



PhUSE SDE Utrecht

How Digital Devices and Apps can empower the digital transformation of your clinical studies



Welcome

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Agenda:

Objectives &
Motivation

Reference
Studies

Challenges &
Opportunities

Soft Landing



Motivation

Why Bayer have engaged into this road?



Digital tech can both increase the efficiency of the existing site-based trial process, and allow for new ways of capturing clinical data from patients



Impact of digital technology on clinical trial process

A *“Doing things better”*

More efficient clinical research (site-based)



- ✓ Trial design and setup driven by data, and early 360° stakeholder input leads to **better trial setup and planning**, thereby leading to **increased overall cost efficiency**, e.g. by reducing number of amendments



- ✓ **Improving patient recruitment efficiency** by data-driven site selection and in-silico feasibility checks



- ✓ **More efficient trial execution** through improved investigator information provision and training, and improved patient trial adherence through convenient mobile information provision and tailored reminders

B *“Doing better things”*

FOCUS OF THIS PRESENTATION

New ways of capturing data (at the patient)



- ✓ **Real-time and continuous data capture** through medical-grade wearables resulting in improved accuracy, and **clinical utility of data**



- ✓ **Improved pattern identification** and trial result interpretation with artificial intelligence allows for identification of **novel “digital biomarkers”**, i.e. signals in the data that predict clinical outcome



- ✓ **Remote data capturing** allows to monitor patients in the convenience of their homes, leading to **improved logistics, or even “virtual trials”**



A mix of both forms is obviously possible (e.g. existing ePRO measurements, or limited use of wearables in mainly site-based trials)

Wearable Technology is Driving Changing



// Digital Health and wearable technologies are booming

// Sensors are being packed in watches, Band-Aids, clothing and contact lenses

// They will be embedded in smart pills that we swallow



SMART PHONES

Already monitor our activity levels, lifestyles and habits.

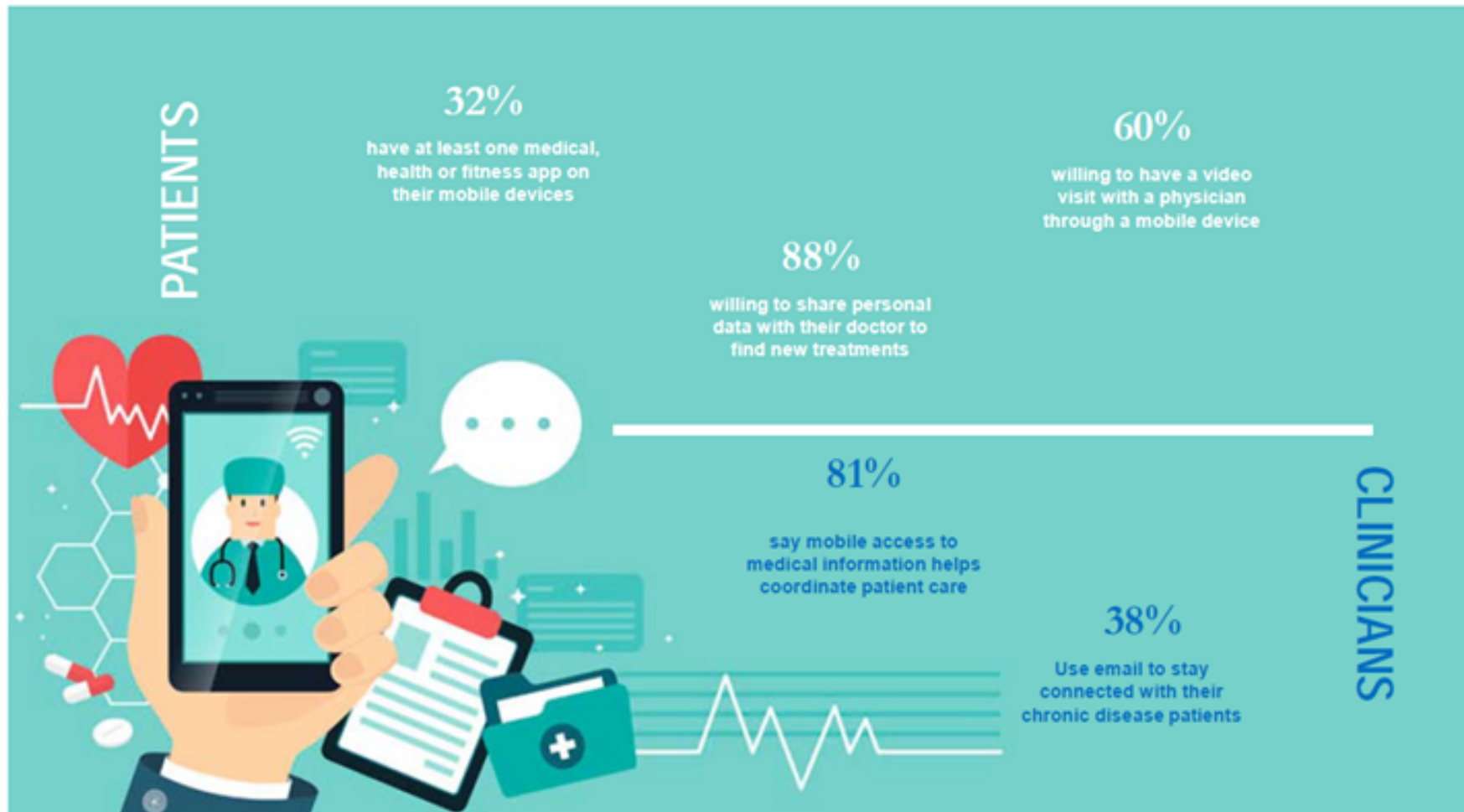
They know where we go, how quickly we move and when we sleep.

Some smartphones apps already try to judge our emotions and health based on this information

PATIENT'S LIVES ARE BEING CHANGED

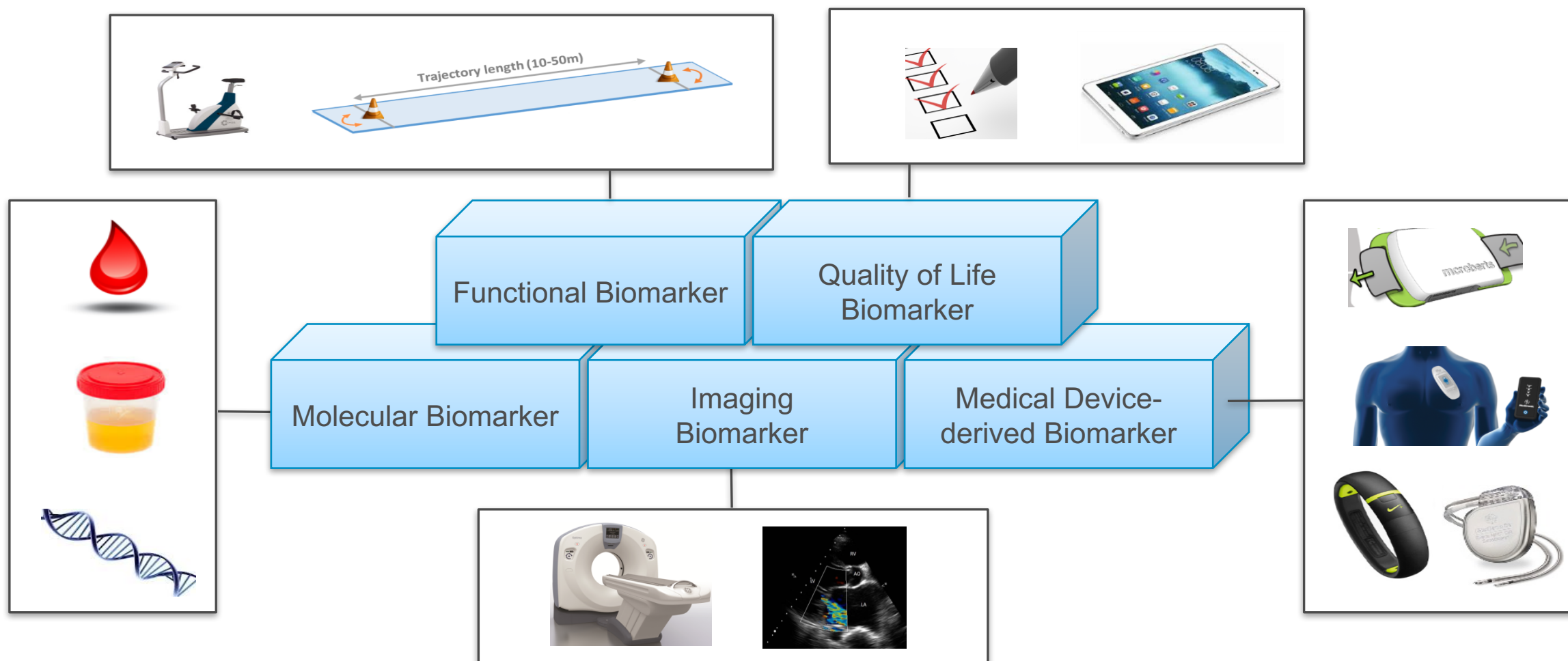
Wearable Technology is Driving Changing

Connected Care – More mobile, more accessed, more connected.



What is a Digital Clinical Trial

Digital Biomarker



Apps4Patients

Study objectives changed overtime to reflect evolving needs



Original objectives

- Determine the user acceptance of a smartphone app and an actigraphy device with a connected scale
- Determine the suitability of these instruments for inclusion in a clinical trial of patients with hemophilia planned for 2018

Final objectives

- Assess the usability and user acceptance of a smartphone app and an actigraphy device (with or without a wireless hub) with a connected scale.
- Determine the suitability of these instruments for inclusion in a clinical trial of patients with hemophilia planned for 2018 and the implications for study site implementation

Apps4Patients

Study design and eligibility criteria



STUDY DESIGN OVERVIEW

- Single-arm pilot study (3 phases)
- IRB approved Pro00021564
- n=20 participants recruited from the general population via convenience sampling
- 3-month study duration with 4 in-person visits and 1 phone visit
- Participants instructed to use SureSource Engage and connected devices

ELIGIBILITY CRITERIA FOR STUDY POPULATION

- Aged 18-63 years
- Participated in a concluded clinical trial during the past 2 years
- Uses a compatible Apple iOS or Samsung Android (S5 or higher) smart phone
- Willing to follow study procedures for 3 months
- Able to read, write, and speak in English

Apps4Patients

Devices Used



SureSource Engage by Clinical Ink

- Mobile application (Android and iOS device compatible) designed to improve experience of participants in a clinical trial. Participants were instructed to download and use a study-specific version of this application.

ActiGraph GRT9X Link

- The ActiGraph Link is a small wristwatch like device that measures indicators of the wearer's activity and sleep patterns.
- Participants will put on the ActiGraph Link and wear it for 8 weeks in total - 4 weeks during Phase I and 4 weeks during Phase II.
- During Phase I, participants were instructed not to remove the ActiGraph Link until Visit 2. During Phase II, participants were instructed not to remove the ActiGraph Link until Visit 4. Participants were instructed to remove device only for charging as needed, as well as showering/bathing/swimming.

A&D Medical Precision Health Scale

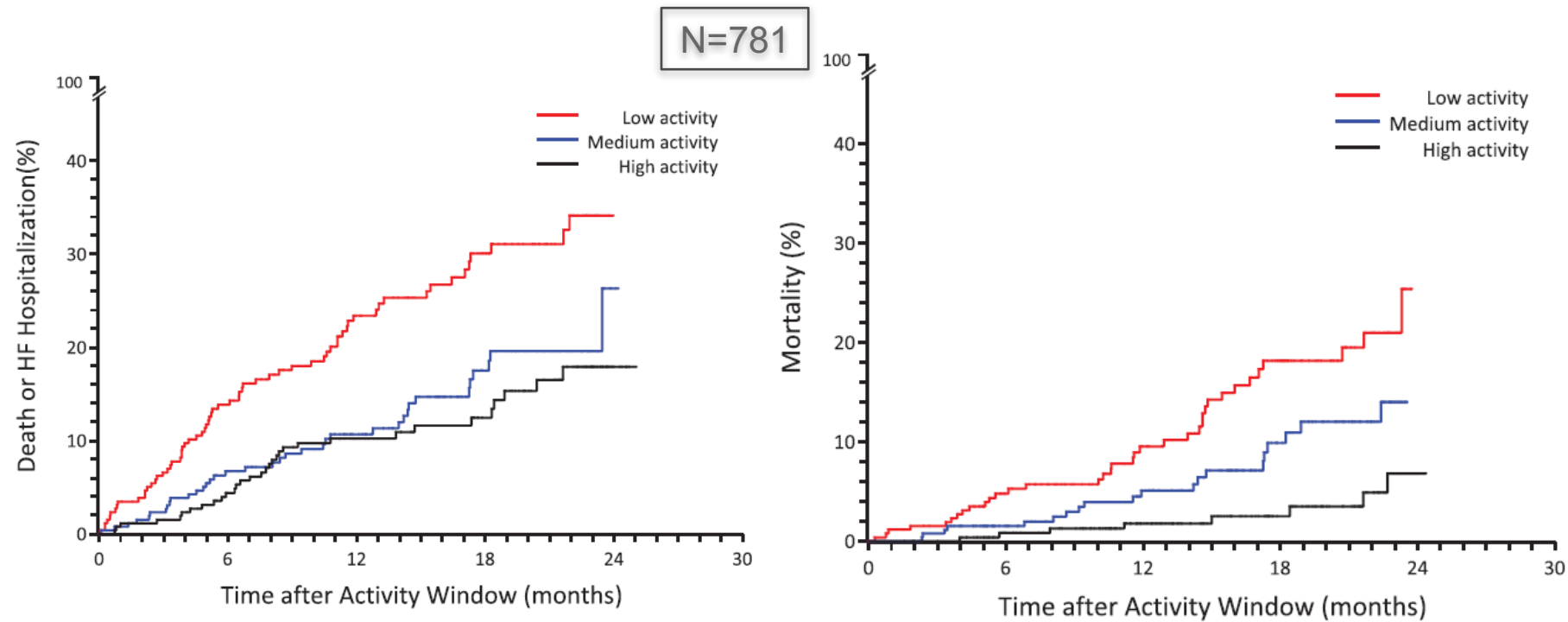
- Participants were instructed to take their weight weekly using this Bluetooth-connected scale.

CentrePoint Data Hub

- In Phase II, half of participants were instructed to use the CentrePoint Data Hub from ActiGraph, which transmits data captured by the ActiGraph GT9X Link devices to the CentrePoint cloud software platform.

Realism HF

Real Life Multimarker Monitoring in Patients with Heart Failure



Physical Activity Predicts Patient Outcome in Chronic Heart Failure

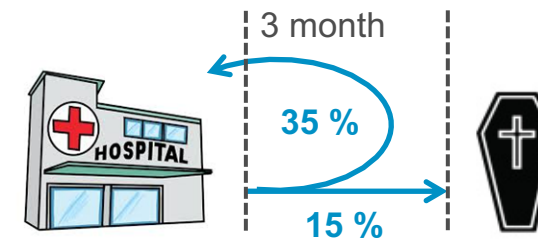
Realism HF

Real Life Multimarker Monitoring in Patients with Heart Failure



Challenge

- 50% of heart failure (HF) = HFpEF
- High unmet medical need and low success in drug R&D
- Exercise intolerance is the cardinal symptom of HFpEF ¹
- Complementary endpoints to hospitalization / death targeting patient centric outcomes to be considered for drug approval ²

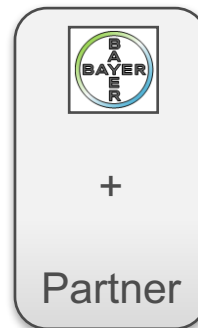


BAYER's Actions:



complement
„traditional“ endpoints“

- Physical activity
- PRO



Quali-
fication

REALISM-HF Registry

- Feasibility and validation
- Real life & real time data



PRO =
Patient Reported Outcome
HFpEF =
Heart failure with preserved
ejection fraction

Wearable Devices and PRO provide Real Life Patient Centric Endpoints

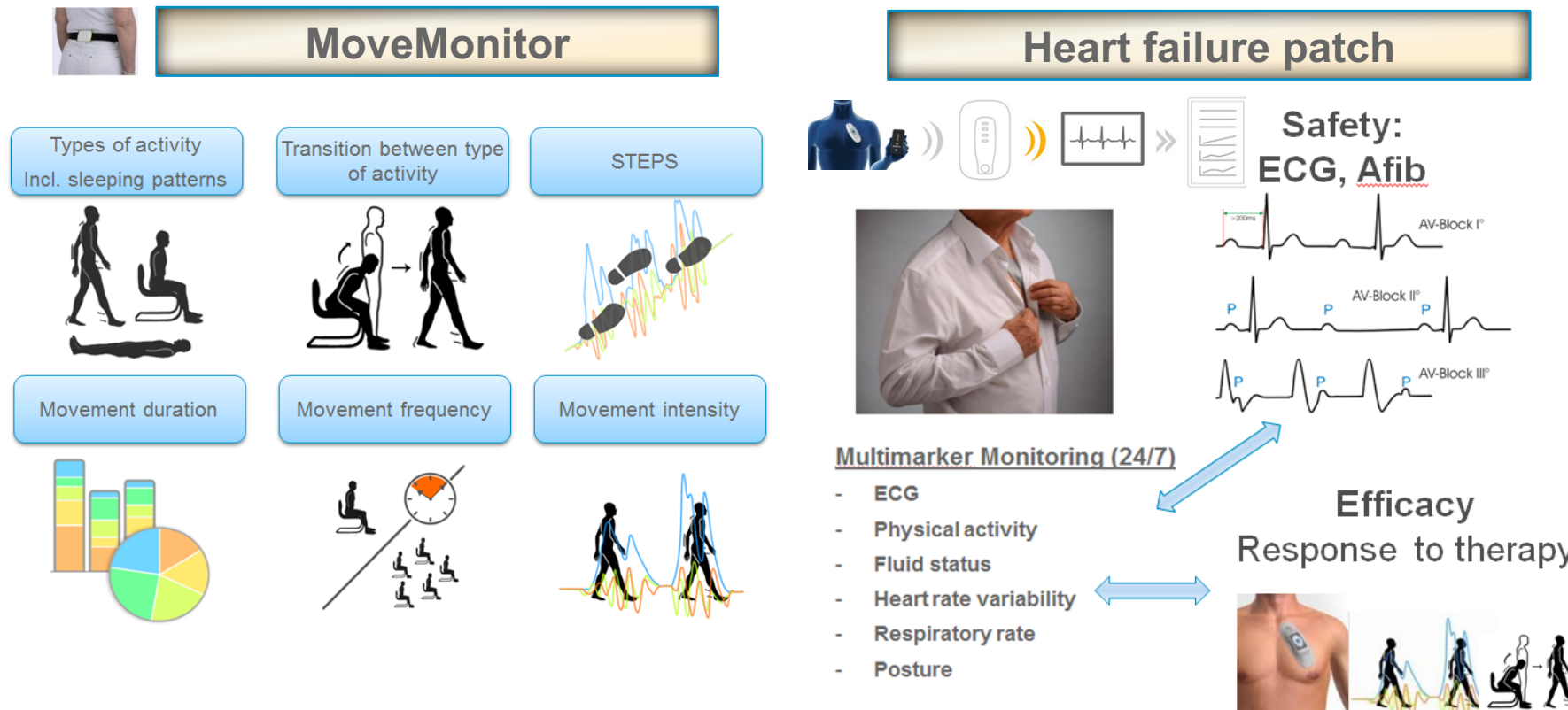
- Enables development in indications where other companies failed with traditional approach
- Precision medicine: high-definition view of our patients vs. “one size fits all trial & error medicine”

¹Upadhy *et al.*,
Journal of Geriatric
Cardiology 2015

²FDA workshop Nov
2015, publication in
press

Realism HF

Real Life Multimarker Monitoring in Patients with Heart Failure



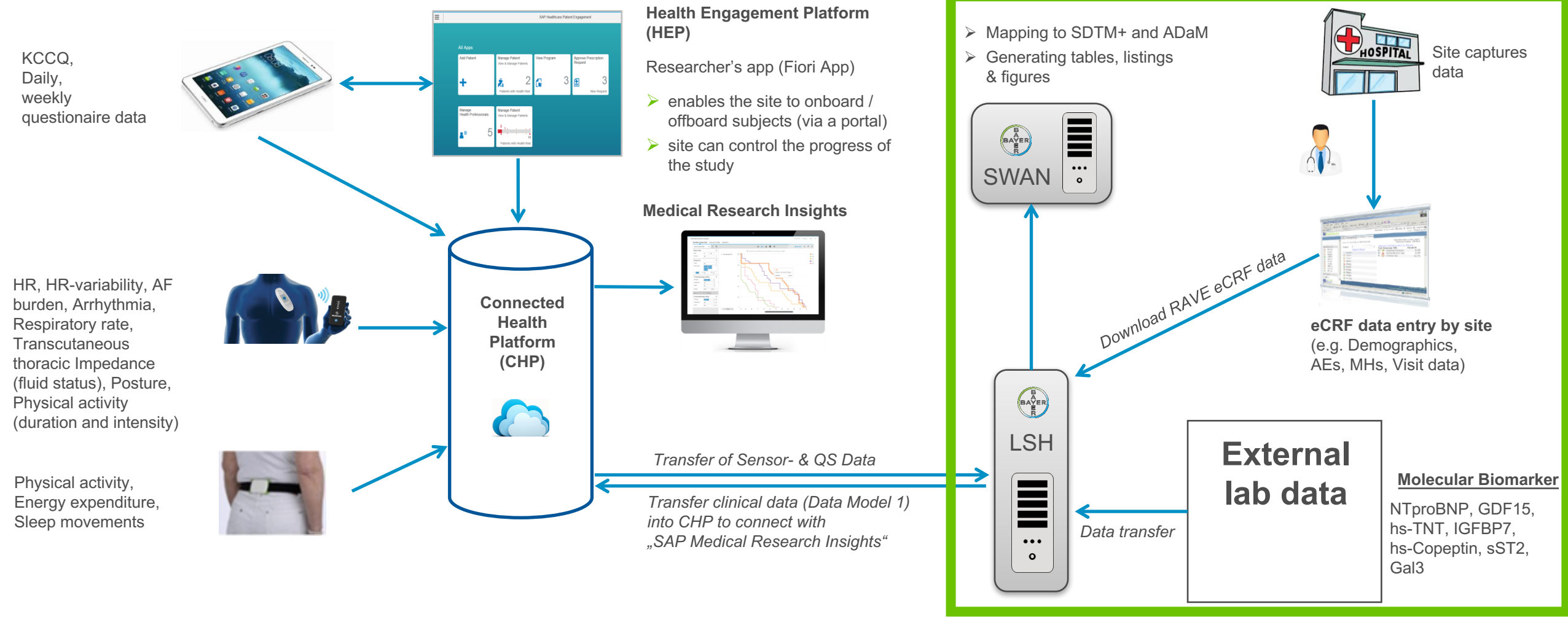
Digital device based biomarkers reflects longitudinal changes over time under real life conditions complementing traditional spot-check assessments

Realism HF

Architecture



Legacy data flow





Challenges & Opportunities



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Challenges & Opportunities

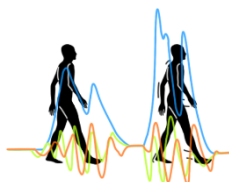
"RealismHF as example"



It is hypothesized, that subjective items derived from ePRO in combination with an (objective) device based activity monitoring, captures all relevant dimensions of physical activity in patients with HFpEF, will help test efficacy of HF drug candidates and may even serve as surrogate EP for drug approval.

1. Physical activity

- Type of activity
- Transitions between type of activity
- Steps
- Movement duration
- Movement frequency
- Movement intensity



2. Energy Expenditure

- Basal metabolic rate (BMR)
- Diet Induced Thermo Genesis (DIT)
- Activity-Related Energy Expenditure (AEE)
- Total Energy Expenditure (TEE)
- Physical Activity Ratio (PAR)
- Physical Activity Level (PAL)



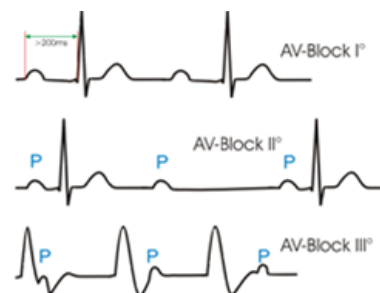
3. Sleep Movements

- Going Out of Bed
- Night's Rest Detection
- Postures
- Movement Time
- Movement Intensity
- Transitions



4. ECG parameter:

- Derived parameters like heart rate, HRV, AF burden, arrhythmias etc.
- Respiratory rate
- Transcutaneous thoracic impedance = fFluid status
- Physical activity (duration and intensity), Posture



Challenges & Opportunities

How to choose the right device / interpret different data dimensions?"

....and which endpoints should be analyzed regarding the research question of the trial?

Aggregated data device 1				Raw data device 2	
Variable	Details	Unit	Sampling (processed)	Unit	Sampling
duration of use	total duration	hhmmss	1 week, 1 day		
activity duration	if > mG threshold	sec	5 min	acceleration	~30 Hz
activity intensity	max, mean	%	5 min	on x-, y-, z-axis	
posture daily	mean	degrees	5 min	qualitative assessment	~1 Hz
respiration rate	min, mean, max	breaths/min	15 min	breaths/min	0.25 Hz
fluid status	min, mean, max	ohms	15 min	?	0.25 Hz
HR	min, mean, max	beats/min	1 day, 1 hour, 5 min	beats/min	0.25 Hz
HR variability	SDANN	ms	1 day		
steps				cumulative count	~1 Hz
body temperature				celsius degree	0.25 Hz

Sampled on Hertz-scale

Challenges & Opportunities

"Challenges of aggregations & correlations"

Current data structure

Date & Time		HR (raw)
18NOV2016	07:00:03.885	84
18NOV2016	07:00:07.944	84
18NOV2016	07:00:12.008	81
18NOV2016	07:00:16.071	81
18NOV2016	07:00:20.135	83
18NOV2016	07:00:24.190	85
18NOV2016	07:00:28.253	89
18NOV2016	07:00:32.317	85
18NOV2016	07:00:36.374	85
18NOV2016	07:00:40.436	85
18NOV2016	07:00:44.499	83



Possible target data structure

Interval Start		Interval Stop	HR (mean)
18NOV2016	07:00	18NOV2016 07:05	83
18NOV2016	07:05	18NOV2016 07:10	81
18NOV2016	07:10	18NOV2016 07:15	85
18NOV2016	07:15	18NOV2016 07:20	82

- Who can aggregate the data according to given specifications?
- Probably need to consider noise filtering, etc. but how to reduce noise and variability and in what extend it will be accepted by regulatory authorities e.g. FDA?
- How to correlate activity data / events etc. with ECG sensor data, considering that measurement intervals are not the same, due to its devices „nature“?
- What about missing values (Null = no signal) ?

Challenges & Opportunities

"Re-thinking Data Privacy"



- ✓ EPRO Device lock (time to lock screen, re-identification process)
- ✓ What data will be transmitted? (Geolocation, IP ?)
- ✓ Retention time of data?
- ✓ Will you require an email-address to onboard a patient in your mobile application?
- ✓ Where will the data be stored? China, USA, Germany?
Any regulatory / legal requirements to be followed?



Challenges & Opportunities

Our four dimensions



Patient Engagement

- // Appropriate Training
- // Usability & User Acceptance to Devices
- // Long time to enroll patients
- // Communication via App is key to increase engagement

Data

- // Find and interpret rich data sources.
- // Manage large amounts of data despite hardware, software, bandwidth constraints
- // Merge data sources
- // Ensure consistency of data sets.
- // Create visualization to understand the data
- // build mathematical models using the data
- // present and communicate the data insights



Technology

- // Solution Architecture vs. Enterprise Architecture
- // Device Management (Installation of app on devices)
- // BYOD or Provisioning
- // Cloud Assessment
- // App – in-house development or outsourcing
- // Contract

Legal / Ethical

- // EPRO Device lock (time to lock screen, re-identification process)
- // What data will be transmitted?
- // Retention time of data?
- // Will you require an e-mail address to onboard patient in your mobile application?
- // Germany? Any Regulatory /legal requirement to be followed?



Softlanding

////////

Ideas are Cheap

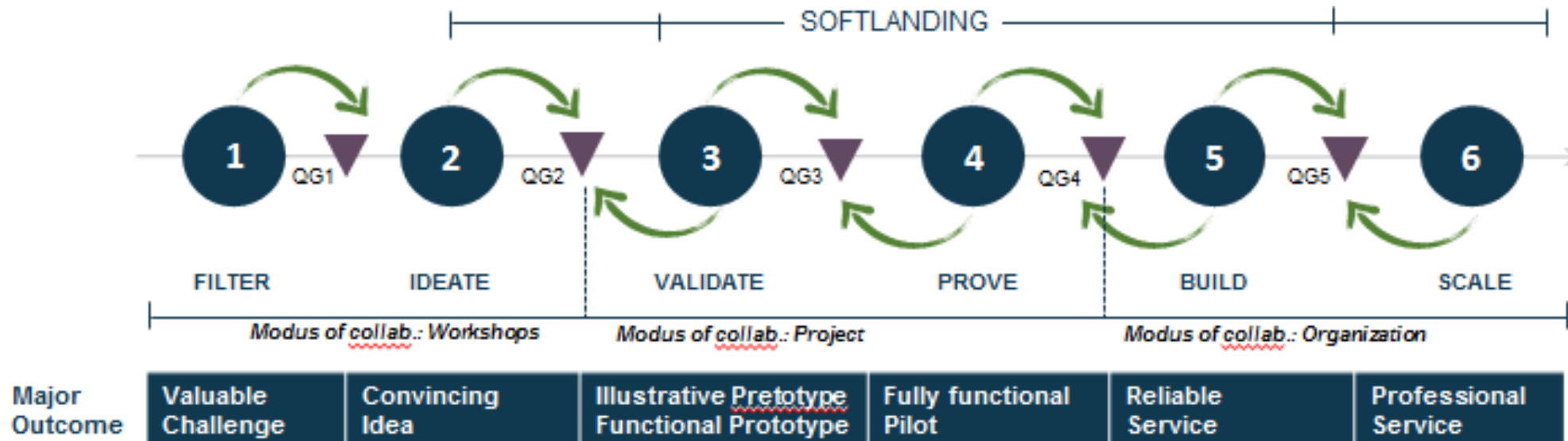


Landing them softly is a
skill

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Developing Stages

Terminology needs to be aligned



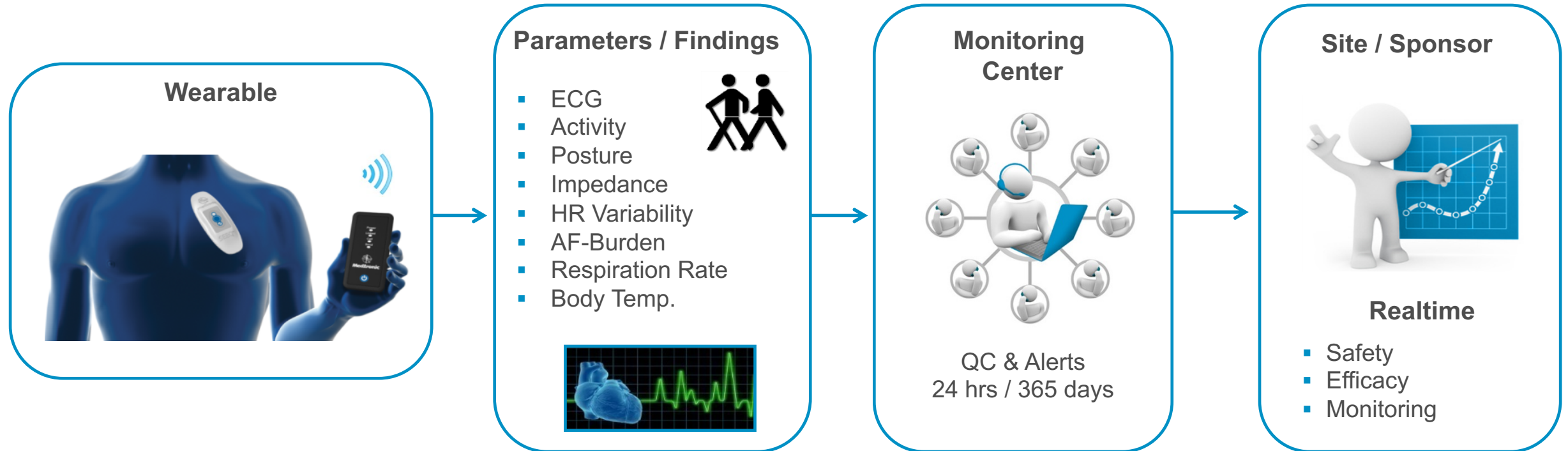


Conclusions



Conclusion

Paradigm Shift



Remote continuous monitoring of vital signs, activity and cardiac function allows **almost real-time monitoring of safety and efficacy** in clinical studies.

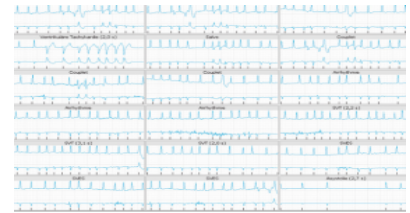
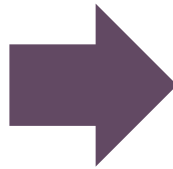
Conclusion



What is a digital clinical trial?

"Paradigm shift"

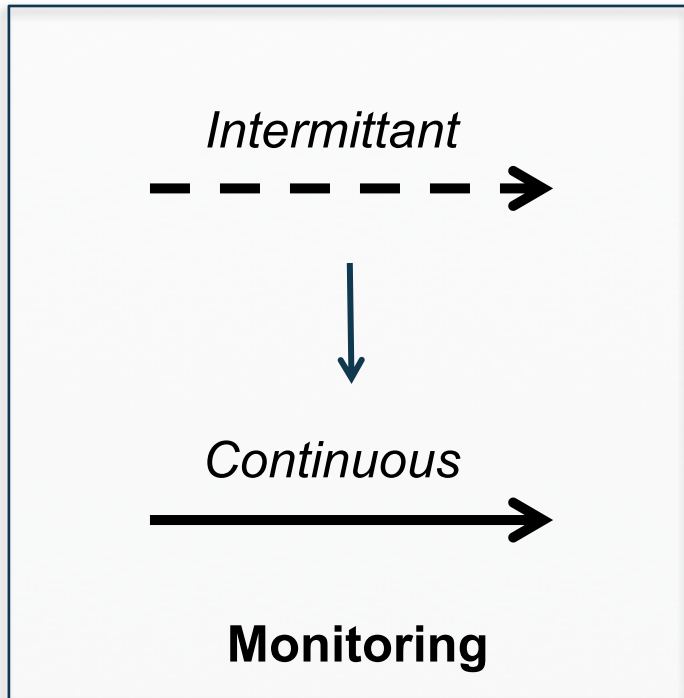
Traditional assessments versus new digital ways capturing data



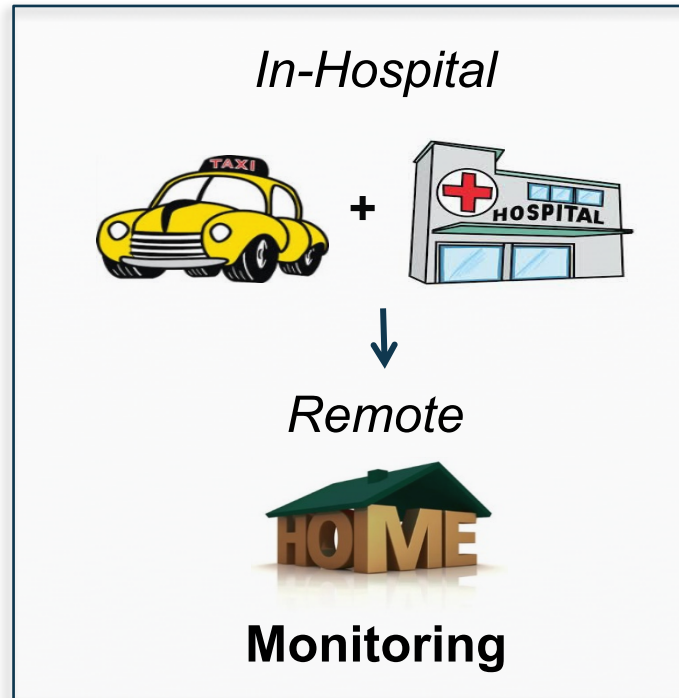
What is a digital clinical trial?

"Paradigm shift"

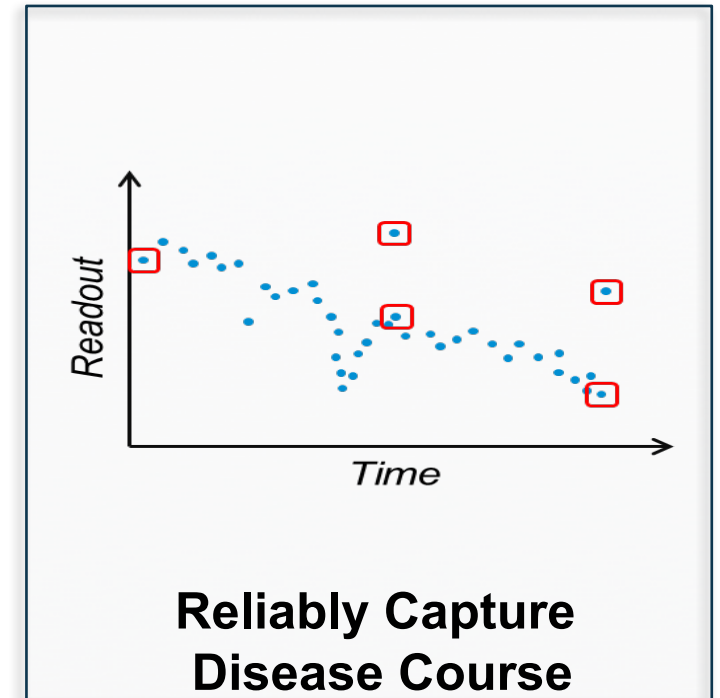
Better Profile
Drug Candidates



Reduce Patient's Burden



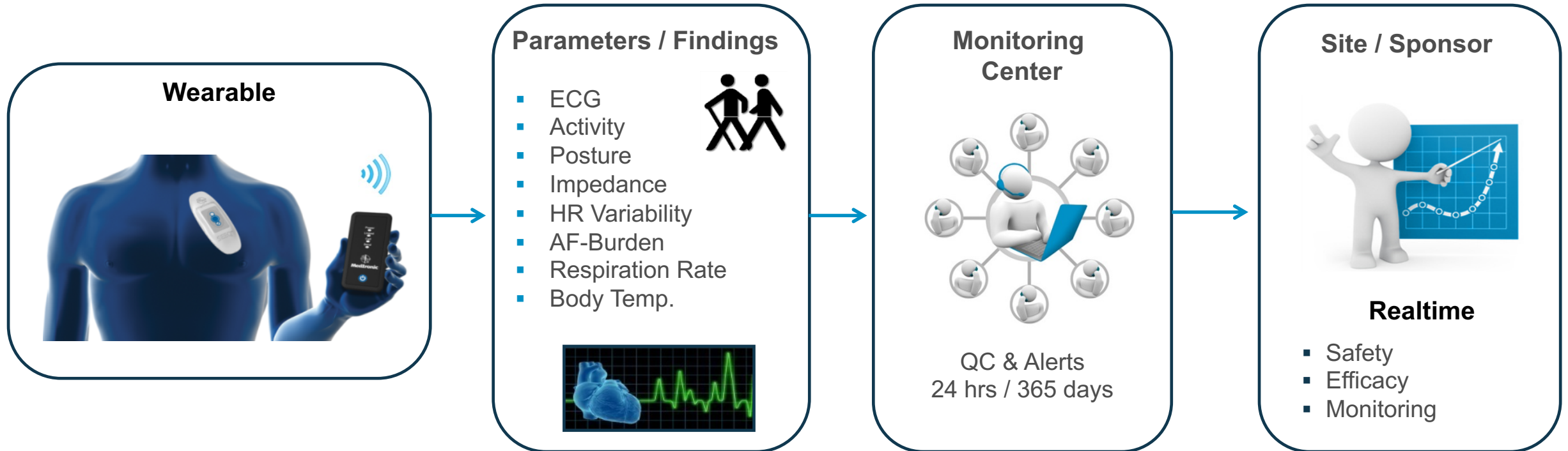
Reduce Costs
Save Time



Devices will induce **Paradigm Shift** and enable **Highly Innovative Trial Designs**

What is a digital clinical trial?

"Example from RealismHF: ECG Patch"

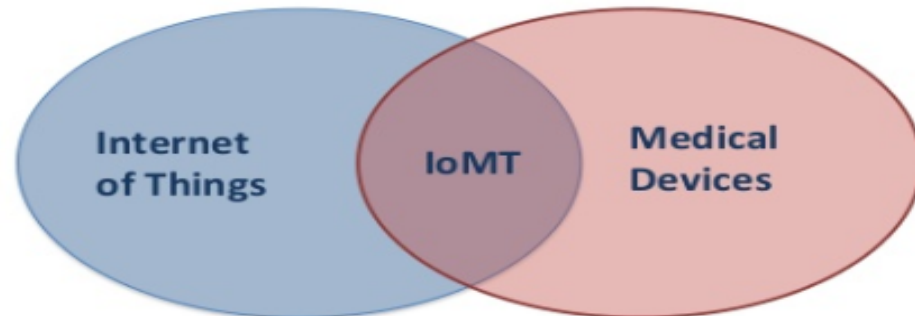


Remote continuous monitoring of vital signs, activity and cardiac function allows **almost real-time monitoring of safety and efficacy** in clinical studies.

Digital clinical trial buzzwords

"IoT – Internet of things"

- IoT enable healthcare professionals to monitor patients more effectively and use the data captured from the devices to assess any adverse events.
- IoT deliver insights from patients in between visits to clinical trial sites, while reducing costs along the way.
- IoT provide flexible opportunities for patients to engage with clinicians and vice versa, with a goal of better self-care.



IoT can:

- + be cost efficient
- + reduce Errors
- + improve Outcomes of Treatment
- + improve Disease Management
- + enhance Patient Experience