



ERICA

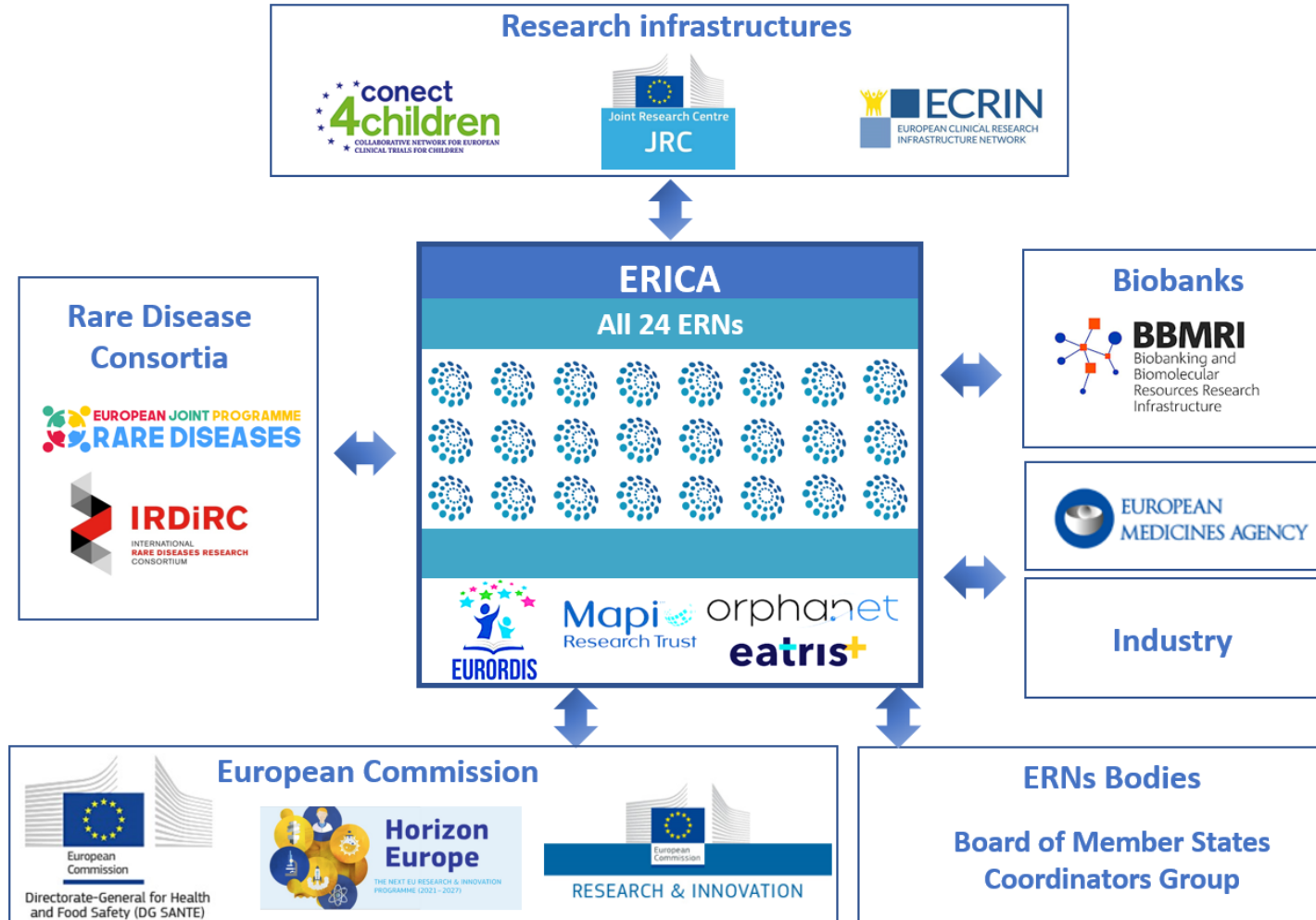
European Rare Disease Research
Coordination and Support Action

ERICA: WP3 Patient centred research and Patient Reported Outcome Measures

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Tuesday 14th September 2021



Types of Clinical Outcomes Assessments (COAs)

- **Patient-reported outcomes (PRO):** measurements based on data provided by patients, or proxies, regarding their health condition.
- **Clinician-reported outcomes (ClinRO):** based on a trained health-care professional's report following observation of a patient's health condition.
- **Observer-reported outcomes (ObsRO):** measurements based on an observation by someone other than the patient or a health professional who is in a position to regularly observe and report on a specific aspect of the patient's health.
- **Performance outcomes (PerfO):** measurements based on a task performed by a patient according to instructions administered by a health care professional.
- **Biomarkers:** physiologic, pathologic or anatomic patient characteristics measured by an automated process or algorithm as an indicator of normal biologic processes, pathologic processes, or biological responses to a therapeutic intervention

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WP3: Patient centered research

- to create a central repository of validated common and domain specific RD PCOMs/PROMs for ERNs
- to define priority areas for future PCOMs/PROMs development
- to support ERNs in the implementation of validated instruments for PCOMs/PROMs

PCOM: Patient Centered Outcome Measures

PROM: Patient Reported Outcome Measures

WP3: Patient centered research

- **Task 3.1: Strategic steering of identification, development and implementation of patient-centered outcome measures in ERNs-lead clinical research (VHIR, INSERM/Orphanet);**
- **Task 3.2: State of the art of available PCOMs/PROMs and overlap/gap analysis (INSERM/Orphanet; Mapi Research Trust, VHIR, EURORDIS, ERNs coordination teams);**
- **Task 3.3. Supporting ERNs on implementation of validated instruments for PCOMs/PROMs ((VHIR, INSERM/Orphanet, SERMAS, interested ERNs).**

Task 3.2. State of the art of available PCOMs/PROMs and overlap/gap analysis

- Orphanet and Mapi Research Trust will map existing validated tools for PCOMs/PROMs in RDs using ORPHANET alignments of RD nomenclature with other terminologies, including the expansion to functional consequences of RDs.
- Literature review and Survey among ERNs to identify successful use cases of PCOMs implementation / on-going initiatives for PCOMs development or validation

Task 3.2. State of the art of available PCOMs/PROMs and overlap/gap analysis

- Categorize RD given their **functional consequences and impact on daily life** - based on ORPHANET Disability Questionnaire
- Questionnaire completed by RD experts: clinicians and patients representatives during phone interviews
- **Functional consequences are indexed/annotated according to their severity, frequency and temporality**

Permanent limitation (activity limitation)
degree of severity
 (L: low, M: moderate, S: severe, C: complete, U: unspecified)
frequency
 (VF: very frequent: >80%, F: frequent: 30-80%, O: occasional: <30%)

Delay in acquisition of a skill
degree of severity
 (L: low, M: moderate, S: severe, U: unspecified)
frequency
 (VF: very frequent: >80%, F: frequent: 30-80%, O: occasional: <30%)

Transient limitation (acute episodes, ...)
degree of severity
 (L: low, M: moderate, S: severe, C: complete, U: unspecified)
frequency
 (VF: very frequent: >80%, F: frequent: 30-80%, O: occasional: <30%)

Loss of an ability limiting the activity
 (e.g. degenerative disease)

examples:

Are they impaired in their ability to receive a message?
 Are they impaired in their ability to learn?

1 – Are the patients affected in their abilities to understand and learn?

if your answer is « Yes », please reply to the questions below
 if your answer is « No », please go directly to question 2

Are they impaired in **seeing/watching**?
 Are they impaired in **hearing/listening**?
 Are they impaired in **learning**?
 Do they have difficulties **acquiring language** (oral language/ sign language)?
 Do they have difficulties **learning to read** (text/Braille)?
 Do they have difficulties **learning to write** (text/Braille)?

	Yes	No				
Are they impaired in their ability to receive a message?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	L (F), S (O)			
Are they impaired in their ability to learn?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	M (F)	L (O)		C (F)
1 – Are the patients affected in their abilities to understand and learn?		<input type="checkbox"/>				<input checked="" type="checkbox"/>
Are they impaired in seeing/watching?	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
Are they impaired in hearing/listening?	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
Are they impaired in learning?	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
Do they have difficulties acquiring language (oral language/ sign language)?	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
Do they have difficulties learning to read (text/Braille)?	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
Do they have difficulties learning to write (text/Braille)?	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>

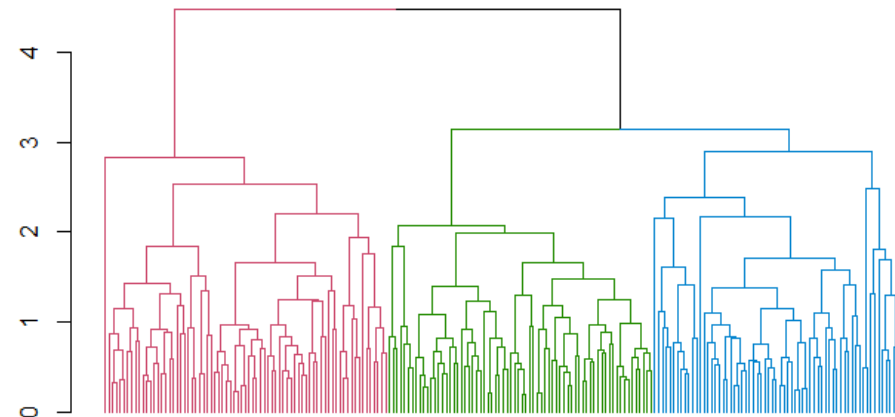
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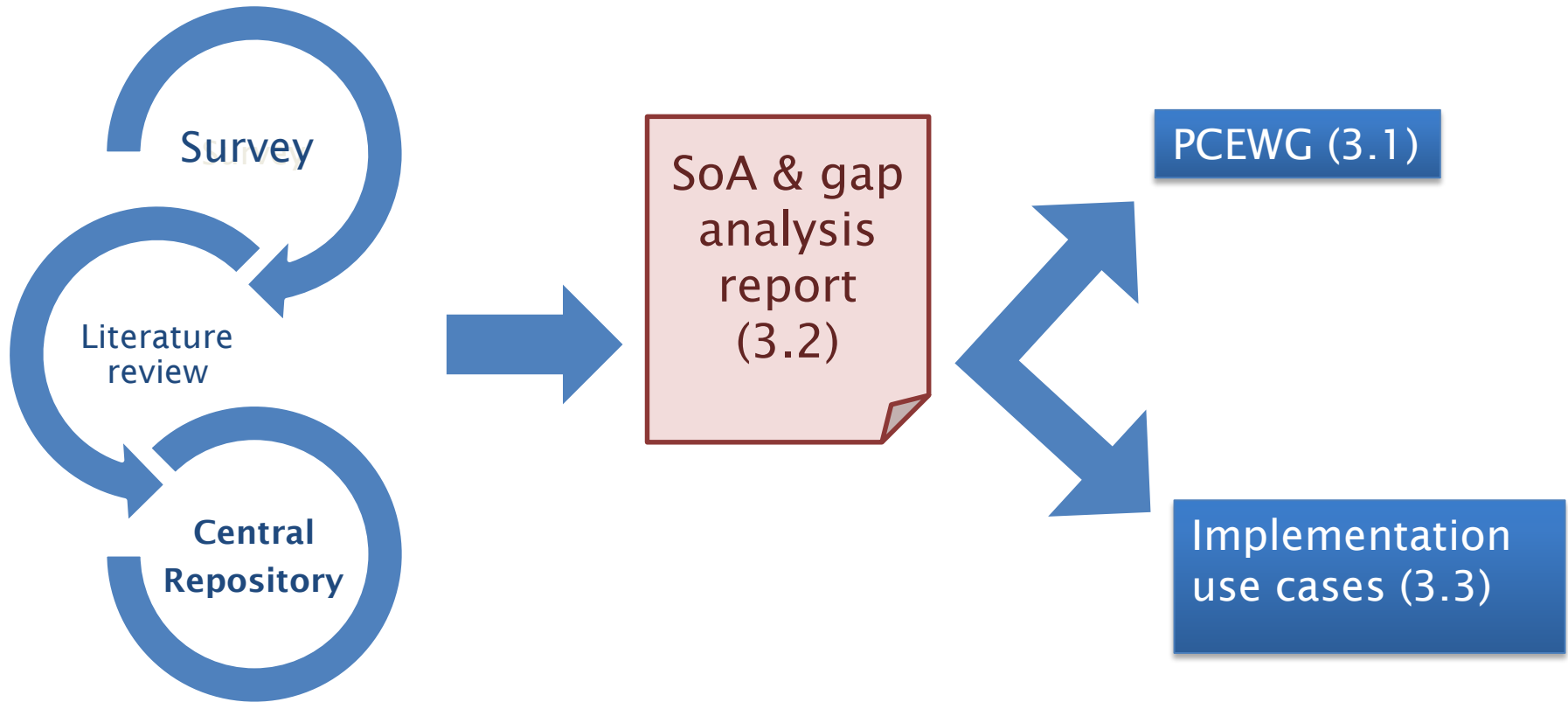
- Starting point: systematic accumulation of standardized information based on the Orphanet disability questionnaire (ICF adopted)
- 566 RDs coded for impact on function through a full set of 113 items grouped in 10 principal subjects describing patients' functional limitations:
 1. Understanding
 2. Communication with others
 3. Motor skills
 4. Self-care
 5. Sleeping/Staying awake
 6. Temperament and behaviour
 7. Moving around
 8. Interpersonal skills
 9. Daily activities
 10. Social life

Task 3.2. State of the art of available PCOMs/PROMs and overlap/gap analysis

- Categorize rare disease given their functional consequences and impact on daily life- based on ORPHANET Disability Questionnaire
 - Clusters of diseases sharing similar phenomenology
 - Functions and group of functions relevant to Clusters
 - Describe Patterns of functional impairment Shared within clusters

- Define coding rules of COA instruments (still based on these functions)
- Prioritize targeted functions to be captured
- Identify instruments that match the needs and gaps





Thank you!