Creation and Implementation of Automated Report Sections for Streamlined IND Annual Reports





Brooke Ostrander, MS, CCRP; Isaac Nzuki, MS; Nancy Karanja-Meek; Kelly Mulvaney

The University of Kansas Cancer Center

Background

- The Investigator Initiated Trials (IIT)
 Regulatory Team is responsible for
 writing and submitting the FDA IND
 Annual reports for each IND-held study
 at The University of Kansas Cancer
 Center.
- All Adverse Events (AE) data for clinical trial participants at the University of Kansas Cancer Center are housed in our Clinical Trials Management System (CTMS).
- The simplification of these raw data for the IND report was tedious and timeconsuming, attributable to the need to manually go through all AEs experienced since study activation.

Goals

 To alleviate manually preparing the data for the annual reports, the goal was to automate the creation of AE reports for the allotted sections.

Solutions and Methods

To automate report generation, we used Microsoft Azure Data Studio to create SQL queries that transformed, filtered, and aggregated raw data (*Image 1*) from our CTMS into a report. We partitioned the data by patient study ID and AE, then ordered it by Grade (descending) and AE Start Date (descending). This ensured the latest and highest-grade AE for each participant was selected. The query filtered out baseline events not included in the report.

PAT_STUD TX_NAME GRADE	ADVERSE_	START_DT	END_DT	RELATION A	E_ID	ACTION	AE_DISCO	AE_LOGGE	AE_RECOV	OUTCOME	DRUG1	ATTRIBUT	TIACTION_E	DRUG2	ATTRIBUT	EXPECTEDNES
147815-10 Alpelisib:	2 Cataract	#######	9/25/2024	Attribution	61425	Medical/S	urgical Int	#######	Recovered	Left catara	Alpelisib	Not Relat	te None	Sacituzum	Not Relat	Expected
147815-10 Alpelisib:	1 Weight los	6/2/2022		Attribution	62372	None		#######	Ongoing a	t end of st	Alpelisib	Possibly	P None	Sacituzum	Possibly	P Expected
147815-10 Alpelisib:	2 Back pain	1/2/2025		Attribution	63945	Counterac	tive Medic	#######	Ongoing a	new bone	Alpelisib	Not Relat	te None	Sacituzum	Not Relat	Expected
147815-10 Alpelisib:	2 Mucositis	4/25/2022	5/4/2022	Attribution	46255	Counterac	tive Medic	#######	Recovered	/ resolved	Alpelisib	Possibly	P None	sacituzum	Possibly	P Expected
147815-10 Alpelisib:	2 Diarrhea	4/23/2022	4/27/2022	Attribution	46256	Treatment	Delay / Ho	#######	Other	Grade Cha	Alpelisib	Possibly	P Treatmen	tsacituzum	Possibly	F Expected
147815-10 Alpelisib:	1 Diarrhea	4/28/2022	5/4/2022	Attribution	46257	Counterac	tive Medic	#######	Recovered	/ resolved	Alpelisib	Possibly	P None	sacituzum	Possibly	P Expected
147815-10 Alpelisib:	1 Neutrophi	4/28/2022	5/4/2022	Attribution	46258	Counterac	tive Medic	#######	Recovered	/ resolved	Alpelisib	Unlikely	None	sacituzum	Probably	Expected
147815-10 Alpelisib:	2 Fatigue	4/11/2022	4/14/2022	Attribution	46059	Counterac	tive Medic	#######	Other	Grade Cha	Alpelisib	Unlikely	None	sacituzum	Possibly	P Expected
147815-10 Alpelisib:	1 Headache	4/11/2022	5/4/2022	Attribution	46060	Counterac	tive Medic	#######	Recovered	/ resolved	Alpelisib	Unlikely	None	sacituzum	Unlikely	Expected
147815-10 Alpelisib:	1 Nausea	4/11/2022	5/4/2022	Attribution	46061	None		#######	Recovered	/ resolved	Alpelisib	Possibly	P None	sacituzum	Possibly	P Expected
147815-10 Alpelisib:	1 Constipat	4/11/2022	5/4/2022	Attribution	46062	None		#######	Recovered	/ resolved	Alpelisib	Unlikely	None	sacituzum	Unlikely	Expected
147815-10 Alpelisib:	1 Confusion	7/14/2022	7/21/2022	Attribution	47298	None		#######	Recovered	/ resolved	Alpelisib	Not Relat	te None	sacituzum	Not Relat	e Unexpected
147815-10 Alpelisib:	1 Cough	7/4/2022	7/21/2022	Attribution	47299	None		#######	Recovered	/ resolved	Alpelisib	Not Relat	te None	sacituzum	Not Relat	E Unexpected

Image 1. Example of raw AE report pulled from CTMS before project implementation

We used SQL JOIN statements to retrieve AE categories from a reference table and aggregated the data to count events for each combination of AE, AE Category, Event Grade, Expectedness, and Relatedness (*Diagram 1*).

For reports with multiple drugs, we created a separate query to count events for each drug individually. Finally, we grouped the data into columns and provided event counts per participant in a spreadsheet (*Image 2*). These queries are now stored in the SQL database for future reference and can be integrated into the FDA Annual report template.

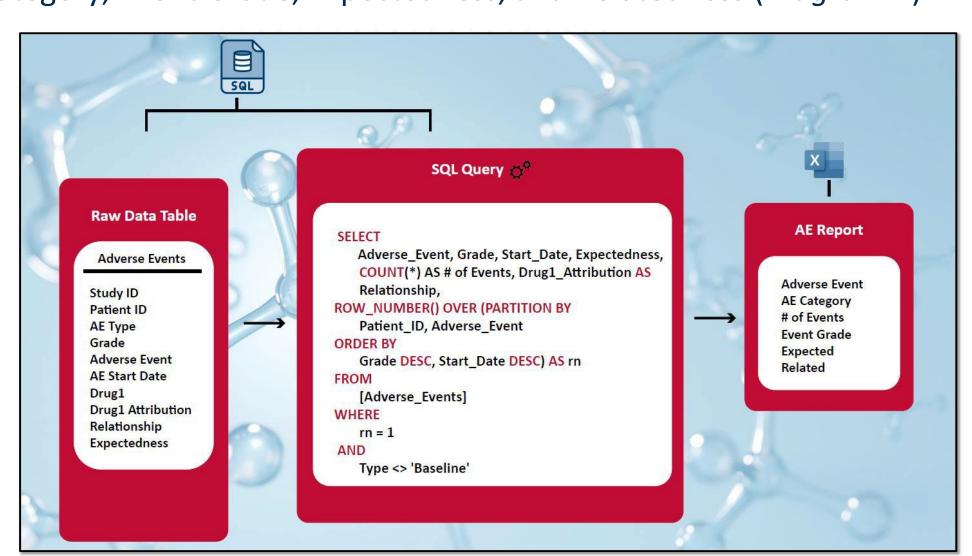


Diagram 1. SQL queries for automated reports

Category	Adverse Event 🔻	Number of Patier 🔻	Event Grade 🔻	Alpelisib Relatedness 🔻	Sacituzumab Govitecan Relatedn 🔻	Expectedness -
Blood and lymphatic system disorders	Anemia	2	1	Possibly Related	Possibly Related	Expected
	Anemia	1	1	Probably Related	Probably Related	Expected
	Anemia	1	2	Not Related	Possibly Related	Expected
	Anemia	1	2	Possibly Related	Possibly Related	Expected
	Anemia	1	2	Probably Related	Probably Related	Expected
	Anemia	1	2	Unlikely	Definitely Related	Expected
	Anemia	1	2	Not Related	Not Related	Unexpected
	Eosinophilia	1	1	Possibly Related	Possibly Related	Expected
Eye disorders	Blurred vision	1	1	Possibly Related	Possibly Related	Expected
	Cataract	1	2	Not Related	Not Related	Expected
Gastrointestinal disorders	Abdominal pain	1	1	Not Related	Not Related	Unexpected
	Abdominal pain	1	2	Not Related	Not Related	Expected
	Ascites	1	3	Not Related	Not Related	Unexpected

Image 2. Example AE report pulled from CTMS after project implementation

Outcomes

- Time needed to complete annual reports have significantly decreased.
- Prior to this project, each study's AE
 section took 2-10 hours to complete,
 varying by number of patients, AEs, and
 years open. Following implementation
 of automated AE sections, each IND
 report took <2 hours in their entirety.
- During creation of these first automated reports, the team noticed inconsistencies in drug attribution, spelling, input order, and incomplete data, which lead to the clean-up of these data by the input teams.
- Project will contribute to more accurate reports in the future.
- IIT regulatory department has a higher equitable bandwidth.

Future Directions

Data cleansing and organization efforts
 for more accurate and efficient reports

KU is an EO/AA institution.