
The value of Real World Evidence in Clinical Trials

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Why it matters

- Develop **data-driven hypotheses** for research and support to clinical practice
- Optimize costs and performance of clinical trial by **integrating** evidence from **observational studies**

Focus areas

Standard framework for: architecture, process, roles & responsibilities)

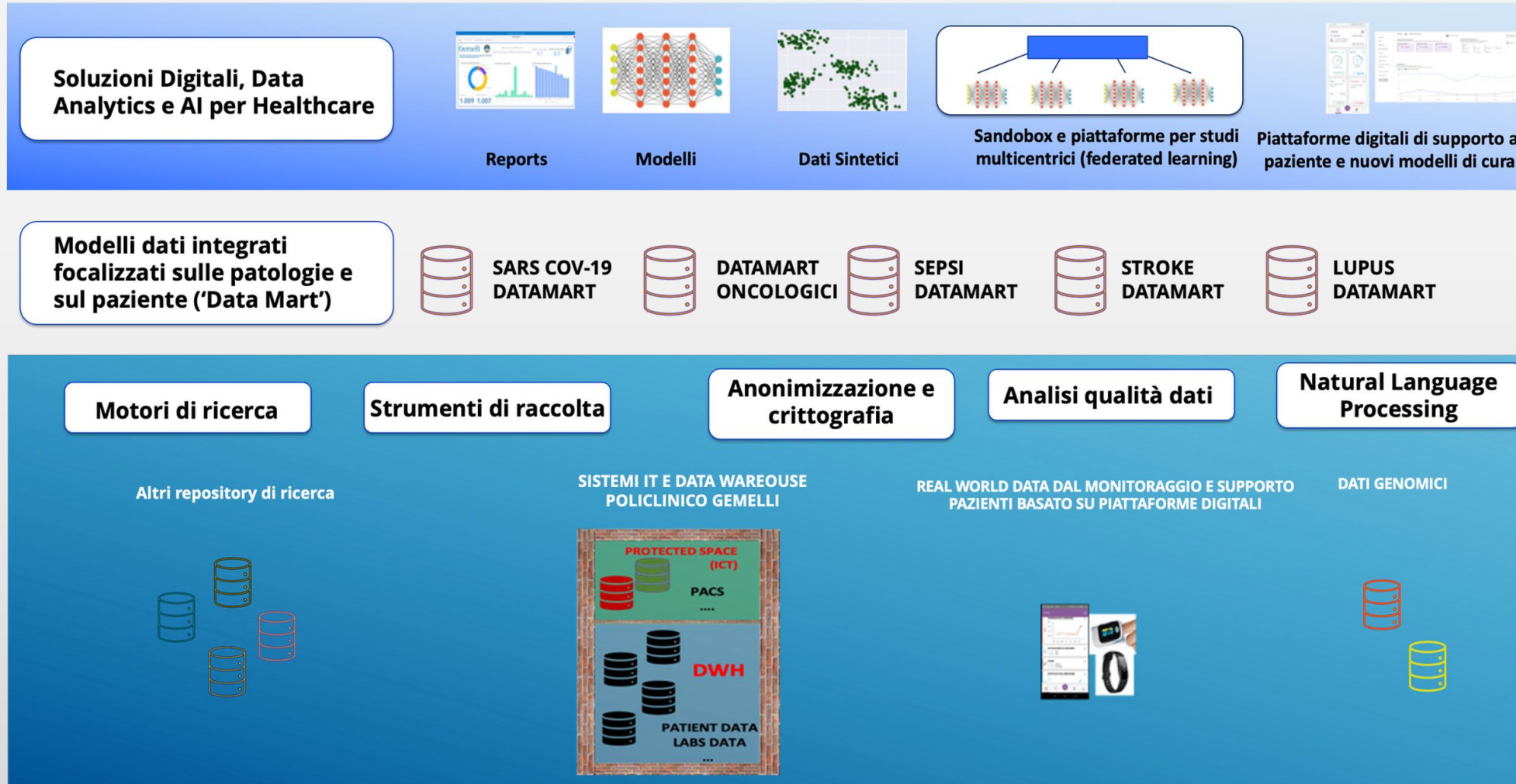
Compliance to **privacy & ethical standard**

Data **Quality** and Process **Traceability**

Co-design with industry & research

GEMELLI GENERATOR REAL WORLD DATA RESEARCH FACILITY

Leverage **Real World Evidence and Data Science** techniques to enable new insights in clinical research and practice

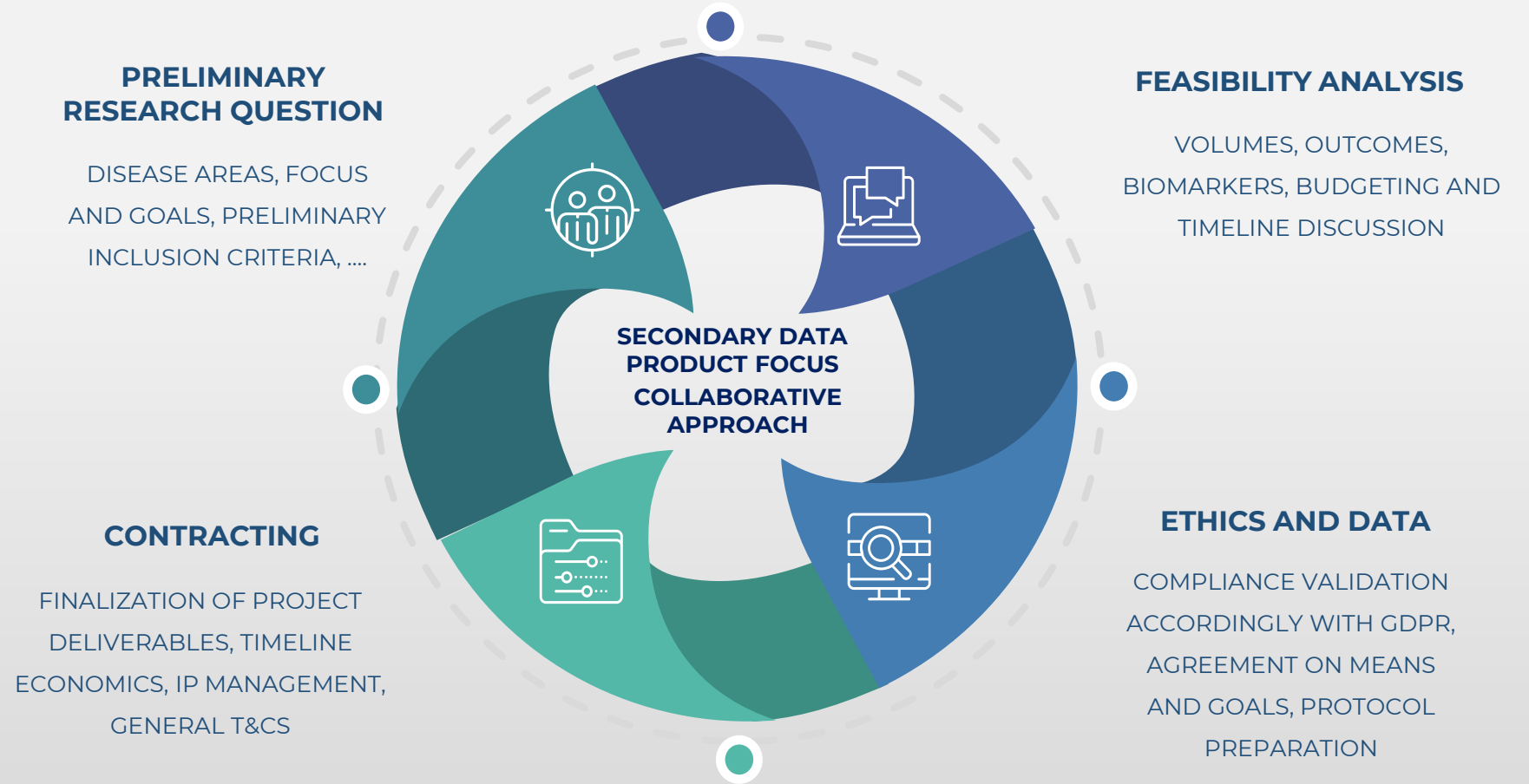


GENERATOR RWE INFRASTRUCTURE

GEMELLI DIGITAL MEDICINE & HEALTH

GEMELLI **NewCo** for Digital Healthcare

Mission: exploit the full potential of **knowledge-base of Gemelli** within Digital Health landscape and develop **RWE / digital medicine solutions** with full ethical, technical and regulatory credentials.



HOW TO UNLOCK RWD VALUE

Challenges

- ❑ A vast amount of data
- ❑ Data heterogeneity
- ❑ Data silos
- ❑ Data privacy
- ❑ Know-how

What is needed

- An adequate data management system
- Data quality solutions
- Analytical techniques to handle sensitive data
- Advanced analytics
- High-computing performance
- Open source integration

THE IMPORTANCE OF HAVING AN ALL-IN-ONE SOLUTION

HOW SAS DELIVERS



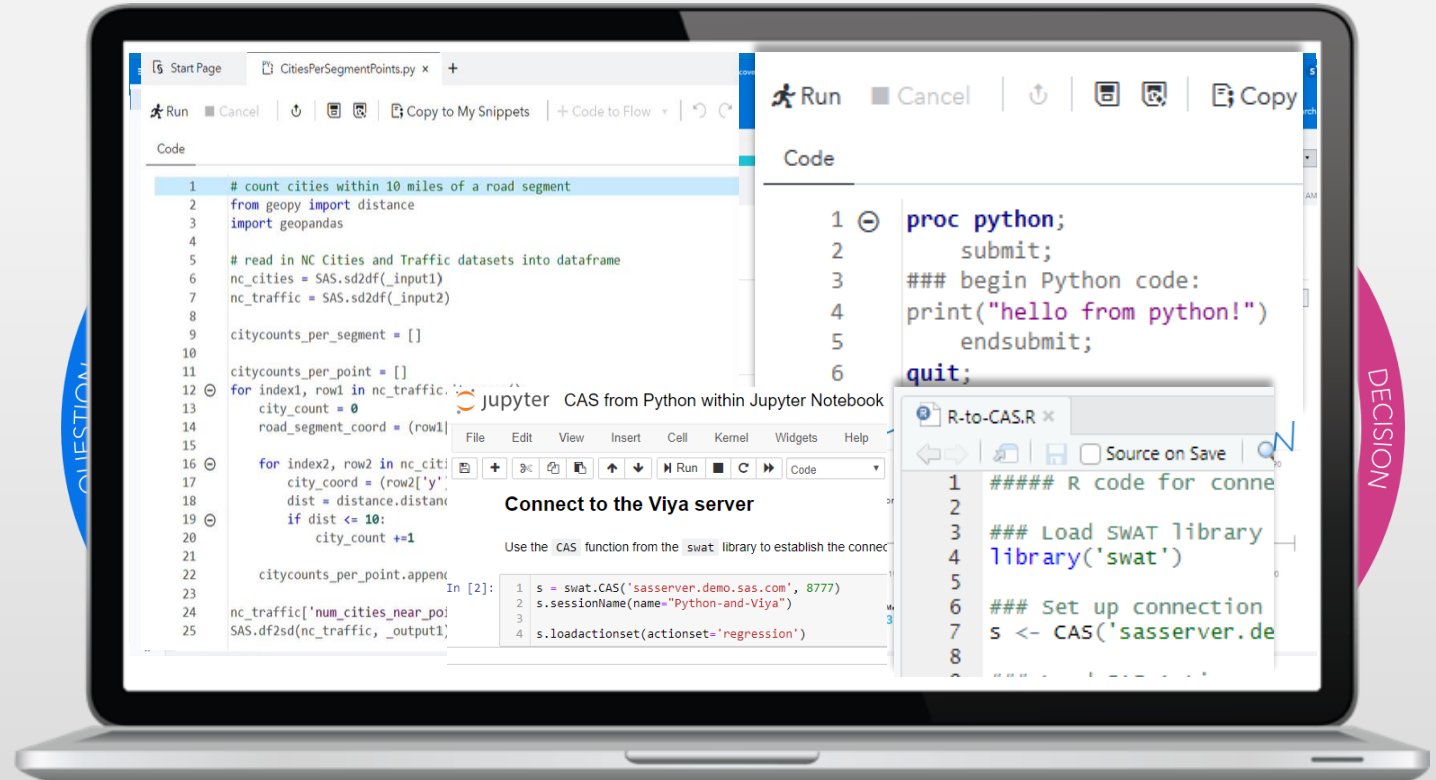
Improve efficiency



Increase collaboration



Effectively manage RWD & Analytics Assets



USE CASE: DESIGN OF CLINICAL TRIAL

Principal Investigator: Dr. A. Orlandi

FOCUS: patient identification and selection criteria

Step 1: automated procedures to filter patients on first-level inclusion / exclusion criteria



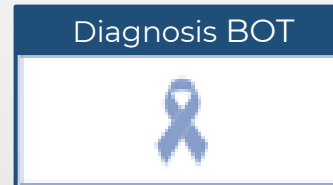
Step 2: AI-based rules for composite clinical parameters (example: subtype)



Step 3: provide clinical research team with actionable information

TECHNICAL SOLUTION

- Specialized AI engines (“SEARCH” BOTs) that automatically crawl into the different domains of Breast DATA MART



- Natural language understanding on free text medical reports + rule engines co-designed with clinical team
- User-oriented data visualization and drill-down tools to analyze patient history in depth

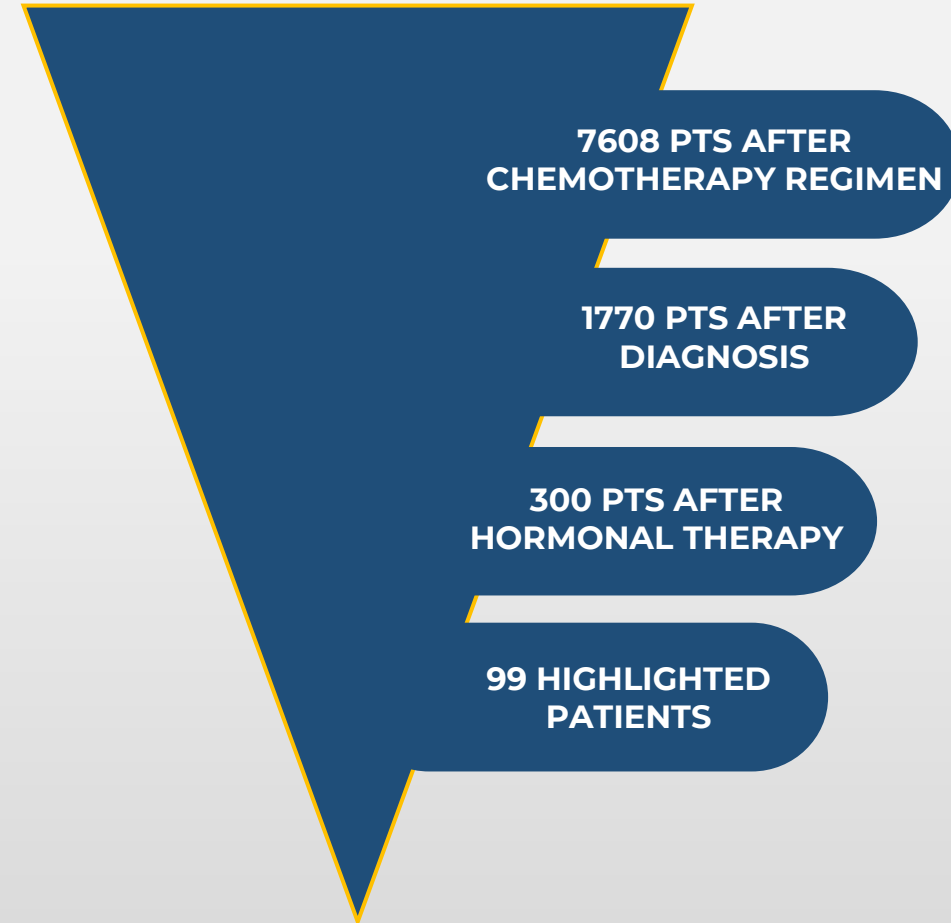
USE CASE: DESIGN OF CLINICAL TRIAL

FOCUS: patient identification and selection criteria

USE CASE

Key Inclusion/Exclusion Criteria

- History of low HER2 expression
- Refractory endocrine therapy (HR+HR – Cohort)
- Has been treated with at least 1 or most 2 prior lines of chemotherapy in current or metastatic setting
- Never previously treated with anti-HER2 therapy (never previously HER2-positive)
- Presence of at least 1 measurable lesion according to m RECIST v1.1
- No history of myocardial infarction in the last 6 months
- No history of interstitial lung disease
- No clinically active central nervous system metastases



Recruitment timeline **2 years / 1 patient selected**

Screening based on AI-tool: **4 weeks**

USE CASE: DESIGN OF CLINICAL TRIAL

FOCUS: patient identification and selection criteria



Temporal Filter

Recent Patients

MISSING NON APPLICABLE TRIPLE NEGATIVE

	ER	PR	Ki67	HER2
	90	5	45	1
	90	90	65	0
	85	80	40	0
12/02/2020	90	90	40	2
12/02/2020	90	30	2	1
30/01/2020	99	70	30	3
28/01/2020	75	65	25	2
24/01/2020	50	50	20	0
13/01/2020	95	40	70	0
09/12/2019	95	55	65	2
03/12/2019	90	1	65	0
28/11/2019	5	30	30	1
09/11/2019	98	50	15	2
31/10/2019			15	
30/10/2019	2	3	40	0
09/10/2019	55	40	40	2
26/09/2019	1	0	25	0
19/09/2019	2	0	60	1
09/09/2019	0	0	20	0
06/09/2019	5	5		
23/08/2019	50	80	40	3
19/08/2019	99	90	15	0
14/08/2019	90	10	25	1

Color-coding

- Patient matchig

Drill-down

- In depth medical report

Histological Sample Origin

BIOPSIA CITOLOGICO FISH IMMUNOISTOCHEMICA

Date	Data Origin	Text Type	Text
04/12/2013	BIOPSIA	NOTE_ESAME	REFERTO AGGIUNTIVO (E6) E-CADERINA:NEGATIVA (COMPATIBILE CON TIPO LOBULARE)
02/02/2017	BIOPSIA	DIAGNOSI	FRUSTOLO AGOBIOPTICO DELLA LUNGHEZZA DI CIRCA CM 2.4 ESTESAMENTE SEDE DI INFILTRAZIONE CARCINOMATOSA AD OPERA DI ELEMENTI DI PICCOLA TAGLIA CON ASPETTO MORFOLOGICO E PATTERN DI CRESCITA NON CONTRASTANTE CON ISTOTIPO LOBULARE (VEDASI NS PRECEDENTI ESAMI N°13-B-27370 E 13-B-27369). GLI ELEMENTI NEOPLASTICI SONO RISULTATI CK7 ED ER POSITIVI. NEGATIVE LE IMMUNOCOLORAZIONI PER MAMMOGLOBINA, GCDFP15, PR ED HER2. FOCAL POSITIVITA PER ANDROGENO RECETTORE. SI RIMANDA AD ESAME N° 2017-P-0155 PER CARATTERIZZAZIONE BIOPATOLOGICA.
12/12/2013	IMMUNOISTOCHEMICA	DIAGNOSI	GIUNGONO N° 1 FETTE IN BIANCO SU COLLA PER DETERMINAZIONI IMMUNISTOCHEMICHE INDICATE IN GESTIONE COLORAZIONI. A, C, D. TESSUTI ESENTI DA LOCALIZZAZIONE NEOPLASTICA. B. MASTOPATIA FIBROSA CON



KEY TAKEAWAYS / DISCUSSION POINTS

- Systemic approach to RWE generation is gaining traction and expanded use
- Cross-competence teams and agile methods are critical success factors
- Co-design clinical research / industry / tech partners