Non-Small Cell Lung Cancer (NSCLC) Working Group

Presented at the Third Annual PRO Consortium Workshop – Silver Spring, MD – April 4, 2012

Background

Rationale for NSCLC Working Group (WG)

- PRO Consortium members and FDA advisors identified NSCLC as a priority area
- As current therapies for advanced NSCLC are not curative, any new therapy should demonstrate control of distressing disease symptoms; including this in the label would enable a standard method for patients and providers to compare benefit between treatments
- While valid, reliable, and responsive PRO instruments exist for the assessment of NSCLC symptoms, none meet the current standards for an FDA-approved label claim
- FDA had stated a 'fit for purpose' method to assess NSCLC symptoms would be helpful in evaluating the patient benefit of new therapies

Goal of the NSCLC WG

- To develop a PRO measure for patient-experienced symptoms in advanced NSCLC (stages III/IV and ECOG performance status of 0-2) for use in clinical trials as a primary or secondary endpoint to establish treatment benefit

Targeted Labeling Language

- Patients treated with [Product X] reported an improvement in the symptoms of NSCLC or a delay in the deterioration of the symptoms of NSCLC
  - Improvement for patients who are symptomatic at baseline
  - Delayed deterioration for patients who are asymptomatic at baseline

Milestones

Milestone	Expected Time after Kick-Off	Completed Date
Scoping Stage		July 27, 2011
Content Validity Stage		
Vendor selection and contracting	Contract completion targeted 4/30/2012	Vendor selected 1/26/2012
Completion of background research (literature review and 1st expert panel)	9 weeks	
Completion of initial qualitative research and generate items (concept elicitation, selection and item generation – patients interviews & expert panels)	31 weeks	
Refining initial instrument (cognitive interviewing, final expert panel, identification of ePRO platform, translatability assessment)	46 weeks	
Quantitative analysis	66 weeks	
Content Validity Summary document submitted to FDA for interim review	78 weeks	
Psychometric Testing Stage	TBD	

Content of Interest

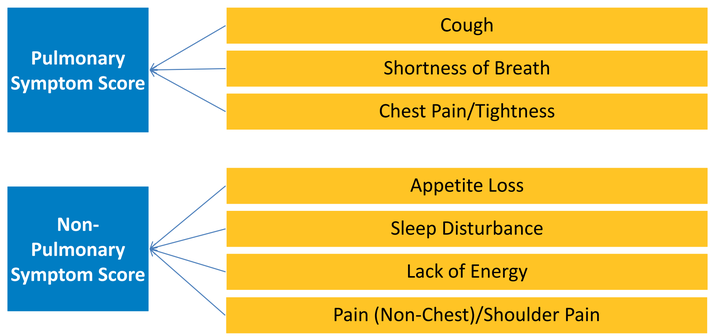
Endpoint Model for Treatment of NSCLC

Endpoint Hierarchy	Endpoint Concept(s)	Clinical Outcome Assessment (COA) /Biomarker/Survival
Primary	▪ Progression-Free Survival (PFS) - Response Evaluation Criteria in Solid Tumors (RECIST) ▪ Overall Survival	Biomarker Survival
Secondary	▪ Improvement in NSCLC Symptoms – NSCLC symptom inventory ▪ Delay in time to deterioration of NSCLC symptoms ▪ Delay in time to onset of symptoms of NSCLC	PRO

Target Population

- Patients 18 years and older
- Advanced NSCLC (Stage III/IV) with Eastern Cooperative Oncology Group (ECOG) status of 0-2, regardless of line of therapy
- In addition, we will be assessing symptom experience of early stage (I/II) patients to determine the applicability of the NSCLC Symptom Inventory to all stages of disease

Hypothesized Conceptual Framework



Updates

- Alicyn Campbell replaced Ben Gutierrez as co-chair in early 2012
- Vendor selection process completed with HRA chosen based, in part, on their unique collaboration with Memorial Sloan Kettering Cancer Center, a leading thoracic cancer center
- Project Agreement negotiation between C-Path and the seven sponsoring firms are ongoing
- Based on the October 2011 FDA Clinical Outcome Assessment (COA) Workshop and the PRO Consortium's Communications Subcommittee, a Core Messages slide set was developed and has been adapted for use in NSCLC

Working Group Plans

Next Steps

- HRA kick-off meeting to be scheduled upon execution of the Project Agreements between C-Path and the seven sponsoring firms
- Convening expert panel of clinical experts in NSCLC symptomatology and psychometrics
  - As new therapies change the course of the disease and patient's experience of symptoms, clinical input will be critical for ensuring the final measure is reflective of contemporary patient experience and the most current clinical practice

Dissemination plan

- Proposed: Presentation of NSCLC-adapted core messages at ISOQOL/ISPOR

Topics for Discussion

Concern Worth Noting

- Ensuring understanding and uniformity of nomenclature within and across organizations to facilitate efficient communication – a continuing challenge

Unique Issues for the Working Group and the Resolutions

- Uncertainty about sponsor commitment to participate – fewer than expected number of sponsors
  - The overall cost of the project was split among the sponsors willing to fund the project; additional members can join the WG when funding is secured.
- Lack of a quantitative component in the Content Validity Stage
  - The RFP template was modified to include a quantitative step during the Content Validity Stage
- Negotiating with the FDA regarding the target population
  - Dialogue with the FDA, culminating in a face-to-face Type C meeting where agreement was reached regarding the target population

Lessons Learned

- Strong leadership from WG co-chairs is vital to ensuring WG progress, particularly during the development and submission of the Scoping Stage Summary Document

Working Group Participants

Company/Organization	Name
Abbott Laboratories	Vijayveer Bonthapally, Saurabh Ray
Boehringer Ingelheim Pharmaceuticals, Inc.	Juliane Lungershausen
Bristol-Myers Squibb	Ben Gutierrez
Daiichi Sankyo, Inc.	Rajiv Mallick (Co-Chair)
Eli Lilly & Company	Astra Liepa, Nicki Bush
Merck Sharp & Dohme Corp.	Jean Marie Arduino, Jay Pearson
Genentech, Inc.	Alicyn Campbell (Co-Chair)

Contract Research Organization	Name
Health Research Associates (HRA)	Mona Martin, Don Bushnell, Cecilia Dedios, Kelly McCarrier