



Assessing Treatment Impact Using PROs: Challenges in Study Design, Conduct and Analysis



USE OF PRO TO SUPPORT EUROPEAN AND FDA APPROVAL DECISIONS

An Introduction on QOL

Paris
May 11th
Session 4
11:15 – 12:45

Eric Abadie, MD, MBA
AFSSAPS, CPMP, COMP

EMEA Documents (Dec 2003): **344**

■ Efficacy Working Party Notes for Guidance

→ NfG = **85** in total

25 (29,4%) containing QOL statements

■ European Public Assessment Reports

→ EPARs = **259** products (*including 34 withdrawals*)

13 (5%) containing QOL statement in
SPC

Efficacy Working Party Notes for Guidance

→ NfG: 25 (29,4%) containing QOL statement

QOL assessment recommended with various cautions and warnings or generic statement

- ✓ « *QOL important, lack of specific validation* »
- ✓ « *QOL general or specific disease questionnaire* »
- ✓ « *QOL can provide valuable information* »
- ✓ « *QoL may be used when validated for the patient population* »
- ✓ « *Established as useful additional secondary endpoints* »
- ✓ « *The use of justified QOL Instruments in long term controlled and preferably double-blind studies may provide additional information of principal importance in the assessment of benefit risk* »

Examples of QOL Questionnaires which might be used

- AIMS, HAQ, HAM-A
- IBDQ,
- Minnesota Living with Heart Failure
- St Georges Respiratory Questionnaire
- Womac
- QOL « *Generic* » instruments, SF-36
- QOL *Disease specific questionnaires*

European Public Assessment Reports

→ EPARs = **13 (5%)** containing QOL statement **in SPC**

- ❑ Cancer: Taxotere, Temodal, Thyrogen
- ❑ Enzyme Replacement Therapy: Aldurazyme (-)
[Mucopolysaccharidosis]; Fabrazyme (-) [Fabry Disease]
- ❑ Hepatitis C: PegIntron
- ❑ Lymphomatous Meningitis: Depocyte (-)
- ❑ Rheumatology: Humira
- ❑ Rhinitis: Aerius, Allex, Azomyr, Neoclarityn, Opulis



5.1 Pharmacodynamic properties

Aerius was effective in alleviating the burden of seasonal allergic rhinitis (SAR) as shown by the total score of the rhino-conjunctivitis quality of life questionnaire.

The greatest amelioration was seen in the domains of practical problems and daily activities limited by symptoms.

- **FDA and EMEA do not require QOL data for marketing (pharmacoeconomics?)**
- **Problems related to QOL scales**
 - ✓ no advantage compared to a « symptom » criterion
 - ✓ design issues (timing and number of assessments, length of trial,...)
 - ✓ methodological issues (missing data, multi-parameter, handling of multiplicity, lack of validation of specific scales)
 - ✓ difficult interpretation

- **Define conditions where QOL is the most useful**
- **What is the level of evidence to give a claim...**

- Patient 's point of view and increased involvement in medical decision making
- Importance of QOL measurements where no hard endpoints are available



Conclusion

- Interest in QOL measures
- Phase III pivotal trials
- Training of regulators is warranted !