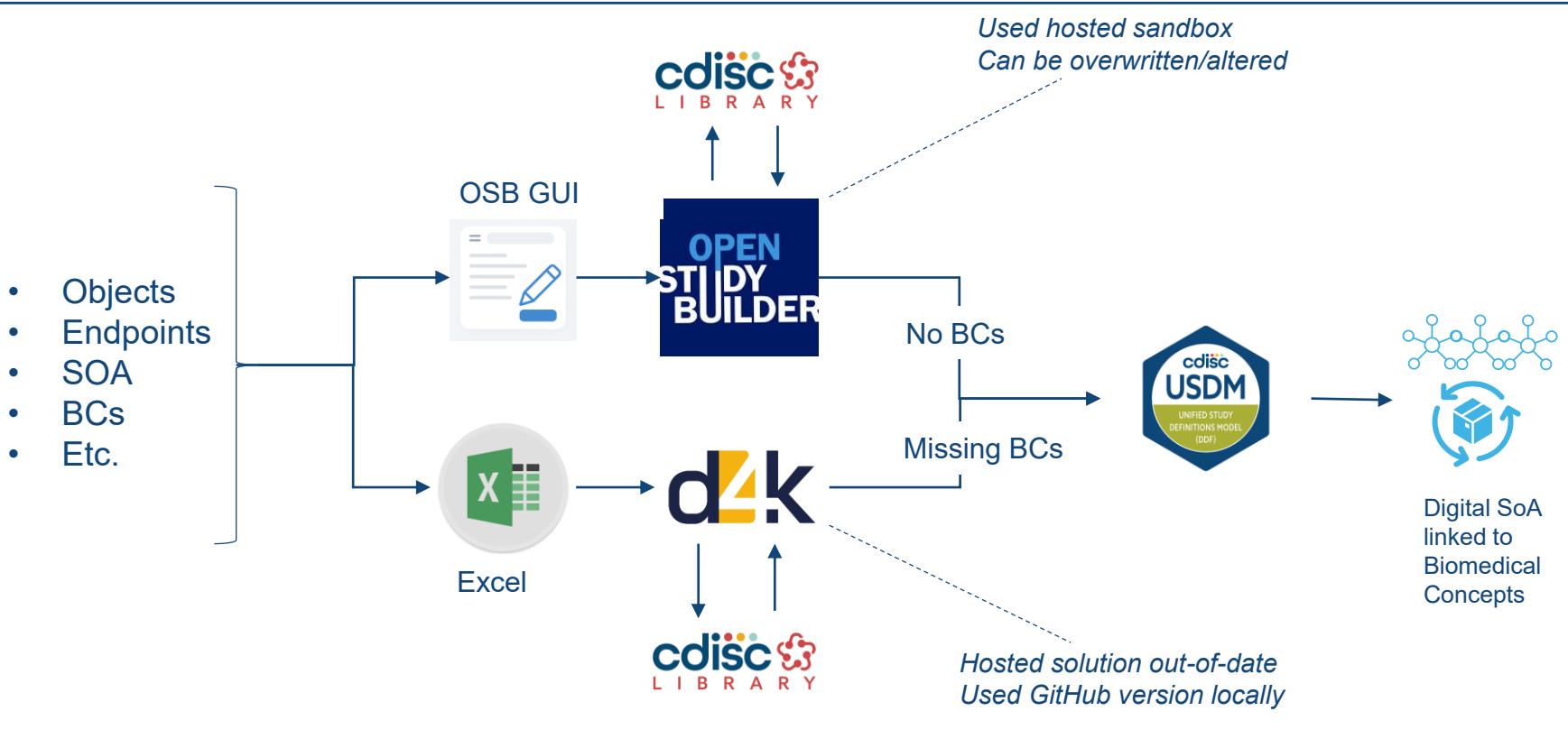
Challenges

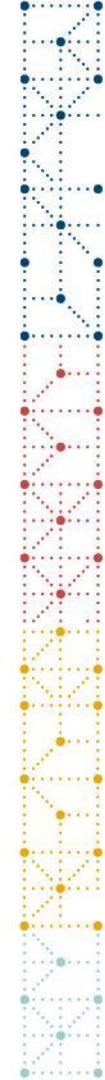
- Interpreting LZZT protocol information to identify what data is needed
- 2 Study Design software tools (next slide)
- Not enough time to demonstrate protocol amendment impact assessment

Insights

- Linking concepts works, but concept groupings are needed for usability
 - collection method (CRFs, Data Transfers, ...)
 - data type (Questionnaires, Clinical Measures, Procedures, ...)
 - category (Demographics, Digital Health Technologies, ...)

Study Design Applications Used





Build Define.xml and Shell datasets

Achievements

- Used BCs from USDM JSON and query CDISC library for dataset specializations
- Identified all metadata for automation

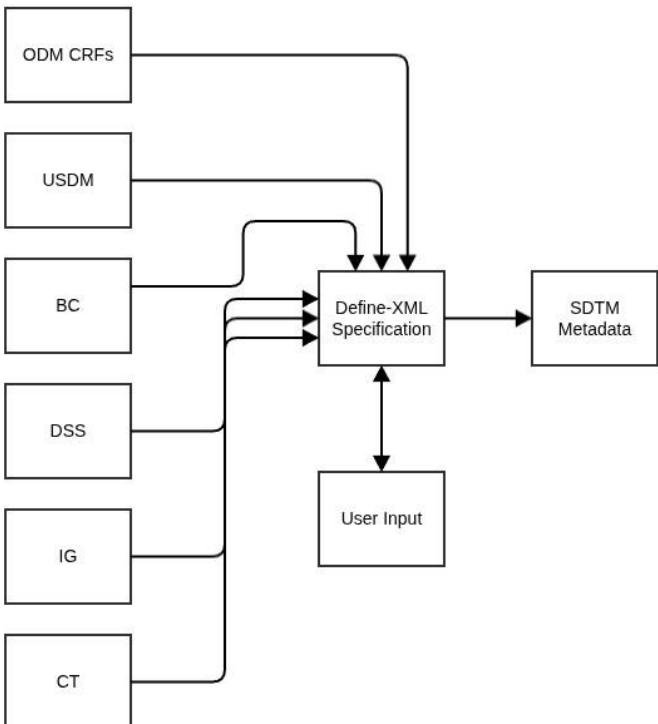
Challenges

- Large process flow to achieve full automation
- Work-arounds needed to obtain all needed metadata

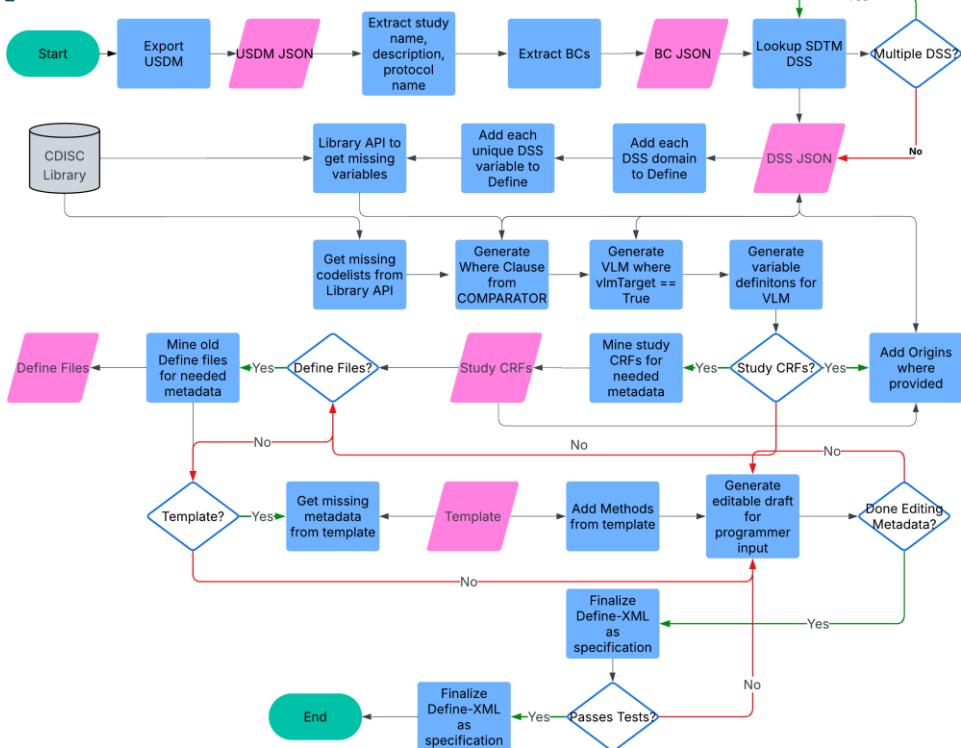
Insights

- To fully automate, we need to add operational metadata
- The process can benefit from existing (historic) define.xls
- New standard opportunity (Define.JSON)

Define-XML Metadata flow



High-level Data Flow



Detailed Data Flow

Build CRFs and annotated CRFs

Achievements

- Generation of ODM file of the necessary structures
- Generation HTML rendition of CRFs and annotated CRFs

Challenges

- Collection dataset specializations under development and not available in the CDISC Library
- USDM does not provide forms metadata
- Need to use a workaround (xls spreadsheet)

Insights

- Biomedical Concept groupings and collection specializations are needed
- Additional forms metadata are needed

Annotated CRF generated from Biomedical Concept

EQ-5D-5L Questionnaire

DOMAIN = QS; QSCAT = EQ-5D-5L

EQ-5D-5L Questionnaire - Lead Question

Field	Value	Details
* Category of Questionnaire	-- Select --	QSCAT = EQ-5D-5L <i>CodeList: QSCAT</i>
Was the EQ-5D-5L questionnaire performed?	-- Select --	[NOT SUBMITTED]; QSSTAT = NOT DONE <i>CodeList: NY</i>
* Date of Assessment	mm/dd/yyyy	QSDTC
* Collected Evaluation Interval		QSEVINTX = TODAY

* Mandatory field

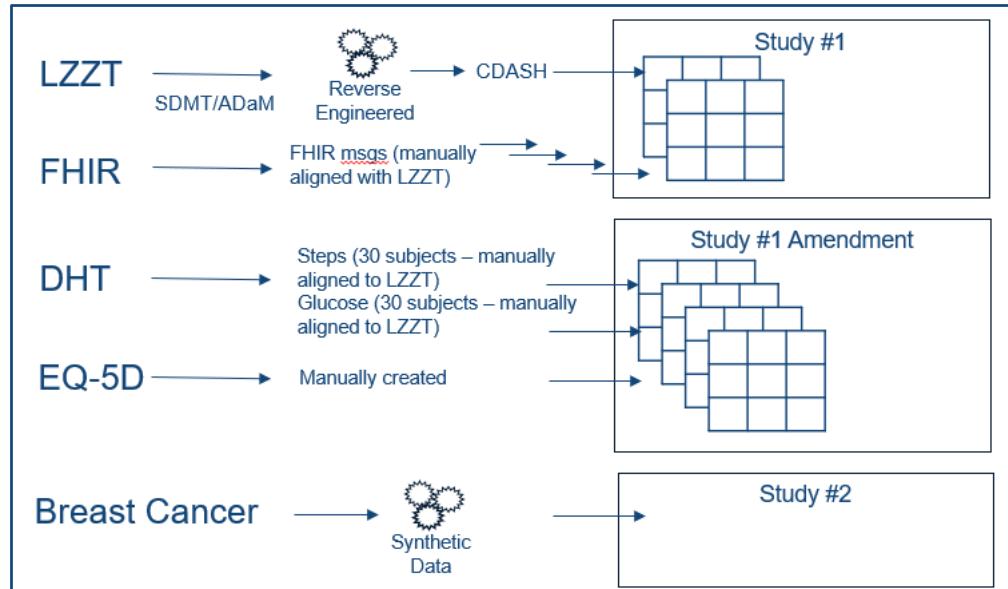
EQ-5D-5L Questionnaire - Question 1-5

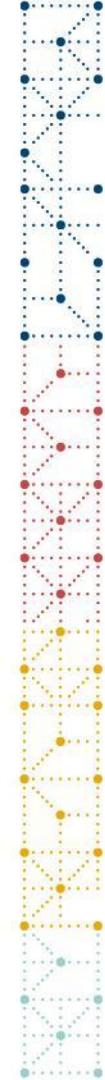
Under each heading, please check the ONE box that best describes your health TODAY.

Field	Value	Details
* MOBILITY	-- Select --	QSORRES where QTESTCD = EQ5D0201 <i>CodeList: EQ5D0201-QSORRES</i>
* SELF-CARE	-- Select --	QSORRES where QTESTCD = EQ5D0202 <i>CodeList: EQ5D0202-QSORRES</i>
* USUAL ACTIVITIES (e.g. work, study, housework, family or leisure activities)	-- Select --	QSORRES where QTESTCD = EQ5D0203 <i>CodeList: EQ5D0203-QSORRES</i>
* PAIN / DISCOMFORT	-- Select --	QSORRES where QTESTCD = EQ5D0204 <i>CodeList: EQ5D0204-QSORRES</i>
* ANXIETY / DEPRESSION	-- Select --	QSORRES where QTESTCD = EQ5D0205 <i>CodeList: EQ5D0205-QSORRES</i>

Run – preparing source data

- Started with CDISC pilot data
- Reverse engineered source data
- Manual aligning with LZZT data
- Created aligned FHIR messages
- Lots of help from the Community





Run – Generate SDTM datasets from source data

Achievements

- Generation of multiple SDTM datasets using the SDTM.OAK open-source R package
- Automated controlled terminology mapping

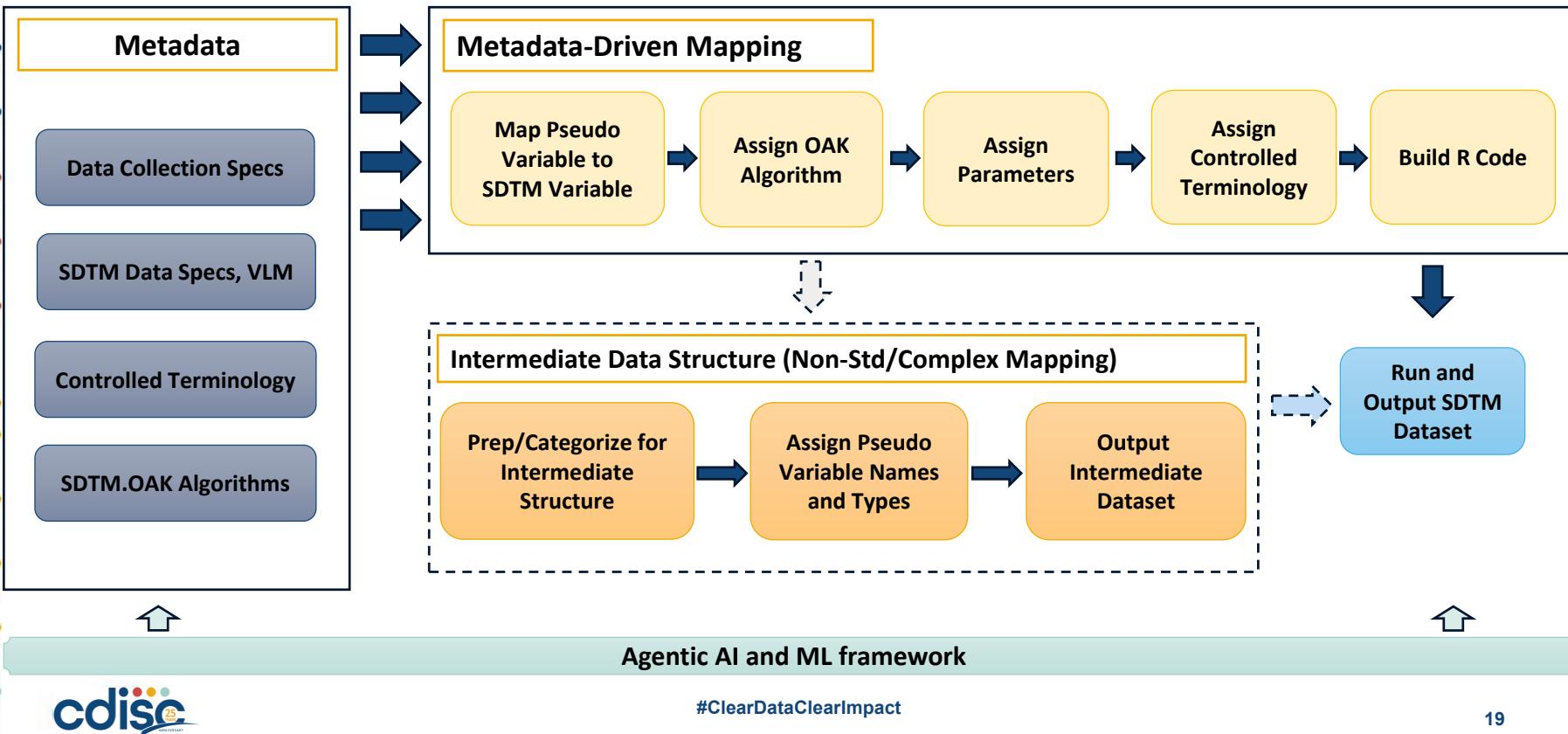
Challenges

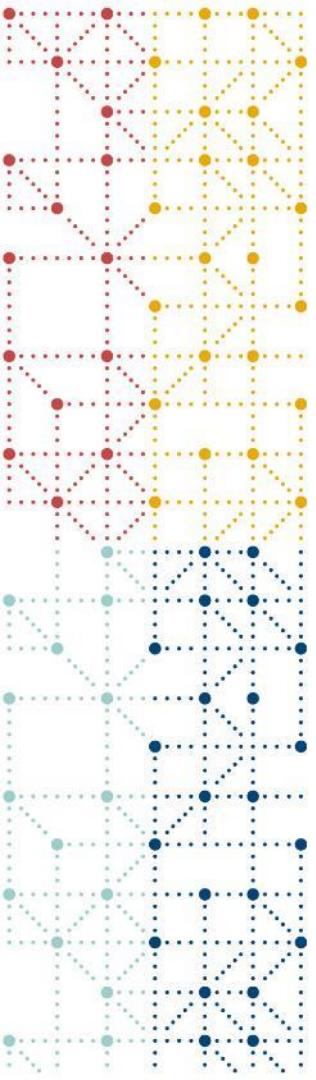
- Dealing with non-standard data
- Limited source data

Insights

- Knowledgeable and active R programmer community
- Expanding approach with agentic AI and ML framework

Run - SDTM Datasets with SDTM.OAK





Looking Forward: Art of the Possible



Welcome Back!

Enter your credentials to access your account

User Name

JSmith@company.com

Password

[Forgot password?](#)

[Sign In](#)

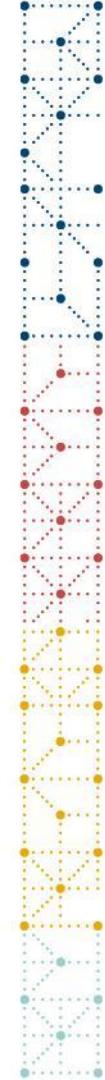
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The Future of the Clinical Study Design is Digital

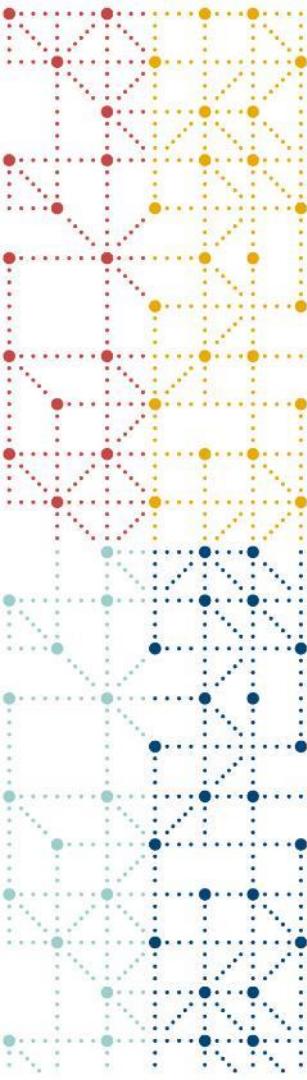
Is Your Organization Ready?

[Get Started with USDM Onboarding](#)



Art of the Possible

- Purpose of this Prototype
 - This is a **conceptual UX Design**
 - It illustrates **how CDISC Standards could be experienced** in an integrated environment
 - Not functional software, but a **visual representation**
- Helps **visualize the potential** of standards-driven end-to-end automation
- [CDISC Final - Prototype](#)



Thank You!

