

January 2018



- Problem with current system
- What pcornet is
- What pcornet is becoming



# Our national clinical research system is broken

We are not generating the evidence we need to answer the health questions that matter most to patients and their doctors.

- High percentage of decisions are not supported by evidence
- Health outcomes and disparities are not improving
- Medicines and medical care are too expensive
- Current clinical research system is not working well



# Our national clinical research system is broken





people











# Why clinical trials fail

- Safety expected, partly due to inadequate models
- Efficacy expected, partly due to inadequate model
- Design trial design does not take into account key facts, variables
- Power a key design problem. Too many under powered studies
- Funding/staff run out of money or key staff depart
- Failure to accrue unable to get enough research volunteers



#### Sad data

- About 5% of all trials terminate without producing data.
- Biggest single cause is low or insufficient accrual (35-40%).
- Failed trials due to failed accrual means
  - No data
  - Lost investment
  - Failure to be true to promise to participants
- Very little data on recruitment methods. Most is hypothetical
- What would be the economic, ethical, scientific, and health impacts of increasing accrual rates?



# Participant engagement: Dire need for evidence

- Most "data" about participant engagement in research is hypothetical.
- Empirical evidence is from small, underpowered studies, usually in specific populations with specific interventions.
- Lot's of attention on patient/participant engagement. Need action
- Cochrane study shows insufficient evidence to show that limited tested methods work.



# Our national clinical research system is broken





people











# PCORI set out to help improve research enterprise



What if we could have at our fingertips trustworthy, high-quality data from health systems, people and partnerships to bring people the real-world answers they seek?



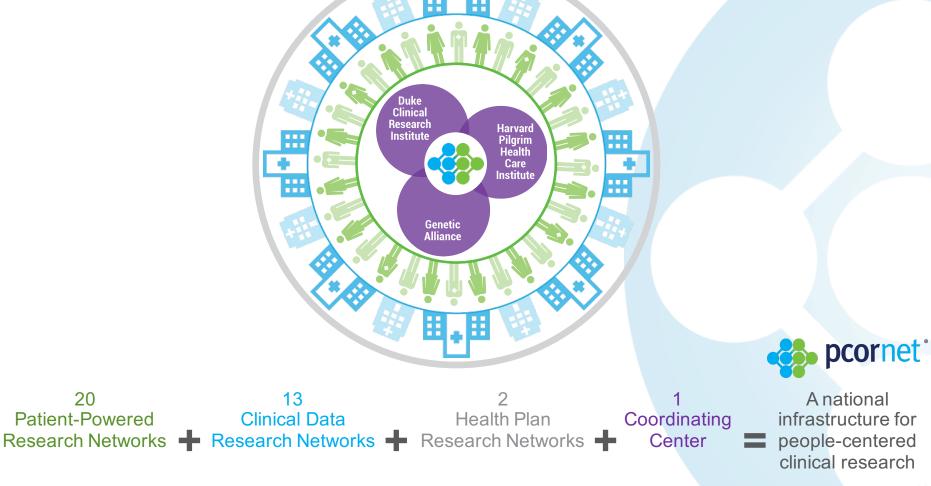
What if we could decrease the time it takes to get clinical insights?



What if we could achieve significant cost savings over a traditional clinical study?



#### PCORnet® is a "network of networks"



# national research system with unparalleled scale and capacity

139 healthcare organizations; 104 participate in data network

128 million people's data in the data network; 65 million eligible for clinical trials

All health conditions (100,000+ ICD10 codes; 300,000+ SNOMED codes)

All healthcare specialties and sub-specialties

All service settings



# What makes PCORnet special?

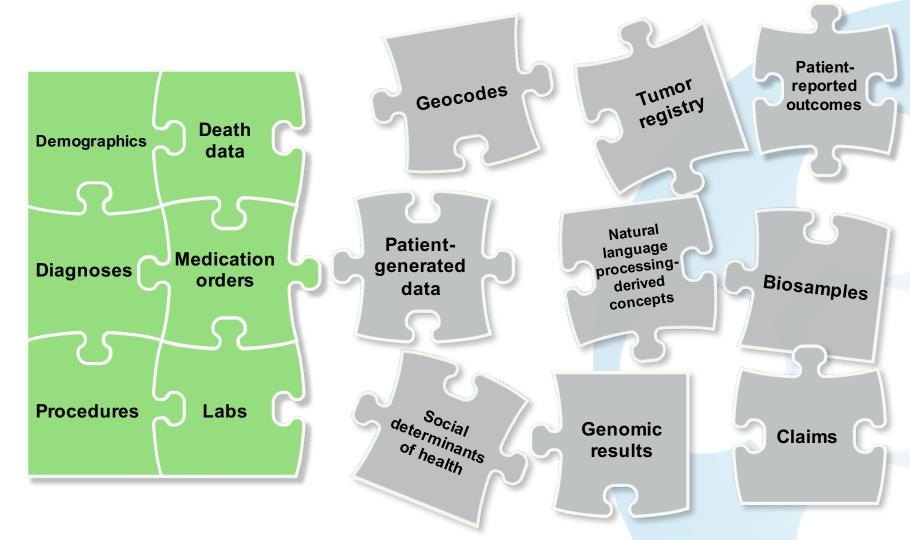
Data

Trial infrastructure and readiness

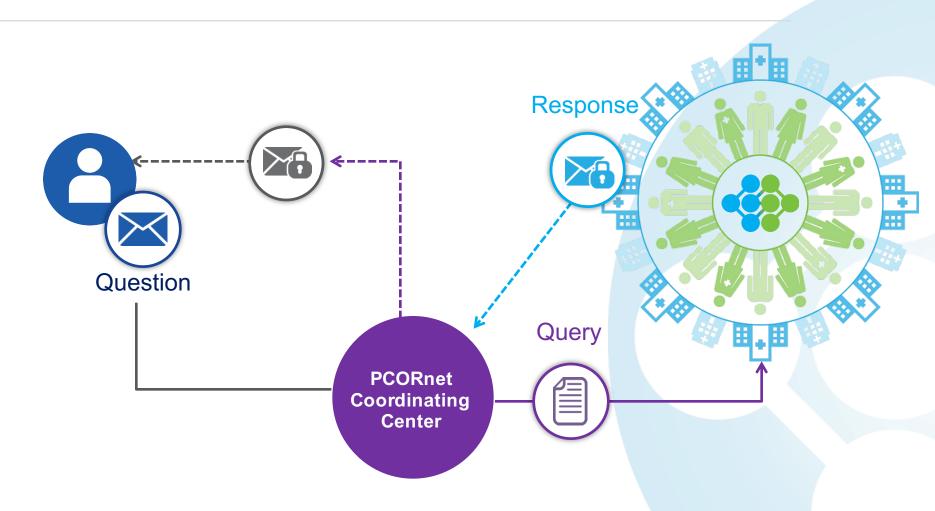
People-centeredness



#### The PCORnet Common Data Model



# Data queries in the PCORnet® distributed research network



# **Example of Data Network Request**

- prep-to-research queries to assess the number of patients aged 65 years and older with:
  - a diagnosis of Parkinson's in a set time period (58,408 identified)
  - a diagnosis of Parkinson's in a set time period AND a diagnosis of any fracture within a year following the index date (5,193 identified)
  - a diagnosis of Parkinson's in a set time period AND a diagnosis of a hip fracture within a year following the index date (1,205 identified) Results were provided in aggregate and by Network Partner
  - 50 network partners responded



# **Testing PCORnet functionality**

14 PCORI-funded PCORnet demonstration studies are answering critical research questions while also testing the infrastructure and key functional aspects of PCORnet.

- Interventional studies
- Observational studies
- Health systems studies



#### **Interventional Clinical Trials**

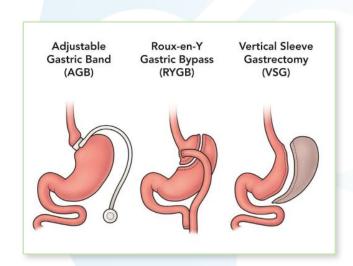
- ADAPTABLE: optimal dose of aspirin (325 vs 81mg) enrolling >500/month
- COMBINE: biologics +/- methotrexate in pediatric Crohn's disease
- RELIANCE: RofLumilast or Azithromycin to prevent COPD Exacerbations
- INVESTED: INfluenza Vaccine to Effectively Stop Cardio-Thoracic Events and Decompensated Heart Failure
- Healthy Mind Healthy You: online mindfulness-based treatment ("standard", 8 sessions v "light", 3 sessions)



### **Observational Study: Bariatric**

- Aim: to provide accurate estimates of 1-, 3-, and 5-year benefits and risks of three main surgical treatment options for severe obesity
  - Adjustable gastric banding (AGB)
  - Roux-en-y gastric bypass (RYGB)
  - Sleeve gastrectomy (SG)

# Participating Clinical Data Research Networks	11
# Participating institutions	55
# Patients	65,088 (64,184 adults; 904 adolescents)



# **Sustainability**



PCORI was authorized and funded in the ACA through FY2019.



PCORnet was envisioned to be selfsustaining beyond POCRI funding



PCRF was created to lead PCORnet to the next stage



# People-Centered RESEARCH FOUNDATION

# PCRF's inaugural board

- CHAIR: Robert Califf, former FDA Commissioner, now at Duke University and Verily
- Richard Bankowitz, executive vice president, Clinical Affairs, America's Health Insurance Plans
- Josephine P. Briggs, director emeritus, National Center for Complementary and Integrative Health
- Marc M. Boutin, chief executive officer, National Health Council
- Donna Cryer, president & CEO of the Global Liver Institute
- Craig Lipset, head of clinical innovation, Global Product Development,
   Pfizer
- Joanne Waldstreicher, chief medical officer, Johnson & Johnson
- Reed Tuckson, managing director of Tuckson Health Connections



# **Under Construction: Reshaping and Focusing the Network**

