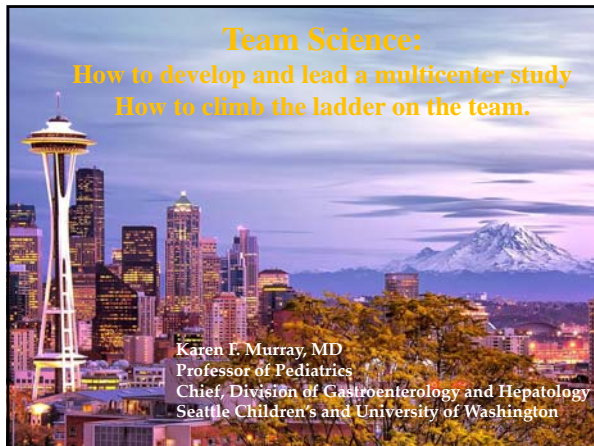


Team Science:
How to develop and lead a multicenter study
How to climb the ladder on the team.



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Disclosures

In the past 12 months I have had the following financial relationships relevant to this CME activity:

- NIH/NIDDK- Grant support (including salary support)
- Gilead
 - Research contract
 - Consulting contract with Seattle Children's (for DMC activity)
- Vertex- Research contract
- Merck- Stock

I do not intend to discuss any unapproved or investigational product

Multi-center Trials

- Types, advantages of, and requirements for
- Centrally sponsored multi-site, versus cooperative multi-centered
- Most common NIDDK mechanisms
- Structures of *large* federal multi-center trials
- DCCs and DMCs/DSMBs
- Pitfalls- learnings from the NCS
- Getting started and involved...my thoughts!

Multi-site/center Trials

Common Types

- Small Investigator-initiated
 - R01/R21 (NIDDK < 3 sites)
 - corporate, other
- Foundation initiated and sponsored
- Large Corporate initiated and funded
- Larger federally funded (NIDDK ≥ 3)
 - implementation planning phase (U34)
 - cooperative agreement (U01)

Multicenter Trials

Key advantages

- Collaboration across sites
- Ability to recruit more subjects
- Inclusion of a wider diversity of subjects
- Potential for “power” in data collection



Multicenter Trials

Key requirements

- Focused aims with achievable plans
- Collaborative sites
- Standardization across sites
- Uniformity of procedures
- High Data quality and oversight
- Coordination, governance, and oversight plans



	Centrally sponsored, multi-site	Cooperative, multi-center
Protocol development	Centralized	Investigators
Data control	Centralized	Investigators
Data analysis, manuscript development	Centralized	Investigators
Responsibility for quality, training	Centralized	Investigators
Site Investigators	“Contractors”	“co-Investigators”
Site collaboration needed	low	high

NIDDK Multi-Center Grants

- ◆ Hypothesis-driven
- ◆ Focused on a disease relevant to the mission of NIDDK
- ◆ Expected to improve understanding, diagnosis, prevention or treatment of the disease being studied.
- ◆ Expected to change clinical practice after 5-year funding period

- **R21/R01: Individual, few sites (NIDDK < 3)**
- **U34: Administrative establishment of U01**
- **U01: Multi-center cooperative study group agreement**

NIH- Individual or few sites

R01

- To support a discrete, specified, circumscribed project
- NIH's most commonly used grant program
- Usually no specific dollar limit (more stringent funding threshold for >500K)
- Generally awarded for 3-5 years

R21

- Encourages new, exploratory and developmental research projects
- Pilot and feasibility studies
- Up to two years of funding
- Funding cap

Applications:

- ◆ General-use Parent Announcement (unsolicited application)
- ◆ Funding Opportunity Announcements (FOA)

NIH- Planning and Development U34

- To support administrative activities required to begin recruitment of subjects into a multi-center trial (Protocol already final):
 - establishing the research team
 - developing the tools for data management and oversight
 - defining recruitment strategies
 - investigators brochure, manual of operations
 - establishing a data and safety monitoring plan
- Expected to result in an invitation to submit an U01 application to conduct the clinical study if U34 milestones achieved.

NIH- Cooperative Agreement U01

- Supports discrete, specified, circumscribed projects
- Used when substantial programmatic involvement is anticipated between the awarding Institute and Centers
- No specific dollar limit unless specified in Funding Opportunity Announcement

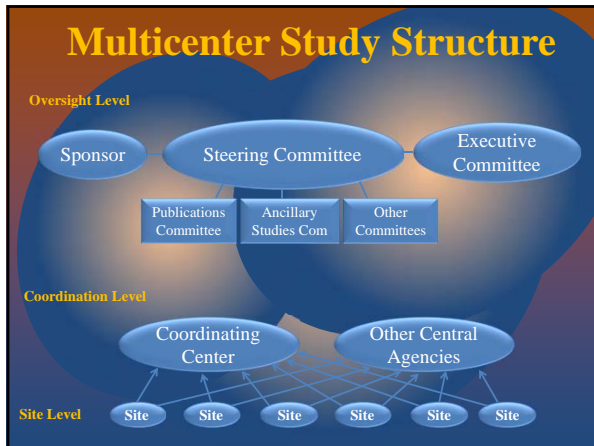
Applications:

- Linked to U34
- Funding Opportunity Announcements



Establishing the Multi-Center Trial Group NIH and you

- Convergence of opportunities- ideas and funding
- Network of like-minded clinical sites more effective
- The Team
 - By competitive application or between collaborators
 - Collaborative reputation
 - Reputation for recruitment and retention
 - Inclusion of special talents/needs
- Data management plan
 - Need for a Data Coordinating Center
- Governance and oversight plan



Data Coordinating Center

Conducts and coordinates the pre-, during, and post-study administrative needs of the research group, including:

- Protocol, manuals, regulatory documentation
- Site communication and meetings
- Monitors data quality
- Monitors and reports safety events
- Prepares Sponsor and DSMB Reports
- Helps with data analysis
- Helps with Manuscript preparation

Data Safety Monitoring Board

DSMB - Data Safety Monitoring Board (NIH)
DMC - Data Monitoring Committee (FDA)

Group of individuals with pertinent expertise that reviews on a regular basis accumulating clinical trial data.

Advises the sponsor regarding the continuing:

- Safety of trial subjects and those yet to be recruited
- Data quality, completeness, and timeliness
- Performance of individual centers
- Validity of the trial
- Scientific merit of the trial

Heart Special Project Committee 1967. Organization, Review and Administration of Cooperative Studies (Greenberg Report). *Contr Clin Trials*, 1968;9:137-148
Ellenberg et al. Practical Issues in Data Monitoring of Clinical Trials. *Stat Med* 1993;12:415-616

Data Safety Monitoring Board

All clinical trials require safety monitoring, but not all trials require monitoring by a formal committee that may be external to the trial organizers, sponsors, and investigators.

Need for a DMC/DSMB:

1. When interim analysis will improve safety:
 - a highly favorable or unfavorable result, might ethically require premature termination
 - There are safety concerns e.g. invasive treatments, expected serious toxicity
 - Studying a fragile population e.g. children, pregnant women, elderly, terminally ill, of diminished mental capacity, at elevated risk of death or other serious outcomes
 - The study is large, of long duration, and multi-center.
2. When practical
3. When can help assure scientific validity

The Establishment and Operation of Clinical Trial Data Monitoring Committees for Clinical Trial Sponsors. DHHS, FDA, CBER, CDER, CDRH, Exp 10/31/2015

Data Safety Monitoring Board

Usage is increasing in industry-sponsored trials because:


- Growing number with mortality or major morbidity endpoints
- Increasing collaboration between industry and government in sponsoring major clinical trials
- Heightened awareness of problems in clinical trial conduct and analysis that could lead to:
 - inaccurate and/or biased results
 - bias in determining early termination for efficacy
- Concerns of IRBs regarding ongoing trial monitoring and patient safety in multicenter trials.

Pitfalls for Multicenter trials

Learning from the National Children's Study

The NCS was a longitudinal birth cohort study examining the influence of environmental and biological factors on the health and development of children.

- Aims, scope unlikely to achieve goals
- Design too complex to achieve goals
- Not scientifically valid with new biological insights
- Investigative team not suited to tasks
 - Could not gain scientific consensus
- Management oversight not effective



Children's Health Act of 2000 authorized NICHD to establish
Reviewed in 2008 and 2014, NRCIM, National Academic Press

Team Science: getting started

- Support of supervisor/mentor
 - Time
 - Invited as co-I, sub-I, or Trainee
 - Partner with PI in subject recruitment
 - Submit an ancillary project
 - Granted Site Principle Investigatorship
 - Introductions (the Corporate “list” and the NIH “list”)
- Invited to participate in multicenter trial
or
- Have an idea that is novel and requires more than 1 site to do

Multi-Centered Trials Getting involved

- Secure Funding (Principle Investigator):
 - Apply for R21/R01, U34
 - Respond to RFA to U01
 - Corporate: contact sponsor of anticipated study
- Coordinator support available



*Mentorship is fundamental:
inclusion, introductions, ideas and support*

Multi-Center Trials Summary

- Doing collaborative research has many advantages, but to do it well there must be significant organization and oversight.
- They can be time-intensive; junior faculty/trainees must

**Discuss your ideas with mentors,
ask for help, seek mentorship!**

- Publication authorship
- Building reputation
- Experience
- Getting started is about seizing or making the opportunity.
