

#### **DDF USDM Workshop – EU Interchange**

Presented by

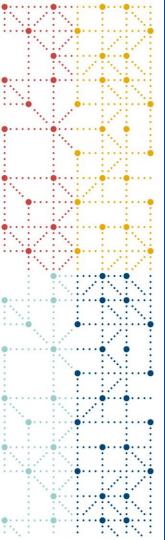
Dave Iberson-Hurst, DDF Technical Product Owner, CDISC Berber Snoeijer, DDF Technical Team Lead, CDISC

23<sup>rd</sup> April 2024

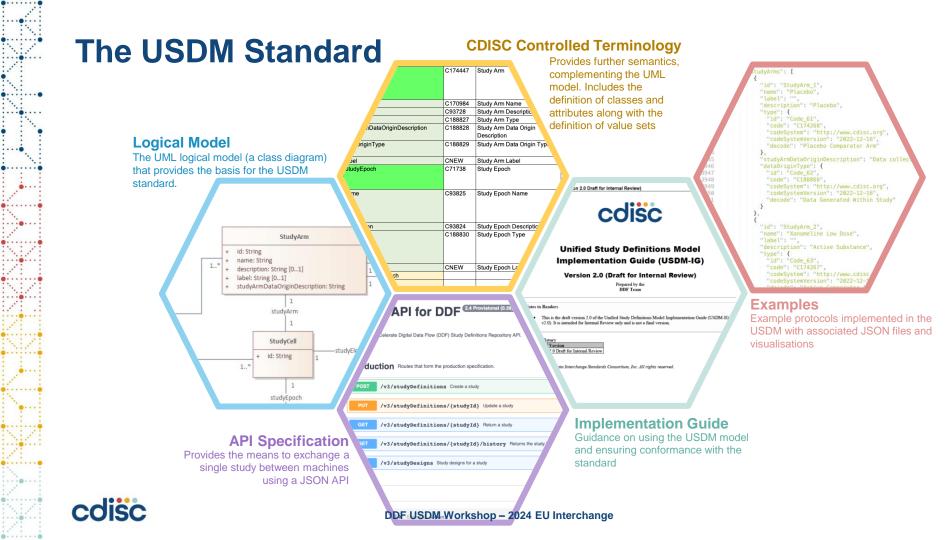
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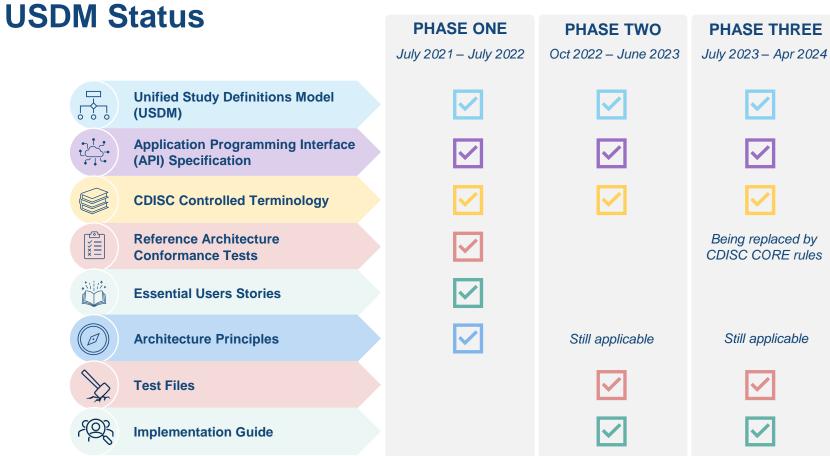
### Agenda

- 1. Introduction
- 2. Overall framework, structured/unstructured content
- 3. Inclusion & Exclusion, Objectives & Endpoints
- 4. Population & Cohorts
- 5. SOA Timelines & Timing
- 6. SOA Biomedical Concepts, Procedures & conditions
- 7. Amendments
- 8. Narrative Content, Protocol document and M11
- 9. Wrap-up



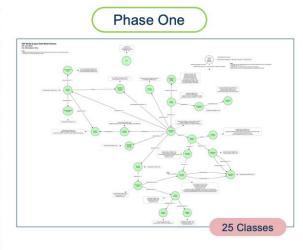
### Introduction

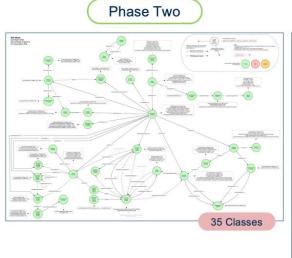


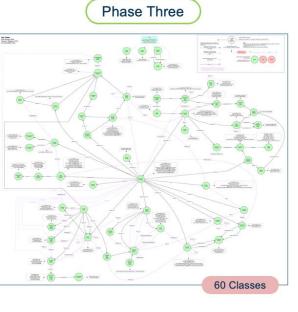


#### DDF USDM Workshop – 2024 EU Interchange

### **CDISC DDF / USDM: Phases One, Two and Three**







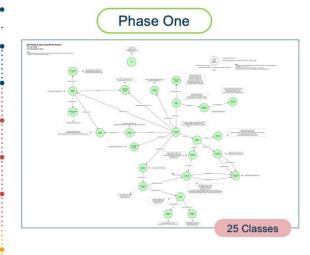
Solid foundation

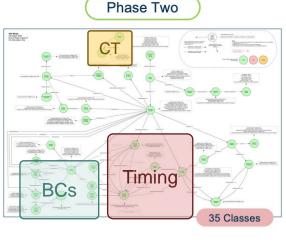
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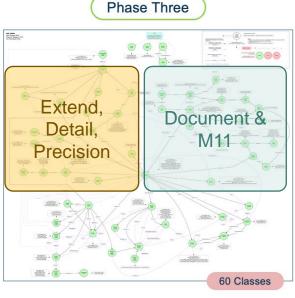
- The protocol document was an external entity into which the structured content could be exported
- Focused on the structured elements of the protocol, e.g. the Schedule of Activities (SoA) & Biomedical Concepts (BCs)
- The protocol document still an external entity
- Now contains structured and unstructured elements
- The entire protocol document can be held within the USDM
- Allows for the protocol document to be generated from the model

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### **CDISC DDF / USDM: Phases One, Two and Three**



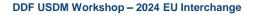




Solid foundation

cdisc

- The protocol document was an external entity into which the structured content could be exported
- Focused on the structured elements of the protocol, e.g. the Schedule of Activities (SoA) & BCs
- The protocol document still an external entity
- Now contains structured and unstructured elements
- The entire protocol document can be held within the USDM
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### Wiki Page

- Make sure you have access
- Base file for the exercises
- We will provide a complete Excel workbook after the workshop
- We will also put the slides used on the wiki

#### Pages / Welcome to CDISC WIKI

#### EU Interchange 2024 Digital Data Flow Workshop

Created by John Owen, last modified on Apr 16, 2024

cdišc	Date	Tuesday 💼 23 Apr 2024
USDM	Time	9am-3pm (CET)
UNIFIED STUDY DEFINITIONS MODEL IDDI/	Sign- up	https://web.cvent.com/event/c19f83a6-23c7-4d42-8115-4d286366f892/websitePage:645d57e4- 75eb-4769-b2c0-f201a0bfc6ce

This will be the first public, in-depth, workshop on the Unified Study Definitions Model (USDM). The workshop will take a deep dive into all aspects of the model and how study protocols and designs can be represented using the USDM.

The day will be organised as a series of focused sessions, with each session covering the theory on an individual aspect of the model (e.g., timing, biomedical concepts, interventions, versioning, links with other standards such as SDTM, ICH M11, Trial Registries), combined with hands-on exercises and discussion.

#### Agenda

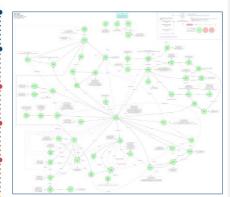
	Time	Agenda Item	Note
08-00:09:00	60 mins	Welcome Coffee	Zoo Foyer (1F)
09:00	15 Mins	Introduction	<ul> <li>Introductions</li> <li>DDF Introduction</li> <li>Aims of the Workshop</li> </ul>
09:15	35 mins	Overall framework     Structured and Unstructured Content     Study, Protocol     Titles	<ul> <li>Theory (10 mins)</li> <li>Exercise (20 mins)</li> <li>Q&amp;A (5 mins)</li> </ul>

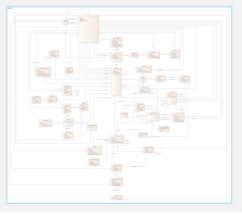
https://wiki.cdisc.org/display/PUB/EU+Interchange+2024+Digital+Data+Flow+Workshop





### **USDM Model Overview**





- Wiki page has
  - The UML diagram (normative)
  - An informative diagram
  - The Controlled Terminology
- Aim of today is to educate as to
  - What the model can do
  - What it cannot do
  - How it works, what goes where

Controlled Terms	Study, Identifiers, Amendments
Estimands	Unstructured Content
Populations Inclusion & Exclusion	Study Designs, Arms, Epochs
Interventions & Indications Objectives & Endpoints	Detailed Study Logic, Encounters
Procedures, B	iomedical Concepts



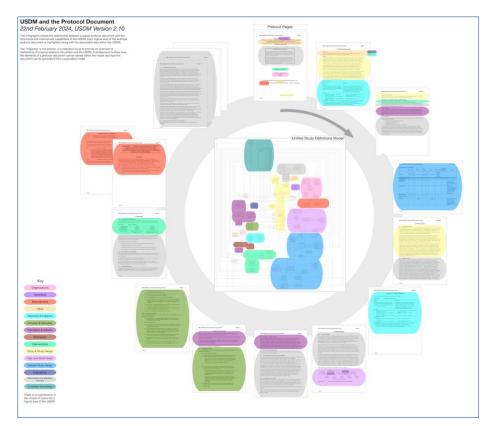


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### USDM and the Protocol

- Download the infographic from the wiki
- You can zoom in to see the detail
- Gives an overview of how a protocol is structured within the USDM
- How the USDM can support generation of a complete protocol

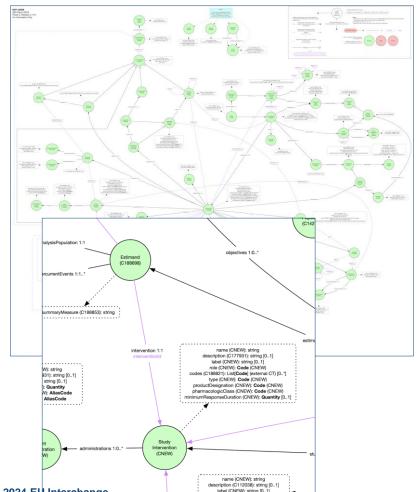




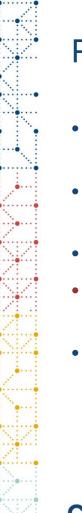


### The API and JSON

- Informative Diagram available on the wiki
- JSON is a serialization of the model content
- Holds a single version of a study
- Need to not duplicate information so JSON includes references
- These are shown in the informative diagram
- Sometimes useful to see differences in the JSON when adding or removing content







# Protocol

- Using protocol from Alexion as the basis of the workshop
- Used to help in answering the question "how do I put a protocol into USDM?"
- File is on the wiki
- Use of this protocol is not a reflection of this protocol or of Alexion
- The protocol was one of several chosen from CT.gov because of features within the protocol and study design

Protocol Amendment 3.1 (US) 18 Mar 2022 ALXN1840-WD-204 NCT #: NCT04573309

#### TITLE PAGE

#### Protocol Title:

A Phase 2, Open-label Study to Assess Copper and Molybdenum Balance in Participants with Wilson Disease Treated with ALXN1840

Protocol Number: ALXN1840-WD-204

Amendment Number: 3.1 (US)

Compound: ALXN1840 (bis-choline tetrathiomolybdate)

Study Phase: 2

Short Title: Copper and Molybdenum Balance in Participants with Wilson Disease Treated with ALXN1840

Sponsor Name: Alexion Pharmaceuticals, Inc.

Legal Registered Address:

121 Seaport Boulevard Boston, MA 02210 USA

#### Regulatory Agency Identifier Number(s)

EudraCT: 2020-001104-41

IND: 119006

#### Approval Date:

Original Protocol	12 May 2020	
Amendment 1	18 Aug 2020	
Amendment 2	19 Mar 2021	
Amendment 3	31 Aug 2021	
Amendment 3.1 (US)	18 Mar 2022	

	Date
Medical Monitor Name and Con	tact Information can be found in the Study Contact

Alexion Confidential



### Check We Can Work

- Simple exercise to check everybody can do the remaining exercises
- Steps
  - Take base example and rename the file to something unique to you
  - Upload your renamed file to the online tool
  - Examine the outputs
  - Have a look at the Excel sheet
  - Have a look at the Excel infographic
- There is a readme at <u>https://github.com/cdisc-org/usdm</u>



USDM Excel to JSON Utility status	Ð
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The Excel tool is a TEST TOOL.

We should **NEVER** use it for production work or protocol writing!



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### Overall framework Titles & Identifiers

### **Study and Protocol**

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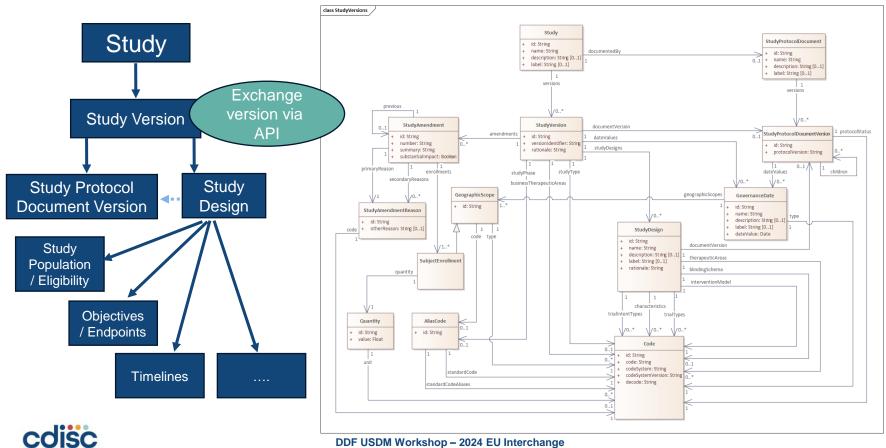
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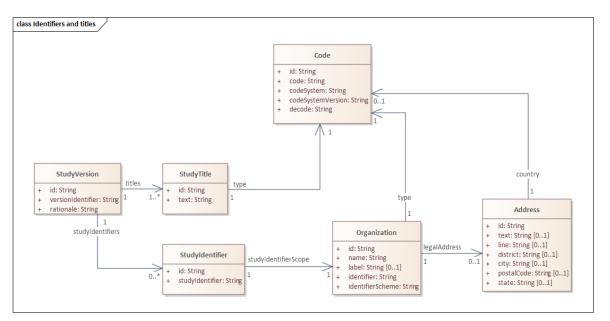


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### **Titles and Identifiers**

- Title Types

   Brief Study Title
   Official Study Title
   Public Study Title
   Scientific Study Title
   Study Acronym
- Identifier Organization types
  - Clinical Study Sponsor (1 required!!)
  - Clinical Study Registry
  - Regulatory Agency
  - Research Organization





#### Exercise

- Add in the brief and official titles
  - Edit the "study" sheet
- Add in the EUDRACT and IND identifiers
  - Edit the "studyldentifiers" sheet
  - The organization "type" column is coded

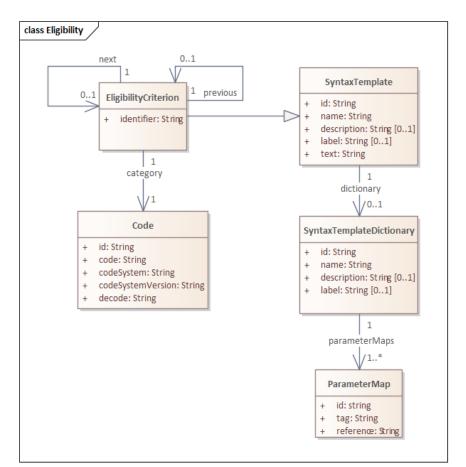
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### Inclusion & Exclusion Objectives & Endpoints

### **Inclusion / Exclusion**

- Model Class EligibilityCriterion
- Inherits from SyntaxTemplate class
  - Includes references to structured elements stored elsewhere in the data model like:
    - Population characteristics
    - Activities
    - •
  - Structured elements in dictionary can be reused across the study design
- Categories
  - SDTM terminology C66797
    - INCLUSION
    - EXCLUSION





### **Inclusion / Exclusion**

Tag elements in text of criteria
 <usdm:tag name="parametername"/>

#### 5.1. Inclusion Criteria

#### Age

1. Participants aged  $\geq$ 18 at the time of signing the ICF.

Type of Participants and Disease Characteristics

- Diagnosis of WD by Leipzig Criteria ≥ 4 documented by testing as outlined in the 2012 European Association for the Study of Liver WD Clinical Practice Guidelines (Ferenci, 2003; EASL, 2012) or by historical test results for WD including some or all of the following:
  - Presence of Kayser Fleischer rings,

category	Bidentifier	name	description	label	text	dictionary
Inclusion	01	Age Criteria	The study age criterion		Participants agest <usdm:tag name="min_age"></usdm:tag> the time of signing ICF	IE_Dict
Inclusion	02	Indication Criteria	The study indication criterion		Diagnosis of Susdm:tag name="indic_label"/> Deleipzig Criteria ≥ 4 documented by testing as outlined if the 2012 European Association for the Study of Liver WD Clinical Practice Guidelines (Ferenci, 2003; EASL, 2012) or	IE_Dict
Exclusion	01	Contra Indication 1	Study contra indication 1		Decompensated cirrhosis or model for end-stage liver disease (MELD) score > susdm:tag name="meld_max"/>	IE_Dict

#### Define elements in dictionary

	A	В	C		D		E	F	G	Н
1	name	description	label	key 🖌			lass	xref	attribute	value
2	IE_Dict	Dictionary for IE	IE Dictionary	min_age	e	S	StudyDesignPopulation	POP1	plannedAge	
3				max_ag	ge 🚩	S	StudyDesignPopulation	POP1	plannedAge	
4				indic_la	bel		ndication	IND1	label	
5	Settings_Dict	Dictionary for value settings	Settings Dictionary	Demo_l	label	A	Activity	Demographics	label	
6				meld_m	nax 🚩					13

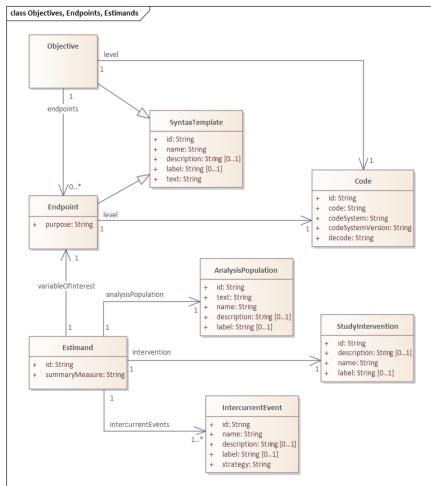
Example spreadsheet: dictionaries



# **Objectives & Endpoints**

- Model classes
  - $\circ$  Objective
  - o Endpoint
- Inherit from SyntaxTemplate
  - Use tagging and dictionaries like for Eligibility criteria
- Levels
  - Objectives C188725
    - Primary Objective
    - Secondary Objective
    - Exploratory Objective
  - o Endpoints C188726
    - Primary Endpoint
    - Secondary Endpoint
    - Exploratory Endpoint
- (Primary) endpoint can be referred to from Estimand class





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#### Exercise

#### Add in an inclusion criteria

- Edit the "studyDesignEligibilityCriteria" sheet
- "category" column is coded
- Can choose to use the dictionary sheet
- Add in an objective and associated endpoint
  - Edit the "studyDesignOE" sheet
  - "objectiveLevel" column is coded
  - "endpointLevel" column is coded
  - Can choose to use "dictionary" sheet

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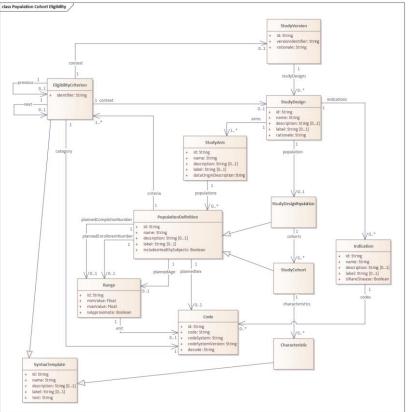
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### **Population & Cohorts**

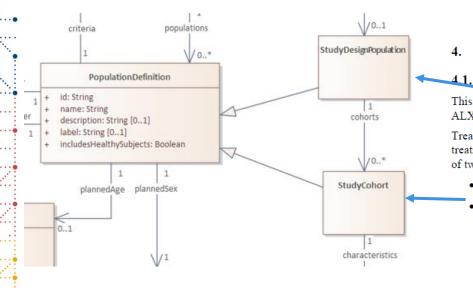
### **Population & Cohorts**

- One Study Design Population!
- May be divided into multiple cohorts
  - StudyDesignPopulation class refers to zero to many StudyCohorts
- Both inherit from PopulationDefinition class
  - Attributes plannedAge, plannedSex need to be filled either at study population or cohort level
- Utilizes Range class
  - plannedAge, plannedEnrollmentNumer, plannedCompletionNumber
- Sex: SDTM CT: C66732
- Additional study Cohort characteristics may be defined
  - Characteristic class inherits syntax templates





#### **Population & Cohorts**



#### STUDY DESIGN

#### **Overall Design**

This study will be conducted as an open-label, repeat-dose study to evaluate the effects of ALXN1840 on copper balance in participants with WD.

Treatment-experienced (which includes standard of care therapies or ALXN1840) and treatment-naïve participants are eligible for this study. Eligible patients will be classified into one of two cohorts:

- Cohort 1 (treatment experienced): Patients who have received WD therapy for > 28 days
- Cohort 2 (treatment naïve): Patients who have received WD therapy for  $\leq$  28 days

•		Α	В	С	D	E	F	G	Н	I
	1	level	name	description	label	plannedCompletionNumber	plannedEnrollmentNumber	plannedAge	plannedSexOfParticipants	includes Healthy Subjects
	2	Main	POP1	Patients with WD		10		18 99 years	BOTH	Ν
•	3	Cohort	COHORT1							Ν
. :	4	Cohort	COHORT2							Ν

#### Example spreadsheet: studyDesignPopulations



## Exercise

#### • Add in the cohort definitions

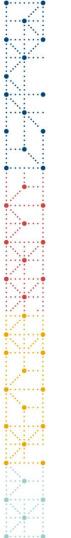
- Edit the "studyDesignPopulations" sheet
- "plannedSexOfParticipants" column is coded
- You will need to consider the "studyDesignCharacteristics" sheet

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### SOA 1 – Timelines and Timing

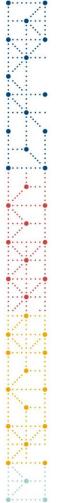


#### **Timeline**

Time



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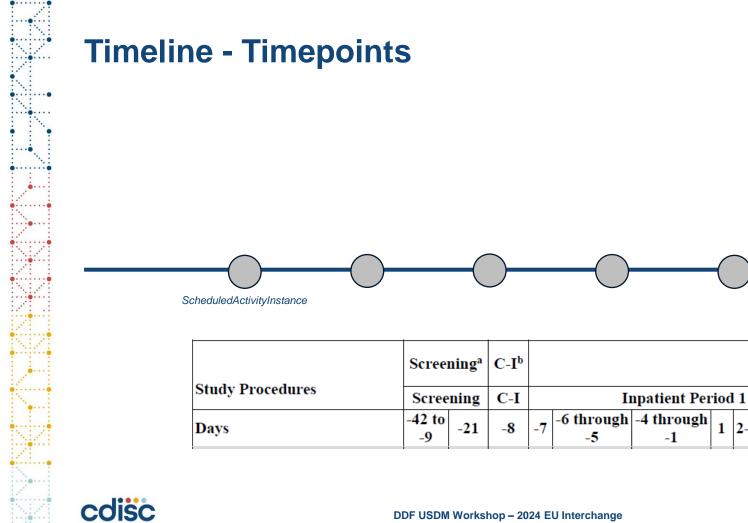
#### **Timeline - SoA**

Time

#### Small excerpt from protocol, for purposes of explanation

	Screening <sup>a</sup>		C-I <sup>b</sup>								
Study Procedures	Scree	ning	C-I		Iı	npatient Per	'ioc	11			
Days	-42 to -9	-21	-8	-7	-6 through -5	-4 through -1	1	2-3	4-7	8	9



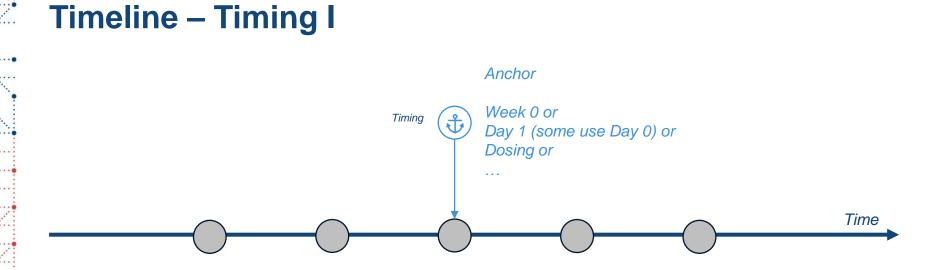


Time

1 2-3 4-7

-1

8 9



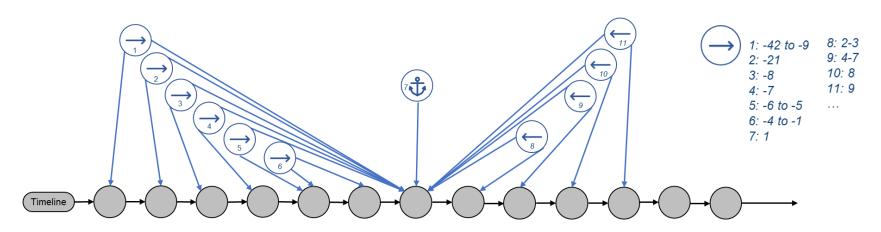
	Screening					or	r				
Study Procedures	Screening		C-I	Inpatient Period 1							
Days	-42 to -9	-21	-8	-7	-6 through -5	-4 through -1	1	2-3	4-7	8	9



#### **Timeline – Timing 2** The {from node} is before the [to node] The {from node} is Anchor **Relative** after the [to node] ← Screening is Week 0 or Ĵ. -42 to -9 days Day 1 (some use Day 0) or Before Dosing Day 1 . . . from to Time Relative C-Ib Screening<sup>a</sup> Anchor Study Procedures Screening C-I Inpatient Period 1 -6 through -4 through -42 to -7 -21 -8 2-3 4-7 8 Days 1 9 -9 -5 -1

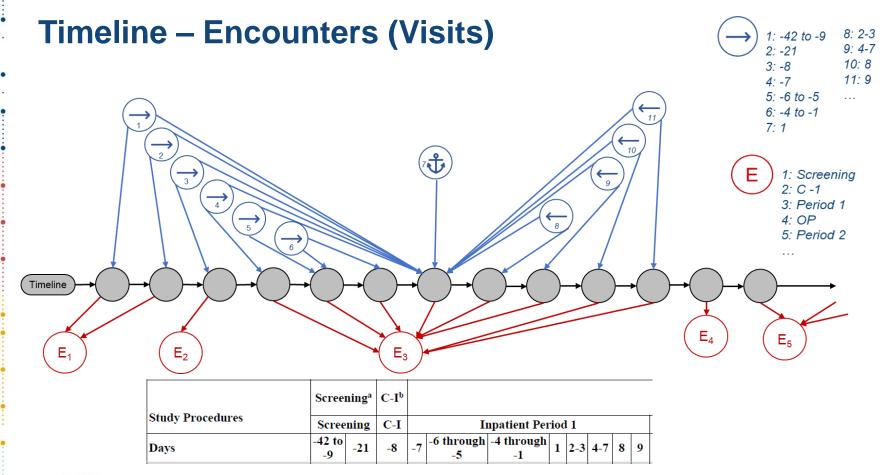


#### **Timeline – Timing 3**



	Screening <sup>a</sup>		C-I <sup>b</sup>								
Study Procedures	Scree	ning	C-I		Iı	npatient Per	'iod	1			
Days	-42 to -9	-21	-8	-7	-6 through -5	-4 through -1	1	2-3	4-7	8	9







**Timelines and Timing vs SOA** 

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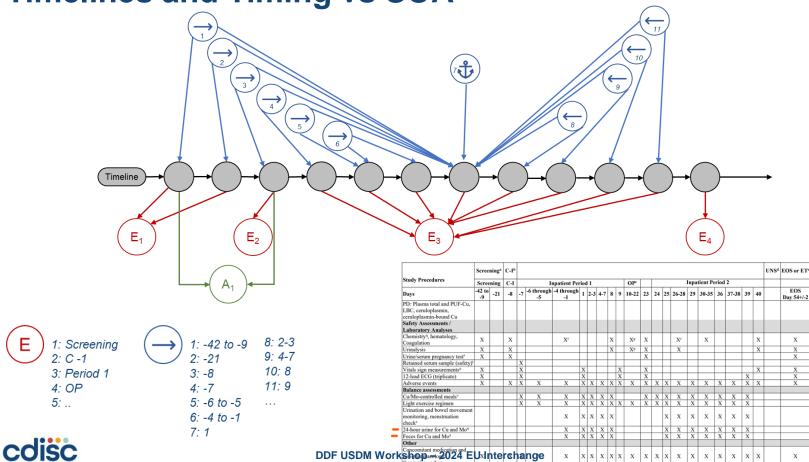
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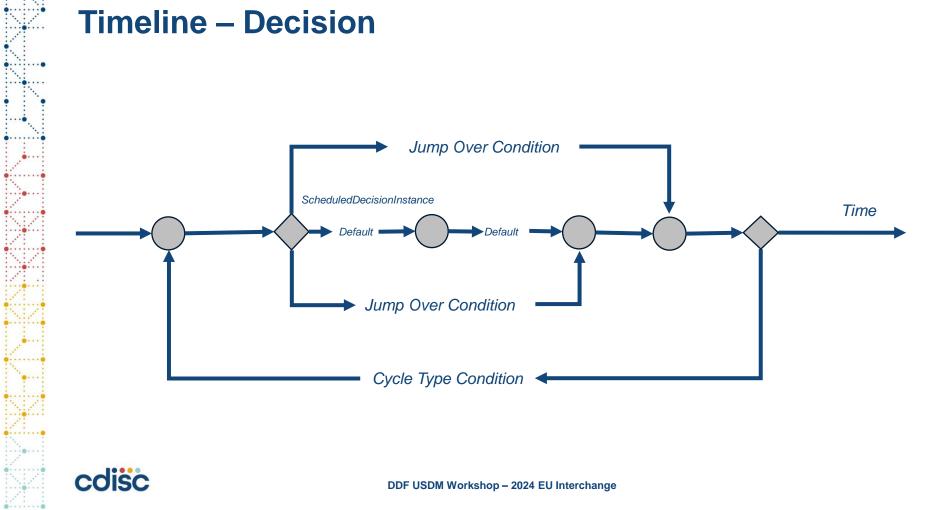
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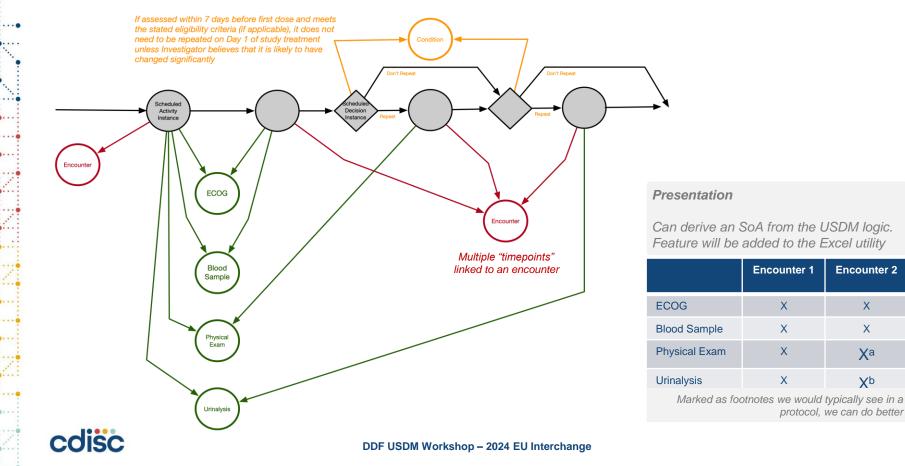
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therapy/procedure



### **Timelines – Repeat conditions**



#### **Sub-timeline**

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Timeline

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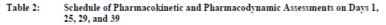
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Exit

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Time point (hours) <sup>a</sup>	-0.5	0	1	2	3	4	5	6	8	12	24
Blood sampling for PK: Plasma total Mo and PUF-Mo PD: Plasma total and PUF-Cu, LBC, ceruloplasmin, ceruloplasmin-bound Cu	x			x		x	x	x	x	x	X <sup>b</sup>

Note: Windows for PK/PD time points will be defined as ±10% of the nominal time point. On Days 1 and 39, triplicate 12-lead ECG will be collected at 4 hours postdose. When multiple procedures are scheduled to occur at the same time, the following order of events should be strictly adhered to whenever possible: ECG, vital signs, blood sampling (eg, for PK/PD), study intervention administration, and meal.

\* Time points are relative to dosing (0 hours).

Exit

<sup>b</sup> Hour 24 PK/PD sampling is to occur just prior to the next-day dose of ALXN1840.

Abbreviations: Cu = copper; LBC = labile bound copper; Mo = molybdenum; PD = pharmacodynamic; PK = pharmacokinetic; PUF = plasma ultrafiltrate.



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Timeline

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## **Timing - UML**

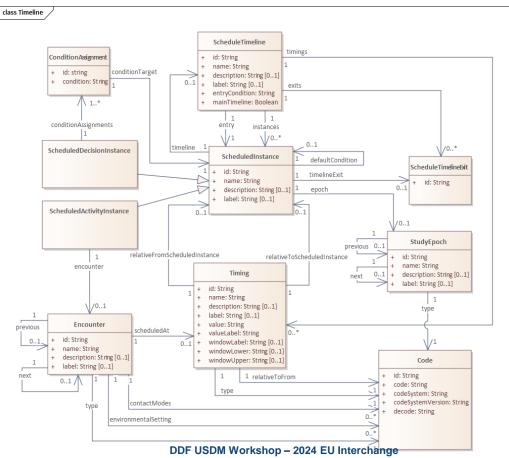
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#### • Add in PK / PD profile as a timeline

- Add a new sheet "pkPdTimeline" sheet
- Timings are in the "studyDesignTiming" sheet

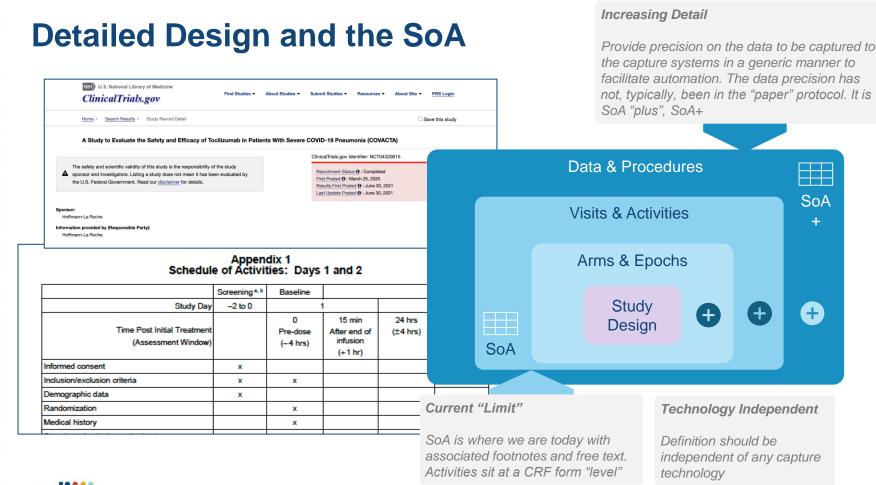
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### SOA 2 – Biomedical Concepts Procedures & Conditions



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#### **Biomedical Concepts – Timeline**

Vital signs/Temperature

#### 3.9.3.4.1 Vital Sign Determination

Patient should lie supine quietly for at least 5 minutes prior to vital signs measurement. Blood pressure should be measured in the dominant arm with a standardized mercury manometer according to the American Heart Association standard recommendations. Diastolic blood pressure will be measured as the point of disappearance of the Korotkoff

Xanomeline (LY246708) H2Q-MC-LZZT(c) Clinical Study Protocol Copyright © 2006 Eli Lilly and Company Document Page 34

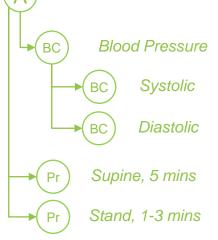
sounds (phase V). Heart rate will be measured by auscultation. Patient should then stand up. Blood pressure should again be measured in the dominant arm and heart rate should be measured after approximately 1 and 3 minutes.

An automated blood pressure cuff may be used in place of a mercury manometer if it is regularly (at least monthly) standardized against a mercury manometer.



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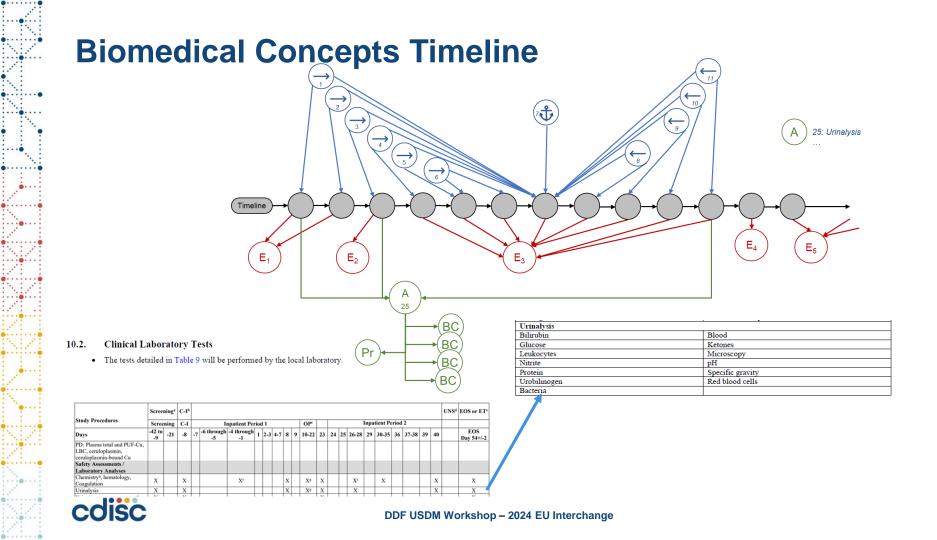
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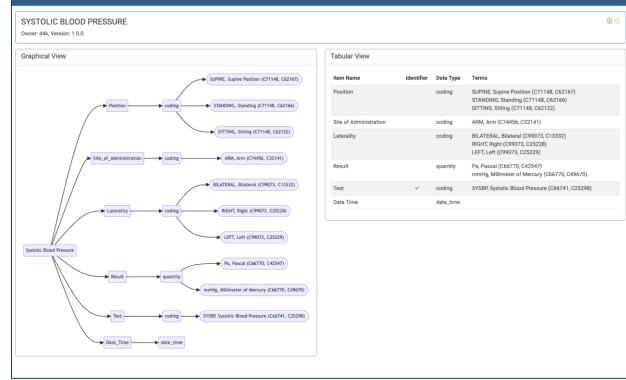
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## **CDISC Library & Biomedical Concepts**

#### d4k BC Browser BCS STATUS



#### **Excel - Some Restrictions**

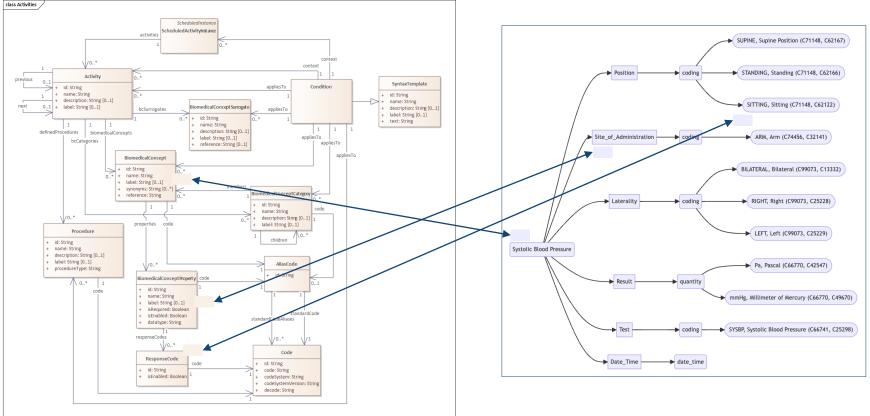
- 1. Update to allow for full definition from CDISC Library to be deployed
- 2. Not handling BC categories yet. Only recently exposed by the CDISC Library API, need to catch up



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### **Biomedical Concept – UML**





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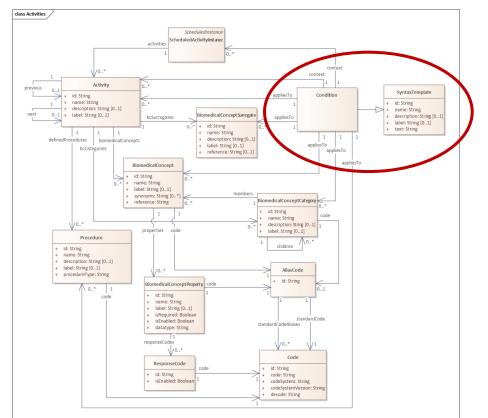
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#### **Conditional footnotes**

- 1. Define on what level they are conditional/optional? appliesTo
  - Activity
  - Procedure
  - BiomedicalConcept
  - BiomedicalConceptSurrogate
  - BiomedicalConceptCategory
- 2. Define the context, for example:
  - BCs within a specific Activity
  - BCs within a specific at a specific timing: ScheduledActivityInstance
- 3. Condition text can be presented as footnote by implementation





### **Conditional Footnotes**

Study Administration

Medical history/demographics<sup>i</sup>

an operation as many to be a clear

WD history<sup>j</sup>

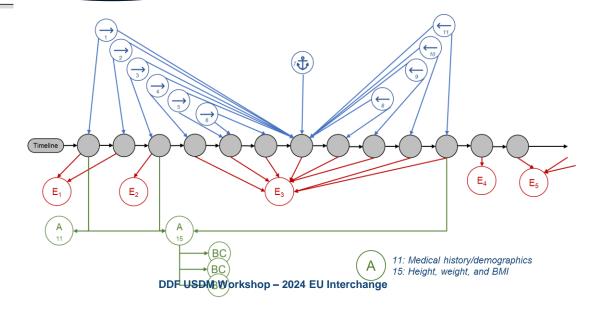
Prior WD treatment<sup>j</sup>

Physical examination<sup>k</sup>

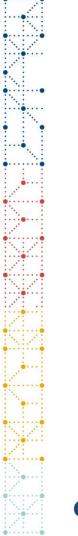
Height<sup>1</sup>, weight, and BMI

- <sup>i</sup> Parameters include age and sex. Race and ethnicity will be collected where permitted by local regulations.
- <sup>j</sup> Wilson disease history will include diagnosis date, method of diagnosis, history of cirrhosis, details of any previous liver biopsies performed, and treatment received.
- <sup>k</sup> A full physical examination will be performed at Screening, at check-in for the study, and at the End of the study/Early Termination Visit. A physical examination should also be performed on any participants with ongoing adverse events prior to discharge from the unit. Otherwise, a symptom-driven physical <u>examination may be performed at other times</u>, at the Principal Investigator's discretion.

Height at screening only.







- Add in a condition
  - Edit the "studyDesignConditions" sheet
  - Footnotes c, d or h make for good examples

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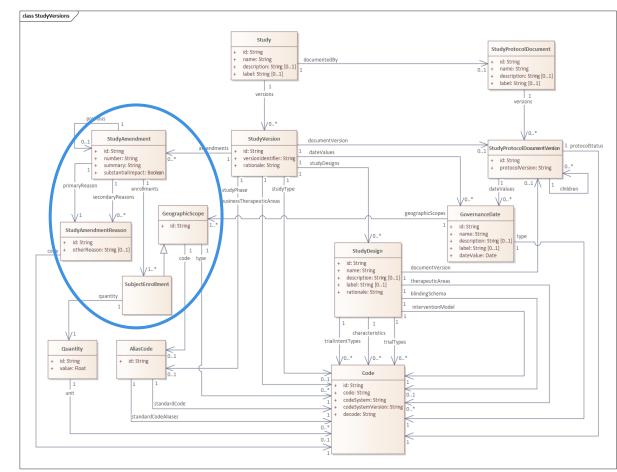


### Amendments

## Amendments

- Summary
- Substantial impact?
- Reason (primary/secondary)
  - Regulatory agency request to amend
  - New regulatory guidance
  - IRB/IEC feedback
  - New Safety Information available
  - 0 ....
- Enrollment % or N at time of amendment
   Geographic scope





### Amendments

#### Approval Date:

Original Protocol	12 May 2020
Amendment 1	18 Aug 2020 Previous
Amendment 2	19 Mar 2021
Amendment 3	31 Aug 2021
Amendment 3.1 (US)	18 Mar 2022 Previous

#### Amendment 2 (19 Mar 2021)

This amendment was considered to be substantial based on the criteria set forth in Article 10(a) of Directive 2001/20/EC of the European Partiament and the Council of the European Union.

#### **Overall Rationale for the Amendment**

The main reason for preparation of this amendment was to revise the exclusion criterion for a urine drug screen. Changes implemented via Administrative Letter 1 and Administrative Letter 2, as well as COVID vaccination guidance, have also been incorporated.

#### **Changes to the Protocol**

Section # and Name	Description of Change	Brief Rationale and/or Clarifications
Section 1.1, Synopsis;	The number of participants	Clarification of sample size.
Section 9.2, Sample Size	changed from "up to 10" to	-
Determination	"approximately 10".	
Section 1.1, Synopsis;	SMS text messaging will replace	Site processes does not allow
Section 1.2, Schema;	the dosing diary as the method of	use of paper diary.
Section 1.3, Schedule of	confirming treatment compliance	
Activities; Section 4.1,	during the outpatient period.	
Overall Design;	-	
Section 6.4, Study		

#### PROTOCOL AMENDMENT SUMMARY OF CHANGES TABLE

#### Amendment 3.1 (US), 18 Mar 2022

This amendment is considered to be substantial based on the criteria set forth in Article 10(a) of Directive 2001/20/EC of the European Parliament and the Council of the European Union, the US Food and Drug Administration's (FDA) regulation at 21 CFR part 312.30(b), and any applicable local regulations.

#### **Overall Rationale for the Amendment**

The main reason for preparation of this amendment was to clarify study procedures occurring across different sites in the US, so as to facilitate participant recruitment across different regions of the US, and to lessen inconvenience for participants without compromising the quality of the study.

#### **Changes to the Protocol**

Section # and Name	Description of Change	Brief Rationale and/or Clarifications
Section 1.3 Schedule of Activities (SoA), Table 1	Addition of text to the footnote to state that procedures specific to screening sites (only in the US) detailed in Section 8	As per Section 8 (below).
4.2 Scientific Rationale for Study Design	<ul> <li>Number of days changed from 30 days to 21 days in the following sentence:</li> <li>However, the physiologic turnover of human gastrointestinal epithelial cells is 3 - 5 days (Darwich, 2014); therefore, the inhibitory effect of zinc on intestinal copper absorption is expected to be minimal 30 21 days after discontinuation of zinc.</li> </ul>	To align the number of days with the mention of zinc discontinuation elsewhere in the protocol.
Section 8 Study Assessments and Procedures	Addition of text applicable only to the US that details the possibility for sites in the US to only perform screening procedures and not any of the remaining study procedures.	To facilitate participant recruitment across different regions of the US and to lessen inconvenience for participants without compromising the quality of the study.





#### Add in amendment two

- Edit the "studyAmendments" sheet
- The columns "primaryReason" and "secondaryReason" are coded
- The column "enrollment" has a particular format, either global, region or country with % or persons
  - "Global: 65%"
  - "Region: Europe=15"
  - "Country: USA=20%"
  - Use "Global: 0"

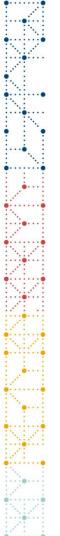
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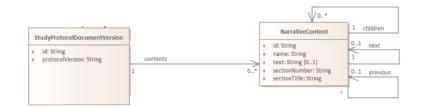


### Narrative content Protocol document and M11



### **Narrative content**

- 1 class linked to the study Protocol Document Version
- Stores protocol HTML formatted text pieces identified by
  - $\circ$  Name
  - $\circ$  SectionNumber
  - $\circ$  SectionTitle
- Can link to structured elements stored elsewhere in the USDM
- Ordering by next/previous attributes
- Sub-sectioning by children attribute



XHTML Attributes (see Implementation Guide)

<usdm:ref klass="klassName" id="idValue" attribute="attributeName"/>'

where

- klassName is the name of the class that holds the referenced data element.
- idValue is the id value of the referenced data element within klassName.
- attributeName is the attribute name of the referenced data element within klassName.

Further details of the use of these references can be found in Sections 4.20, Unstructured Content, and 4.21, Syntax Template.



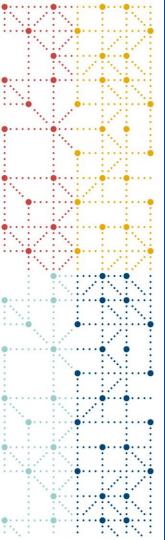


- Update the amendment info for Amendment 1 on the front sheet of the USDM protocol
  - Edit the "studyDesignContent" sheet, row
  - The original document information is already in the right form

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# Wrap Up