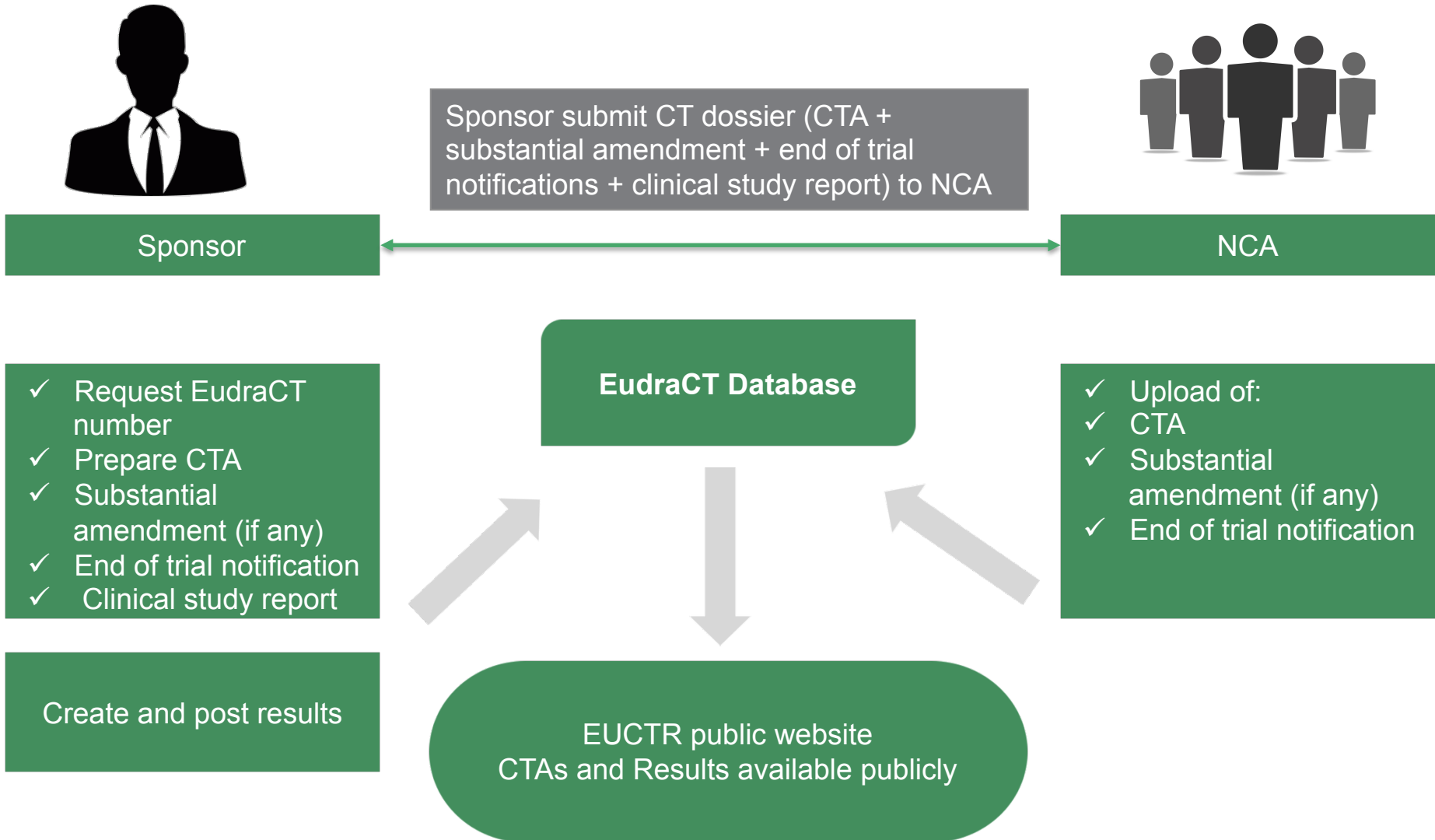


By end of today's session you will know about:

- An Overview About EudraCT Regulations
- Insights About the Major Differences Between the Widely used Global Databases (EudraCT and ClinicalTrials.gov)
- Practical Considerations for Functional Areas



Overview About EudraCT Regulations



Regulatory Bodies

European
Medicine
Agency

Member States
(NCA) of the EU



Laws/Acts/Regulations

Commission
Guideline 2012/C
302/03

Directive 2001/20/
EC

Pediatric
Regulation (EC)
No 1901/2006
(Art 41,45,46)

Regulation (EC)
No 726/2004

V10: A Significant Step Towards Transparency



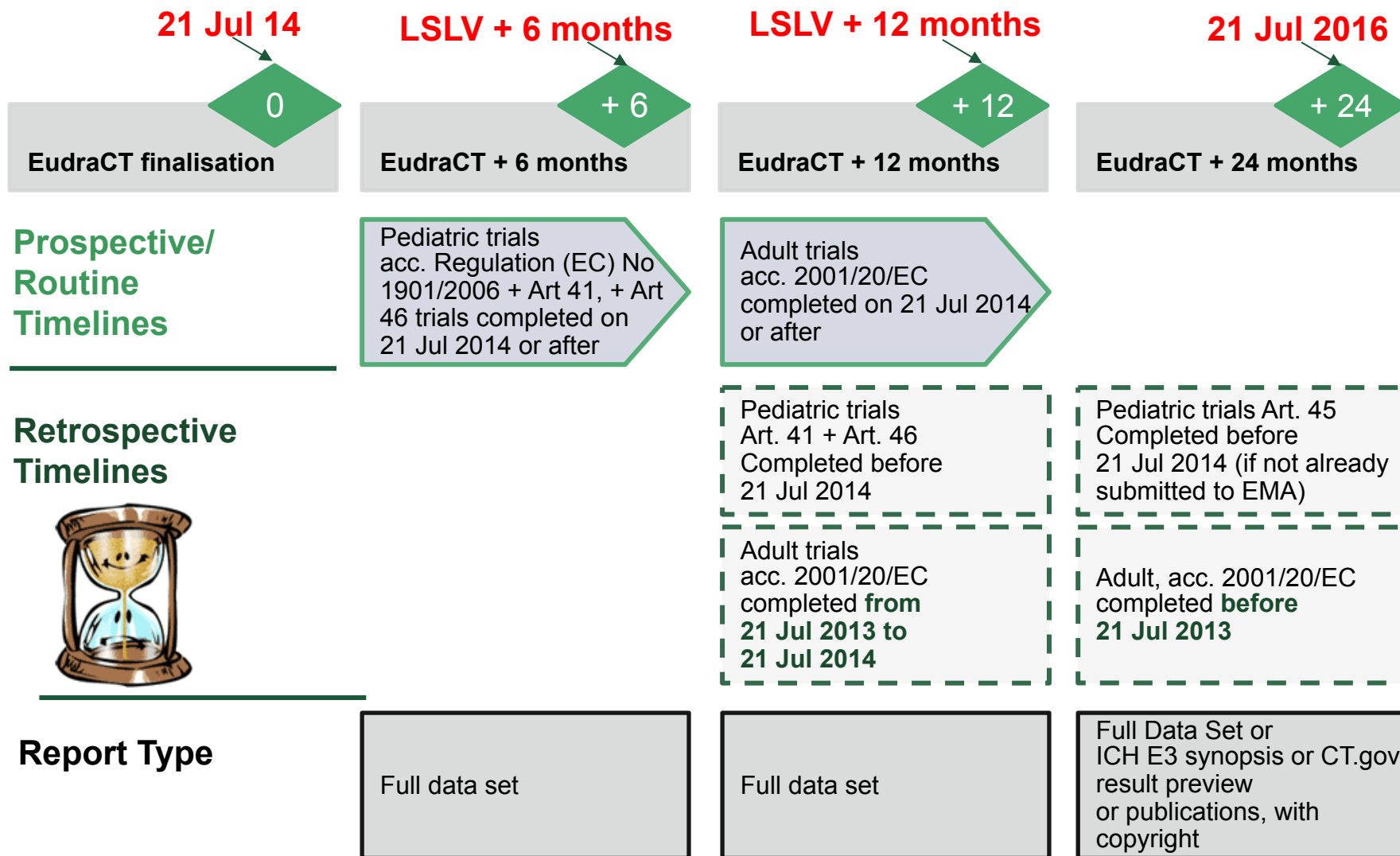
Registry EudraCT v.8 08 Mar 2011

- ✓ Protocol related information
- ✓ Trials initiated after 01 May 2004
- ✓ Trials conducted only in EU/EEA unless they are part of Pediatric investigational plan (PIP)
- ✓ No data entry done by Sponsors
- ✓ Data automatically pulled from CTA Form submitted by sponsor to NCAs
- ✓ Trials publicly available:
All Phase 2 to 4 and Phase 1 in children

Results Database EudraCT v.10 Implementation date: 21 Jul 2014

- ✓ Results of Phase 1 to 4 interventional trials
- ✓ Provision for registration of trial conducted outside EU/EEA* (PIP trials and Pediatric trials)
- ✓ Manual data entry by sponsors or XML
- ✓ Retrospective submission of results till 01 May 2004
- ✓ Results publicly available:
All Phase 2 to 4 and Phase 1 in children





 EU Clinical Trials Register[Home & Search](#)[Joining a trial](#)[Contacts](#)[About](#)

Clinical trials

The European Union Clinical Trials Register allows you to search for protocol and results information on:

- interventional clinical trials that are conducted in the European Union (EU) and the European Economic Area (EEA);
- clinical trials conducted outside the EU / EEA that are linked to European paediatric-medicine development.

Learn [more about the EU Clinical Trials Register](#) including the source of the information and the legal basis.

The EU Clinical Trials Register currently displays **23188** clinical trials with a EudraCT protocol, of which **3069** are clinical trials conducted with subjects less than 18 years old.

The register also displays information on **17724** older paediatric trials (in scope of Article 45 of the Paediatric Regulation (EC) No 1901/2006).

X

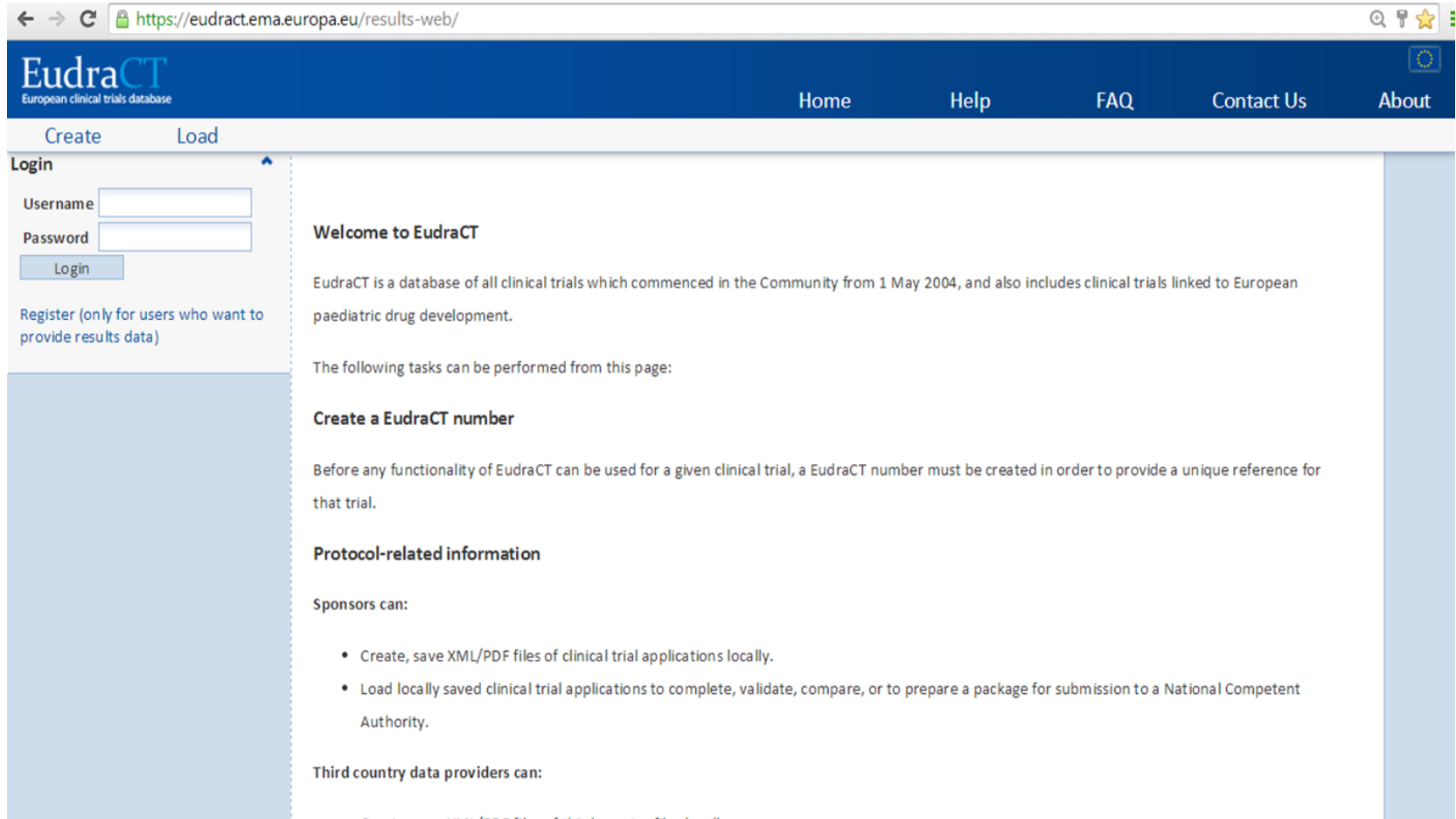
[Search](#)

Examples: Cancer AND drug name. Pneumonia AND sponsor name.

[How to search \[pdf\]](#)

Advanced Search: [Search tools](#) 

<https://www.clinicaltrialsregister.eu/ctr-search/search>

A screenshot of the EudraCT website interface. The browser's address bar shows the URL "https://eudract.ema.europa.eu/results-web/". The website has a blue header with the EudraCT logo and navigation links: Home, Help, FAQ, Contact Us, and About. Below the header, there are tabs for "Create" and "Load". The main content area is divided into a left sidebar and a main panel. The sidebar contains a "Login" section with fields for "Username" and "Password", a "Login" button, and a link to "Register (only for users who want to provide results data)". The main panel has a "Welcome to EudraCT" message, followed by a description of the database, a list of tasks, and sections for "Create a EudraCT number" and "Protocol-related information".

← → ↻ <https://eudract.ema.europa.eu/results-web/> 🔍 ⚙️ ⭐

EudraCT
European clinical trials database

Home Help FAQ Contact Us About

Create Load

Login

Username

Password

Login

[Register \(only for users who want to provide results data\)](#)

Welcome to EudraCT

EudraCT is a database of all clinical trials which commenced in the Community from 1 May 2004, and also includes clinical trials linked to European paediatric drug development.

The following tasks can be performed from this page:

Create a EudraCT number

Before any functionality of EudraCT can be used for a given clinical trial, a EudraCT number must be created in order to provide a unique reference for that trial.

Protocol-related information

Sponsors can:

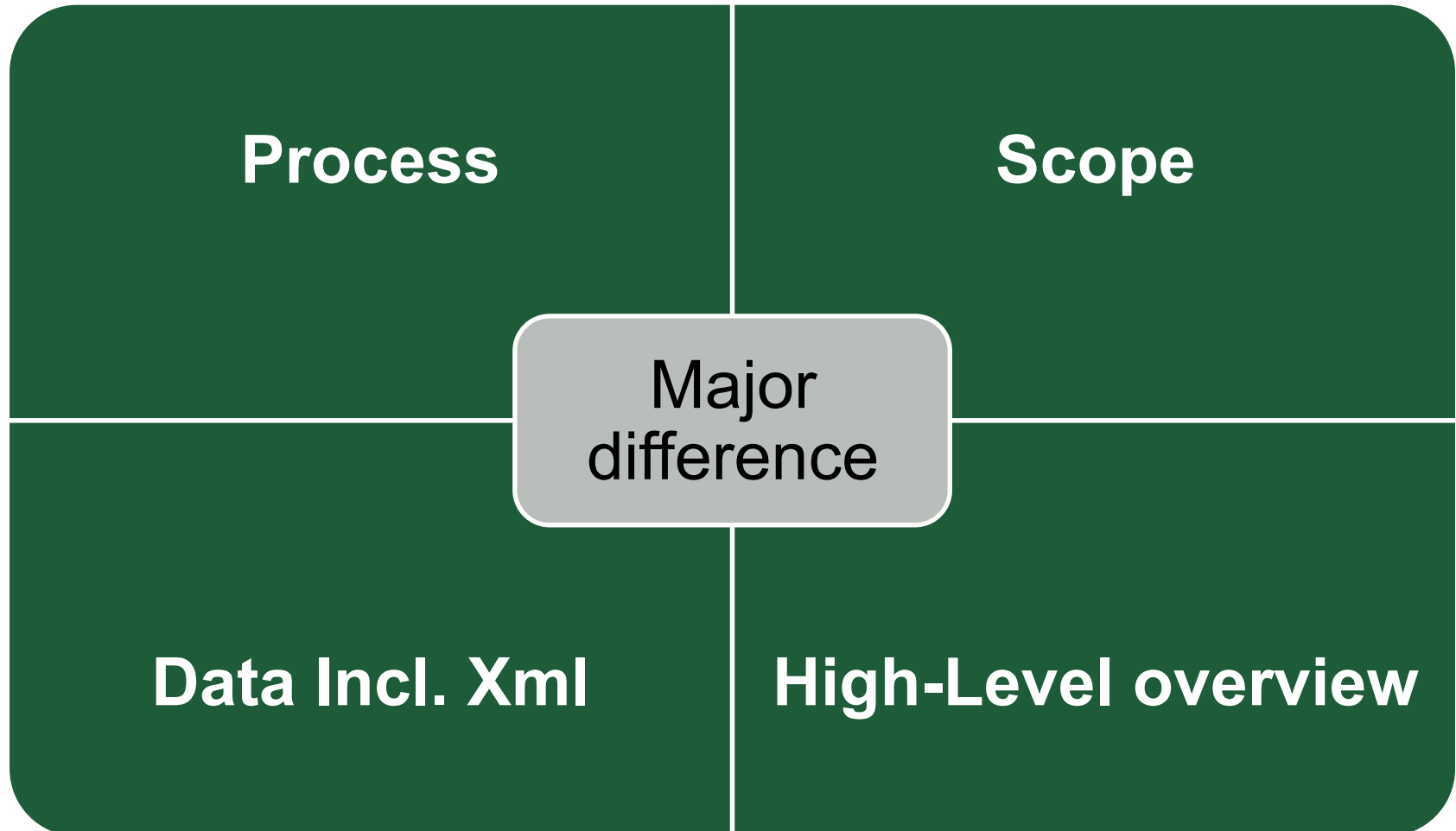
- Create, save XML/PDF files of clinical trial applications locally.
- Load locally saved clinical trial applications to complete, validate, compare, or to prepare a package for submission to a National Competent Authority.

Third country data providers can:

- Create, save XML/PDF files of clinical trial applications locally.

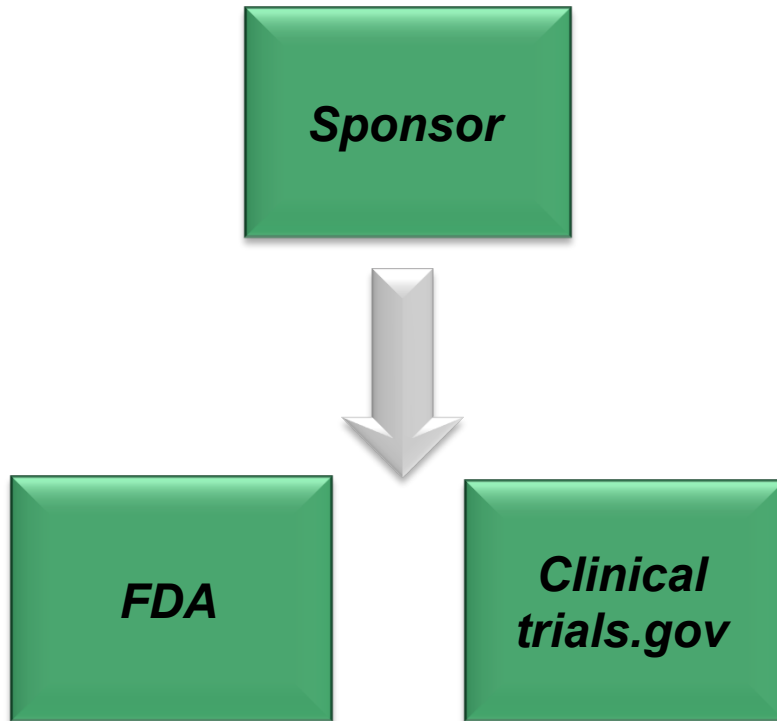
<https://eudract.ema.europa.eu/results-web/>

Major Differences Between the two Major Global Databases (EudraCT and ClinicalTrials.gov)

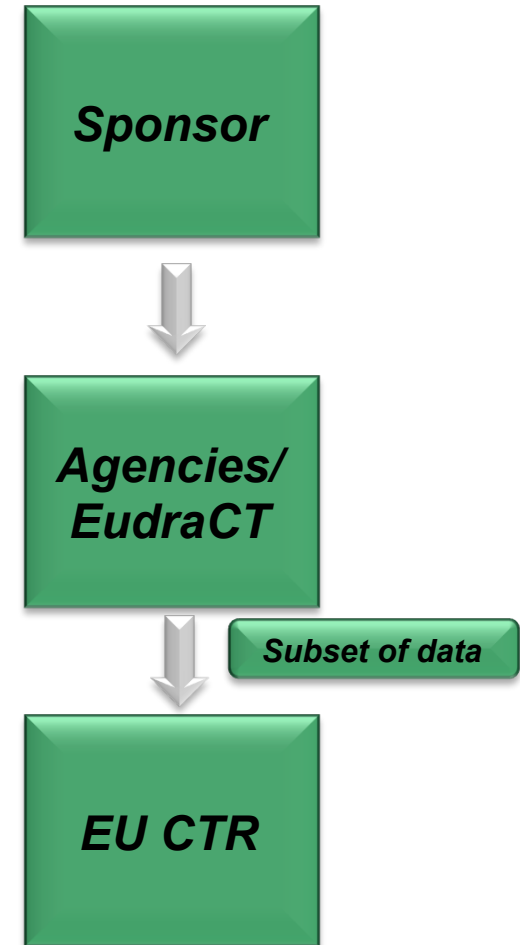


Process

US (ClinicalTrials.gov)



EU (EudraCT)



Scope

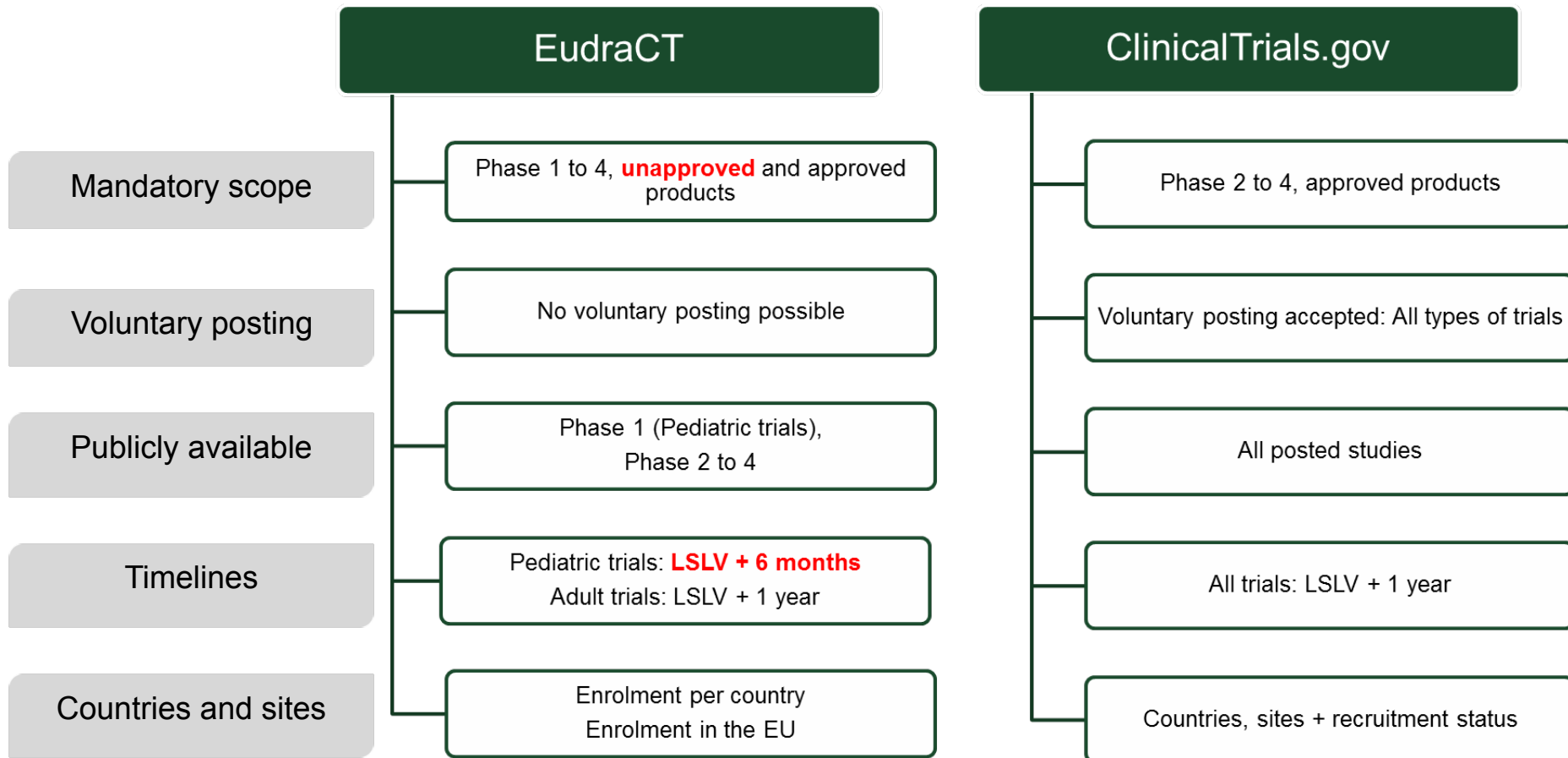
US (ClinicalTrials.gov)

- ❑ CT.GOV was designed from the outset and remains as a Web-based resource that provides patients, their family members, health care professionals, researchers, and the public with easy access to information on publicly and privately supported clinical studies. Trial information is directly provided and updated to CT.GOV by the sponsor or principal investigator of the clinical study.

EU (EudraCT)

- ❑ In regards to protocol registration, the purpose of the EudraCT database is to allow the various European Economic Area (EEA) agencies to take a decision on whether to approve the study
- ❑ Secondary purpose is to submit the data to the EU CTR.

High-Level overview



Data Differences : Trial Information (1/6)

Sponsor protocol code*

Study code on the protocol

Additional study identifiers

ISRCTN number

ClinicalTrials.gov identifier (NCT number)

Information on ClinicalTrials.gov

WHO universal trial number (UTN)

Other trial identifiers

Other identifier name

Other identifier code

Additional sponsor study number assigned

No other trial identifiers have been specified.

Sponsor details *

 Add sponsor

Organisation details	Scientific contact point	Public contact point
ABC		

Contact point (scientific & public)

Data Differences : Trial Information (2/6)

Paediatric regulatory details

Is trial part of an agreed paediatric investigation plan (PIP)* ☐ Yes ☒ No 

EMA paediatric investigation plan(s) EMEA - - PIP 

Does article 45 of Regulation (EC) No 1901/2006 apply to this trial?* ☐ Yes ☒ No 

Does article 46 of Regulation (EC) No 1901/2006 apply to this trial?* ☒ Yes ☐ No 

- ✓ Mandatory info to decide the scope and to post result on EudraCT
- ✓ To be confirmed by **study team** during review cycle

Results analysis stage

Analysis stage* ☐ Interim ☐ Final 

Date of interim/final analysis*  

Is this the analysis of the primary completion data?* ☐ Yes ☐ No 

Primary completion date  

Global end of trial date reached?* ☐ Yes ☒ No 

Global end of trial date 

Was the trial ended prematurely? ☐

Cut-off data point for the reported analysis or date of database lock

Primary completion date is the date that the final subject was examined or received an intervention for the purposes of final collection of data for the **primary end point**.

Study completion date is in CSR i.e. LSLV

Data Differences :Trial Information (3/6)

Main objective of the trial*

Primary objective(s) only

Actual start date of recruitment*  

Study start date FSFV

Long term follow-up planned* ☐ Yes ☒ No 

Long term follow-up rationale 

Safety
Efficacy
Ethical reason
Regulatory reason
Scientific research

 Copy all

 Copy

 Remove

 Remove All

- ✓ Long term monitoring of subjects planned after the end of treatment
- ✓ To confirmed or added by study team the review cycle

Long term follow-up duration

Please select... ☐ Months ☐ Years

Background therapy

Treatments other than experimental or comparator drugs.
Non-mandatory, can be left blank

Evidence for comparator(s)

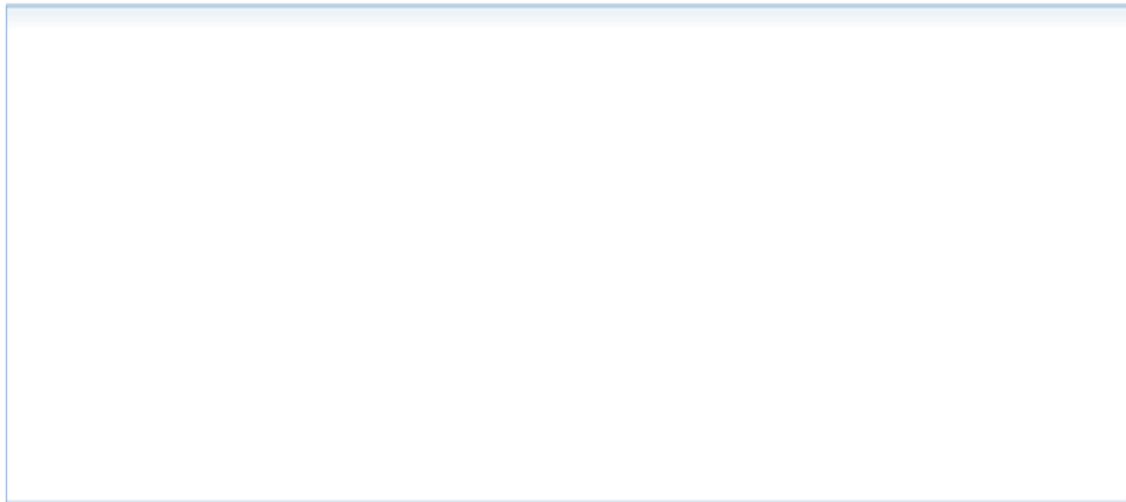
Rationale and evidence for the use of the comparators used in the trial.
Non-mandatory, can be left blank

Data Differences : Trial Information (4/6)

Protection of trial subject: **Mandatory field**



Protection of trial subjects*



- ✓ Enter a description for any specific measures that were put in place to protect trial subjects, e.g. measures to minimize pain and distress
- ✓ To be confirmed by **Study team** during review cycle

Data Differences :Trial Information (5/6)

Population of trial subjects (Country wise): **Mandatory field**

Spain	Save	Discard changes	Validate full data set	Upload XML	Dov
United Kingdom				* 16	
Austria		60		* 11	
Belgium		60		* 19	
Czech Republic		15		* 6	
France		80		* 31	
Germany				* 117	
Hungary		100		* 18	
Italy		45		* 20	
Total: worldwide				545	
Total: EEA only				311	

These are planned number as per CTA submitted (Auto-populated or non-editable)

- ✓ Randomized vs. enrolled:
Actual randomized subjects country wise entered as we need to keep the total number consistent with no. of subject started in disposition table
- ✓ Statistician needs to confirm/complete during review cycle (depending upon availability of info in the CSR appendices)

Total population in EEA is auto-calculated (not requested by CT.gov),

Data Differences :Trial Information (6/6)

Age group break down for trial: **Mandatory field**

Age group breakdown for trial 

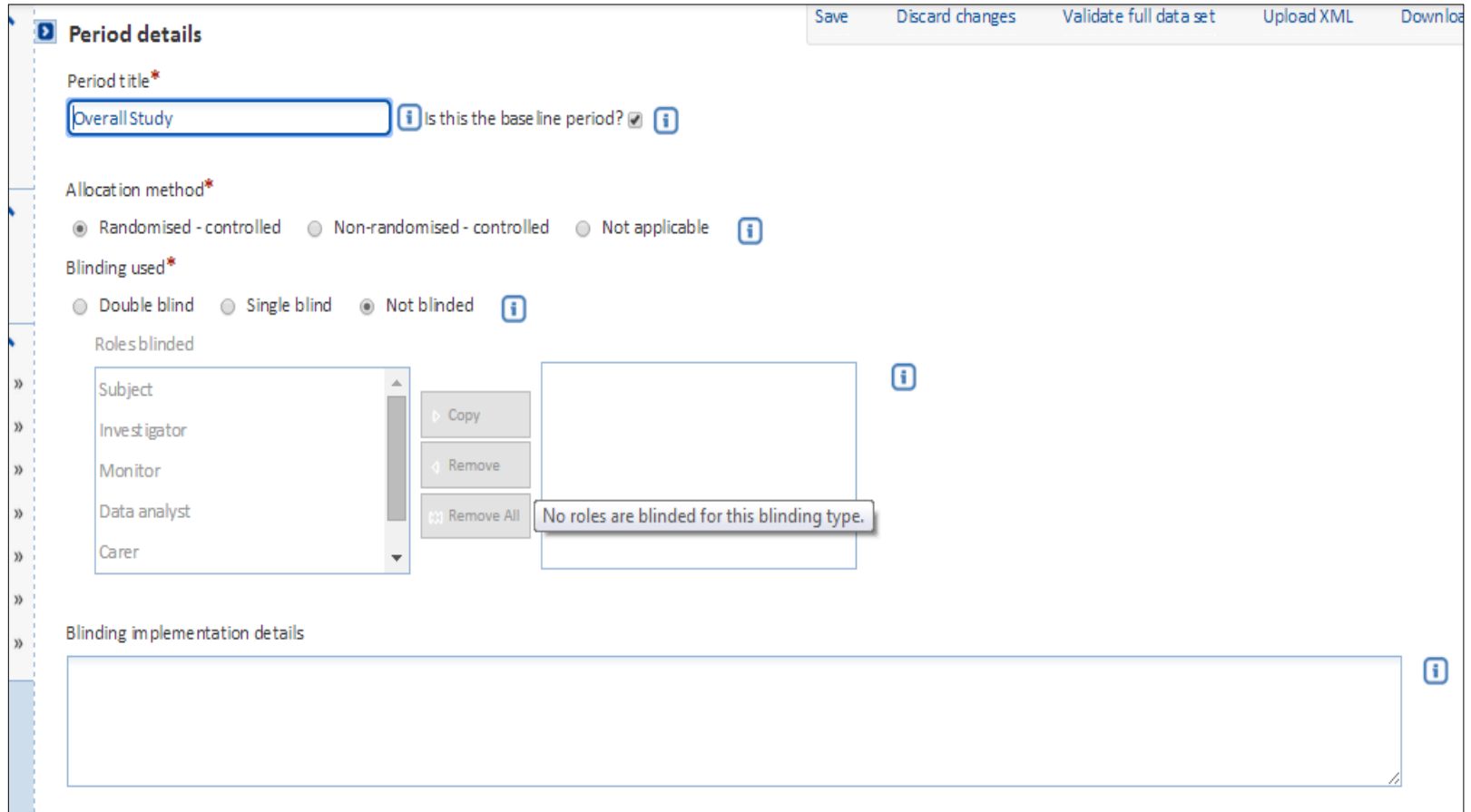
Age range	Planned number of subjects	Actual number of subjects enrolled
In utero		*
Preterm newborn infants (gestational age < 37 wks)		*
Newborns (0-27 days)		*
Infants and toddlers (28 days-23 months)		*
Children (2-11 years)		*
Adolescents (12-17 years)		*
Adults (18-64 years)	26	*
From 65 years -		
From 65-84 years		*
85 years and over		*

- ✓ Age breakdown as per these pre-specified categories is mandatory (not requested by CT.gov)
- ✓ Actual number of subjects as per these pre-specified categories
- ✓ Statistician needs to confirm/complete during review cycle (depending upon availability of info in the CSR appendices)

These are planned number of subject per age category as per CTA submitted (Auto-populated or non-editable)

Data Differences :Subject Disposition (1/2)

✓ Period details



The screenshot shows the 'Period details' form in the Kinapse system. The form includes the following sections:

- Period title***: A text input field containing 'Overall Study'. To its right is a checkbox labeled 'Is this the base line period?' which is checked, and an information icon.
- Allocation method***: Three radio buttons: 'Randomised - controlled' (selected), 'Non-randomised - controlled', and 'Not applicable'. An information icon is to the right.
- Blinding used***: Three radio buttons: 'Double blind', 'Single blind', and 'Not blinded' (selected). An information icon is to the right.
- Roles blinded**: A list box on the left containing 'Subject', 'Investigator', 'Monitor', 'Data analyst', and 'Carer'. To its right are buttons for 'Copy', 'Remove', and 'Remove All'. Further right is a large empty box with an information icon. A tooltip message 'No roles are blinded for this blinding type.' is displayed over the empty box.
- Blinding implementation details**: A large text area at the bottom with an information icon to its right.

At the top right of the form, there are navigation buttons: 'Save', 'Discard changes', 'Validate full data set', 'Upload XML', and 'Download'.

Data Differences :Subject Disposition (2/2)

✓ Product details

Subject disposition > Period 1 > Arm 1 >
Product

IMP name:*

IMP code:

Other names:

Routes of administration:*

Pharmaceutical forms:*

Dosage and administration details:*

Done Delete product Create another product

Data Differences :Baseline/Endpoint

- ✓ Subject Analysis set

Subject analysis set

Subject analysis set title:*



Subject analysis set type:*



Subject analysis set description:*

Number of subjects in subject analysis set:*

Add a subject analysis set if you wish to report on groups different from the reporting groups defined in the subject disposition section.

Done

Delete subject analysis set

Create another subject analysis set



Data Differences :Adverse Events :General Information

Reporting group title: *

Reporting group description:

For this reporting group, provide the following totals:

Subjects exposed: * 

Subjects affected by serious adverse events: * 

Subjects affected by non-serious adverse events: * 

Total number of deaths (all causes): * 

Total number of deaths resulting from adverse events: 



- ✓ These fields are mandatory
- ✓ Statistician needs to confirm/complete during review cycle (depending upon availability of info in the CSR appendices)
- ✓ 'Total number of deaths': This field is mandatory and also not required by CT.gov

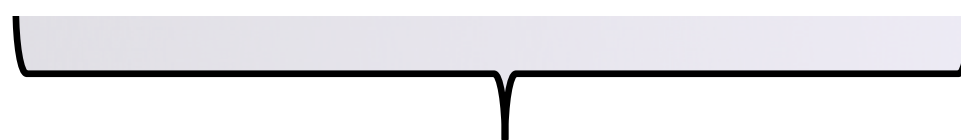
This field is not mandatory and also not required by CT.gov



Data Differences : Serious Adverse Events

Values for serious adverse event per reporting group *

Reporting groups	Subjects affected number	Subjects exposed number	Occurrences all number	Occurrences causally related to treatment number	Fatalities number	Fatalities causally related to treatment number
ABC						



SAE table should have:

- Total number of subjects affected and exposed
- Total number of occurrences
- Total number of occurrences casually related to treatment
- Number of deaths due to SAE
- Number of deaths due to SAE casually related to treatment

- ✓ Mandatory and not requested by CT.gov.
- ✓ Statistician needs to confirm/complete during review cycle (depending upon availability of info in the CSR appendices)

Ideal Scenario: Statistician to generate SAE tables with this information for direct uploading (XML)

Data Differences : Non-Serious Adverse Events

▶ Values for non-serious adverse event per reporting group *

Threshold for non-serious adverse event reporting is: 0%

Reporting groups	Subjects affected number	Subjects exposed number	Occurrences all number
ABC			

Non-SAE data is not available in the CSRs

Non-SAE table should have:

- Total number of subjects affected
- Total number of subjects exposed
- Total number of occurrences

- ✓ Mandatory field
- ✓ Statistician needs to confirm/complete during review cycle (depending upon availability of info in the CSR appendices)

Ideal Scenario: Statistician to generate Non-SAE tables with this information for direct uploading (XML)



Data Differences : Amendments and Interruptions

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? ☒ Yes ☐ No

Add global substantial protocol amendment

No amendments have been specified.

- ✓ Description and a reason for the main changes to the protocol
- ✓ Substantial amendment date was first approved by a regulatory authority
- ✓ Character limit: 2000
- ✓ Medical monitor to confirm/update based on the all substantial amendments

Interruptions (globally)

Were there any global interruptions to the trial? ☐ Yes ☐ No 

Add global interruption

No interruptions have been specified.

- ✓ Description and reason for the interruption
- ✓ Date when the interruption took effect
- ✓ Character limit: 2000
- ✓ Medical monitor to confirm/update based on the all substantial amendments

Source of information: CTR Section, "Changes in the conduct of the study"

Xml Differences

- Due to completely different XML file structures, an organization's clinical IT group will face double the programming efforts if they want to generate XML files that will upload trial data automatically to EudraCT and CTGOV.
- While an organization might attempt to transform the CTGOV- XML to the EudraCT XML file, this is not recommended as missing information will always be found and the need to manually edit the XML files.

The better approach is to have one common data set that covers the requirements for both registries, and then generate separate XML files for EudraCT and CTGOV.

Key requirements for Xml

Trial Information:

- # Study number with CSR report number and date of report
- # AE selection criteria – e.g. Treatment-emergent
- # Population to be reported
- # XML output – EMA/FDA/PharmaCM

AE Information:

- #Timeframe
- #Frequency Threshold
- #Dictionary name and version
- #Event count to be included or not
- #Assessment type
- #Reporting Groups – Title, Description

Practical Considerations for Functional areas

Prepare Functional Areas



**Take
home message*



kinapse

Clinical Team



- ✓ Increase the visibility and importance of EudraCT within functions
- ✓ Drive trials forward to ensure reporting deadlines are met (Availability of CSR specially in pediatric trial as timelines are very stringent)
- ✓ Provide timely and accurate trial related information
 - Study. timelines, EudraCT number, countries, etc.
 - Information about 3rd country trials under pediatric regulations
 - Communication regarding important trial milestones

Legal

- ✓ To keep sponsor informed about any updates in agreement in contract with license or alliance partners, as to which party has responsibility for registration of studies and posting the results to plan accordingly
- ✓ To review the posting text from legal point of view and provide comments/suggestions (If any)

Prepare Functional Areas



**Take
home message*



kinapse

Regulatory Affairs



- ✓ Confirmation on the global end of trial dates for in-scope studies as EUCTR public database is not up to date
- ✓ Information about 3rd country trials under pediatric regulations
- ✓ Complete three standard questions under pediatric regulations which are mandatory for posting the results on EudraCT
- ✓ Is this trial is part of an agreed PIP?
- ✓ Does Article 45 regulation apply to this trial?
- ✓ Does Article 46 regulation apply to this trial?

Statistician

- ✓ AEs tables/Xml files as per EudraCT requirements
- ✓ Demographic data (Age) as per pre-specified categories for EudraCT
- ✓ Subject disposition country wise as per EudraCT requirements
- ✓ Accuracy check of the data source used for posting
- ✓ Statistical analysis information as in EudraCT Statistical analysis is mandatory for Primary OMs

- Guidance on posting and publication of result-related information on clinical trials in relation to the implementation of Article 57(2) of Regulation (EC) No 726/2004 and Article 41(2) of Regulation (EC) No 1901/2006 – October 2012
- Technical guidance on the format of the data fields of result-related information on clinical trials submitted in accordance with Article 57(2) of Regulation (EC) No 726/2004 and Article 41(2) of Regulation (EC) No 1901/2006 - January 2013
- <https://www.clinicaltrialsregister.eu/ctr-search/search>
- https://eudract.ema.europa.eu/docs/guidance/Trial%20results_Modalities%20and%20timing%20of%20posting.pdf
- https://eudract.ema.europa.eu/docs/technical/EudraCT_result_related_data_Dictionary.xls
- <https://eudract-training.ema.europa.eu/>
- <https://eudract.ema.europa.eu/document.html>
- http://www.ema.europa.eu/docs/en_GB/document_library/Other/2014/10/WC500174796.pdf
(European Medicines Agency policy on publication of clinical data for medicinal products for human use adopted on 02 Oct 2014)
- <https://arisglobal.com/wp-content/uploads/2014/09/EudraCT-Results-Reporting-WhitePaper.pdf>

Thank you...



Back-up Slides

EudraCT V10: In Scope and Out of scope Activities



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In Scope Activities

- Interventional trials (Approved and unapproved products)
- Phase 1 to 4
- Trials completed on or after 01 May 2004
- ICH E3 synopsis posting
 - Pediatric trials Art. 45 if not already submitted to EMA
 - Non-pediatric trials completed between 01 May 2004 to 20 Jul 2013 with at least one site in EU/ EEA
- Full dataset posting
 - All Pediatric trials acc. 2001/20/EC, Art 41 and Art 46 and Non -pediatric trials acc to 2001/20/EC completed on or after 21 Jul 2014
 - All pediatric trials, Art 41 and Art 46 completed before 21 Jul 2014

Out of Scope Activities

- Non-interventional studies (NIS)
- Investigator sponsored trials (ISTs)
- Trials completed before 01 May 2004
- Non-pediatric trials outside EU/ EEA



Statistical Analysis (1/3)



Statistical analysis details

Statistical analysis title:*



Analysis description:



Analysis specification: * ☐ Pre-specified ☐ Post-hoc

Analysis type: *



Analysis type comment:



- ✓ **Statistical analysis results for primary endpoints are mandatory only.** If not available (for e.g., in premature termination), a justification is required
- ✓ Bio stats needs to confirm/complete full statistical analysis section during review cycle

- ✓ Details about null hypothesis, power calculation, adjustments for covariates, handling of missing data or adjustments for multiple comparisons
- ✓ Source section in CSR: 'Determination of sample size'

Drop down options includes:
Non-inferiority, superiority, equivalence and others

Enter additional details about the analysis, including definition of non-inferiority margin

 kinapse

Confidential

▶ Parameter estimate

Parameter type: ⓘ

Point estimate: ⓘ

Confidence interval:

sides:

level:

ⓘ ⓘ

lower limit: ⓘ

upper limit: ⓘ

Variability estimate: ⓘ

Dispersion value:

Types of parameters:

- ✓ Cox Proportional Hazard
- ✓ Hazard Ratio (HR), Hazard Ratio log
- ✓ Mean Difference (Final Values), Mean Difference (Net), Median Difference (Final Values), Median Difference (Net)
- ✓ Odds Ratio (OR), Odds Ratio log
- ✓ Risk Difference (RD)
- ✓ Risk Ratio (RR), Risk Ratio log
- ✓ Slope
- ✓ Other (Please specify)

Types of variability estimate:

- ✓ Standard deviation
- ✓ Standard error of the mean