Four Pillars for New Clinical Information Architectures

Data Management in the Digital Age



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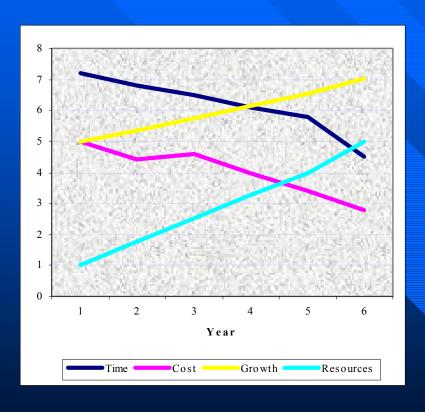
The Uphill Battle



- New Discovery technologies mean more/better candidates
- Bottlenecks in clinical testing
- New Genomic/Pharmacogenomic opportunities raise the demand even further:
 - Custom drug therapies
 - Profiling target patients
 - Shift from Empirical to
 Predictive Medicine



The Uphill Battle: By 2005



- Must maintain 7% growth with fewer blockbusters
- Must reduce Development time from 7 to 4.2 years
- Must increase patient and staff Resources by 400%
- Must cut development costs by 20-44%

Source: Pharma 2005: An Industrial Revolution in R&D -- Price Waterhouse Coopers

Future Emerging Technologies

Can These Find a Place in CDM?

(Original includes photo images of Aurrichio, a fictitious product that sends and receives email and MIT Media Lab prototypes for displaying computer screens on glasses and providing keyboards that can be sewn into clothing.)

Clinical DM Technologies: A Plodding History

- Trials grow in Volume and Complexity, yet most Processes remain mired in the past
- Industry is slow to adopt new technologies
- Clinical technology products often seem uninspired, uninviting and unexciting
- Vendor breakthroughs are rare and unlikely.

The Future of Clinical Data Management is all around Us

- Don Tapscott, The Digital Economy
- Nicholas Negroponte, Being Digital
- Michael Dertouzos, What Will Be
- Larry Downes and Chunka Mui, Unleashing the Killer App

(Original includes photo images of book covers)

5 Relevant Themes of the Digital Economy

- 1) Digitization
- 2) Knowledge
- 3) Convergence
- 4) Immediacy
- 5) Discordance



Theme 1 - Digitization



- □ Digital Economy:
 - Bits, not Atoms
- Clinical Research:
 - Voice data, voice recognition, digital images, gene maps -- not paper CRFs
 - All relevant information on the network
 - Digital Transactions (e.g., registrations, payments), Digital Information, THUS ...

Theme 2 - Knowledge



□ Digital Economy:

- The new economy is a knowledge economy

Clinical Research:

- Information will have intrinsic value
- Data management will be knowledge work
- Data will be mined, projected and reused
- Physicians and patients provide information
- Drug developers will pay for it -- THUS ...

Theme 3 - Convergence

□ Digital Economy:

Computers/content/communications come together.

Clinical Research:

- Technology/Information/Data Exchange becomes constant and real-time on a global scale
- Systems are indistinguishable from the process
- CRAs, Data Managers and Sites conference over clinical information
- Clinical Research occurs on internet time, THUS ...

Theme 4 - Immediacy



- □ Digital Economy:
 - Real-time business
- Clinical Research:
 - Real-time trials
 - Real-time analysis
 - Real-time program design
 - Rapid, Real time simulations
 - Real time go/no-go decisions, THUS ...

Theme 5 - Discordance



- Digital Economy:
 - Traumatic new social dialectics
 - Technology as disruptor/enabler
- Clinical Research:
 - CRAs
 - Data Managers

- Investigators
- CRCs
- Technology

"Telemonitors"

"Data Shepherds" /

Information Stewards

- **Information Providers**
- perations Managers
- Everywhere!

Why Aren't Clinical Applications Like Digital Economy Technologies?

- Too expensive
- Too regulated
- Too different
- Too scientific
- Too difficult to support reliably
- Too many -- Excuses!

Digital themes -- with Discordance -- are with us anyway!

The Solution

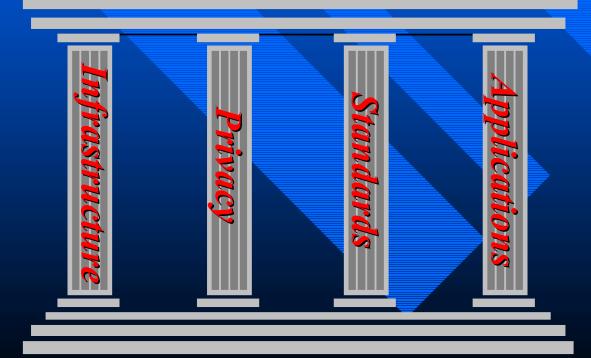
- Follow the Digital Economy as a guide for creating new Clinical Technologies:
 - Seamless, accessible Digital information
 - Retained, reusable knowledge
 - Rapid, flexible, personalized Applications
 - Real-time reinvention
 - Fun.

What We Need

- Dependable technology *Infrustructure* that works all the time for everyone
- Trusted Privacy and security solutions
- Common Standards for information structure and content
- Applications that can be rapidly assembled as components

Four Pillars for New Clinical Information Architectures

Information Architecture



Pillar 1 - Systems Infrastructure

- ☐ Fast, secure, open internet connectivity for all
- Prevalent, open-standards technology that works -even for non-technologists
- Improved information and knowledge bases
- Ability to accommodate a variety of "best fit" appliances for capturing and accessing data.
- Flexibility to adjust to preferences of the individual "community of one."

Infrastructure: The price of entry if you want to play.

Pillar 2 - Privacy & Security

- Industry and Physicians must be Proactive in ensuring patient privacy.
- Need a standardized industry solution for security and privacy with strong vendor tools
- HIPAA (HIPPA) will mandate privacy controls for health care, enabling integration of clinical research with health care delivery
- Increases opportunity: e.g., expanded repository for ongoing meta-analysis and outcomes research.

Privacy: The key barrier to convergence and knowledge.

Pillar 3 - Information Standards

- Embrace standards Learn from finance, utilities and telecommunications
- Plan studies with the end in mind -- collect only essential data elements
- Approach content standards from the output side consider what FDA, investigators, marketing, et al need
- Seek compatibility with tech and health industry standards (HL-7, IEEE, etc.) without increasing complexity
- Future trends point to secure XML E-Forms, not proprietary systems

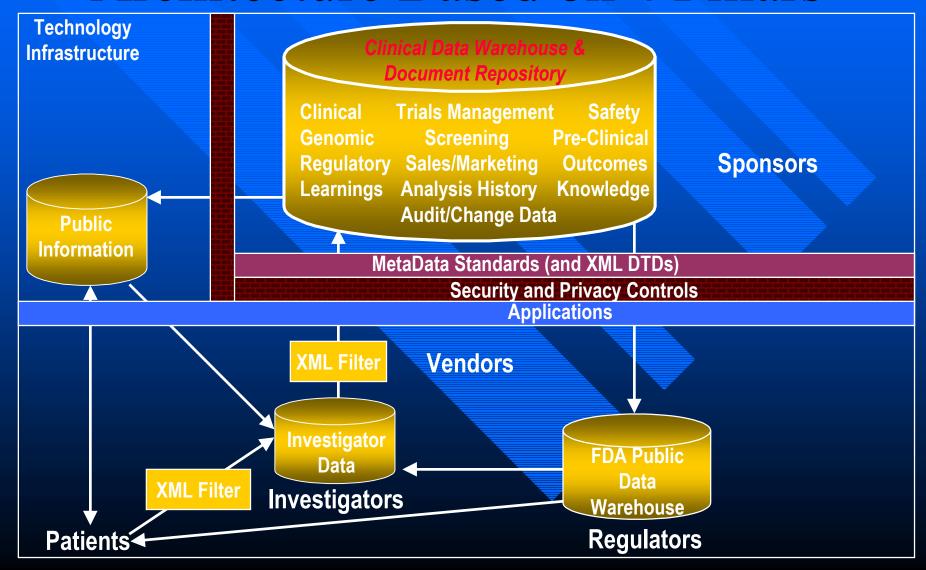
Standards: The common language for conducting digital business.

Pillar 4 - Plug & Play Applications

- Advanced, flexible, modular object components that can be rapidly combined and integrated within a broad information architecture without complex coding:
 - Capture data directly at the source
 - Operate on warehoused data, not discrete bespoke databases
 - Comprise all relevant processes including CRF data capture, Trial
 Management, Safety Monitoring, etc.
 - Serve a community comprising patients, sites, CROs, regulators and sponsors.

Applications: The pay-off.

A Clinical Information Architecture Based on 4 Pillars



Looking Forward: Clinical Data Management in the Digital Age

"The fundamental difference between a dog and a human being is simple: When you point with your finger, the dog looks at the tip."

--Nicholas Negroponte







In Conclusion



The Only Limit to our Realization of tomorrow will be out doubts of today. Let us move forward with a strong and active faith.

-- F. D. R.

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