

# CREATE: **C**hildren's **RE**gistry for the **A**dvancement of **ThE**rapeutics

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Pediatric IBD Foundation

# Efficacy and Safety (Parent Perspective)

Efficacy: what the doctor prescribes for our children....commonly off label in IBD

Safety: our primary concern and what keeps us up at night. Sadly, more children die from off label use in IBD than in any other disease.



- Pediatric patients are chronically under-represented in clinical trials without standardized safety data collection.
- It is critical that studies leading to new drug approvals inform the practitioner with pediatric safety and monitoring data to allow proper use of these drugs.
- To protect the long term safety of children who receive many IBD medications off-label, there is a need for a safety registry that is independent and accessible to the public

# Duration of Clinical Trials Submitted to FDA: JAMA Pediatrics: Jan. 2019 Zimmerman, et al



- The increasing prevalence of pediatric chronic disease results in increased exposure to long term therapy. The duration of drug trials to support therapies in children has not been evaluated and is a critical first step in forming safety pharmacovigilance
- 306 trials supporting 86 drugs (2015-2017)
- 61% maximum duration of trials less than 52 weeks - median 44 weeks
- 12% (10 drugs) - maximum duration 3 or more years



- Conclusion and Relevance:
- Pediatric clinical trial design to sufficiently investigate drug safety to support FDA approval are of relatively limited duration. Given the long term exposure of pediatric patients to these drugs, the clinical community should consider whether new approaches are needed to better understand the safety associated with long term use of these drugs



Pediatric IBD Foundation / Eric Zuckerman, DO!

## SEC. 3022. REAL WORLD EVIDENCE.!

Chapter V of the Federal Food, Drug, and Cosmetic Act is amended by inserting after section 505E (21U.S.C. 355f) the following:!

!  
"SEC. 505F. UTILIZING REAL WORLD EVIDENCE.!

"(a) IN GENERAL.—The Secretary shall establish a Program to evaluate the potential use of real world evidence—!

"(1) to help to support the approval of a new indication for a drug approved under section 505(c); and !

"(2) to help to support or satisfy post approval study requirements.!

!  
"(b) REAL WORLD EVIDENCE DEFINED.!  
—In this section, the term 'real world evidence' means data regarding the usage, or the potential benefits or risks, of a drug derived from sources other than randomized clinical trials.!

"(c) PROGRAM FRAMEWORK.—!

"(1) IN GENERAL.—Not later than 2 years after the date of enactment of the 21<sup>st</sup> Century Cures Act, the Secretary shall establish a draft framework for implementation of the program under this section.!

"(2) CONTENTS OF FRAMEWORK.—The framework shall include information describing—!

"(A) the sources of real world evidence, including ongoing safety surveillance, observational studies, registries, claims, and patient-centered outcomes research activities;!

"(B) the gaps in data collection activities;!  
21 USC 355g.!

!



# Introduction

CREATE™

Regulatory compliant pediatric IBD safety registry that supports Drug Development Programs.

*CREATE can serve as a model for other rare disease registries*





- *Patients and Providers* - simplifies enrollment and harness the data lost in off-label prescriptions
- *Industry* - saves money by combining registries and distributing costs
- *Non-profits* – facilitates collaboration in the best interests of their members
- *Federal agencies* - assists FDA in their regulatory responsibilities including post-marketing surveillance





# Background:



- 2015- CREATE model introduced at FDA GREAT 3
- 2016- PIBDF sponsored CPIM at FDA with the IBD community
- 2017- CREATE working group which included industry, CCF, ICN, FDA (consulting) EMA, clinicians and patient advocates. The group produced a CREATE charter draft:  
“It will be established as a scalable multi-center, cooperative platform among institutions to enable the development and maintenance of a longitudinal, observational database of pediatric IBD patients to facilitate completion of regulatory requirements including post-marketing commitments”

- CREATE™ registry is an opportunity for colleagues and competitors in the IBD community to work together with regulators to meet the challenge of tracking safety and monitoring rare events in rare diseases.
- Lessons learned from Pediatric Oncology Group Registry (COGR) and Pediatric Rheumatology (CARRA)
- CREATE™ registry is envisioned to share data with other disciplines treating children with similar therapies



Current situation is based on product specific registries and passive surveillance without standardized data collection and adequate long term safety monitoring

- This has the issue of slowing down research, development and approval of new drugs for children....on average 9+ years after adult labeling
- Fewer treatments with proper labeling information for pediatric patients, especially very young patients (<6) for whom no biologic is approved
- Lack of long term safety information on the powerful medications used to treat IBD is of concern to the entire community



- Users will be able to download extracts of the data so that they can perform their own analyses
- The data will be co-owned by the registry an independent 501c3 and contributing partners with pharmaceutical companies having the majority of seats on CREATE's BOD.
- Availability of registry data will be determined by the BOD, envisioned to be a permission sharing model to protect confidentiality and prevent any competitive advantage



- CREATE™ will receive funding from participating companies, private foundations and other sources of public or private funding. CREATE™ will also seek assistance from other appropriate sources and as a 501c3, will be able to execute contracts

1. Rapid accrual of a large number of patients with long term follow up capability and streamlined AE reporting
2. Partnership among stakeholders including investigators, industry, patients and regulators
3. A versatile platform that will have interoperability with other databases nationally....and globally

# CREATE 2019-2020

1. Form a limited duration consortium of IBD stakeholders including industry representatives and physicians and with FDA consulting to develop the infrastructure for an IBD registry.
2. Define and execute a regulatory strategy to obtain FDA endorsement for phase 4 requirements
3. Develop a sustainable business plan for the launch of a consortium focused on the implementation of CREATE







# Solutionary

A person or group who identifies unsustainable systems then develops practical, effective and visionary solutions to replace them.



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