

DSMP

Data and Safety Monitoring Plan

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Outline

Purpose

When are they needed?

What do they contain?



☐ New York-Presbyterian

Purpose

Objective

Monitoring of:

- safety of study participants
- quality of research data
- appropriate conduct of the clinical research

Distinct from:

- IRB oversight
- scientific review

When is a DSMP necessary?

In general...

All studies that involve human subjects

Level of monitoring depends on study's

- potential risk
- size
- Complexity

Monitoring level may be decided by

- study sponsor
- IRB
- institution



Type of plans

Embedded in the protocol

- minimal risk
- monitoring done by study PI/team

Separate DSMP

- greater than minimal risk
- monitoring done by Data Safety and Monitoring Board (DSMB)

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Who should write/review the plan

Study team

- Pl
- study statistician
- other relevant team members

Plan written for DSMB use

- needs to be approved by DSMB
- provides guidance to study team/DSMB
- submitted to the IRB

WCM Institutional policy/guideline

Large, multi-site, randomized, blinded, and Phase III trials

Phase I and II studies for which risk to the subjects appears unusually high

Phase I and II studies for which the principal investigator is the IND/IDE sponsor or manufacturer and independent monitoring is required to maintain the integrity of the trial

Gene transfer studies

Studies with vulnerable populations or risky interventions/procedures or any other factors that might indicate high morbidity/mortality end-points

Studies with high risk of toxicity or other major medical risks

WCM Institutional policy/guideline

Always "write" a DSMP for human subjects

Determine whether the WCM DSMB is required

http://researchintegrity.weill.cornell.edu/DSMB.html

Preparing a DSMP

Participant safety

| DSMP Component | Examples of Monitoring Activities |
|--|---|
| specific subject safety parameters | vital signs, weight, safety blood tests, cardiac status, anxiety, depression scores, adverse events, etc. |
| frequency of subject safety observations | weekly telephone FU, monthly appointments, observations of participant while in clinical setting, each treatment cycle, etc. |
| party responsible for safety monitoring | PI, study coordinator, safety monitor, independent monitor, DSMB, etc. |
| subject stopping rules | exclusion criteria, including adverse response to study procedure; pregnancy; specific AE grade; cardiac irregularity; non-compliance; etc. |
| study stopping rules | unanticipated problems involving risk to subjects or others (UPIRTSO), unexplained adverse outcomes, life threatening adverse events, |
| reporting mechanisms (i.e. deviations, adverse events, UPIRTSOs) | plans for reporting to IRB, FDA, sponsor, participating sites, DSMB, etc. |

Data integrity

| DSMP Component | Examples of Monitoring Activities |
|--|--|
| specific data items to be reviewed | participant eligibility, data is accurate and complete, calculations are standardized and performed properly |
| frequency of monitoring data: points in time, or after specific number of patients | First 3 subjects and every 20 th subject, monthly, quarterly, annually, etc. |
| individual responsible for data monitoring | PI, study coordinator, safety monitor, independent monitor, data manager, statistician, etc. |

Participation privacy

| DSMP Component | Examples of Monitoring Activities |
|---|--|
| Under what conditions (time and place) will subject be consented, interviewed, or telephoned? | observations of consenting process, interviewing, or clinical visit performed quarterly on 3 subjects request input from 5 subjects related to their experiences regarding privacy expectations etc. |

Data confidentiality

| DSMP Component | Examples of Monitoring Activities |
|--|--|
| What are the conditions that will protect the confidentiality of the data? | Check for locked file cabinets, secure electronic records, secure location with protected health information is stored, etc. |

Product accountability

| DSMP Component | Examples of Monitoring Activities |
|--|---|
| Who is responsible for obtaining, storing, preparing, administering, or disposing of the study drug or study device? | research pharmacy, PI, central pharmacy, research laboratory, nursing, etc. |
| Who is responsible for overseeing product accountability? | |

Study documentation

| DSMP Component | Examples of Monitoring Activities |
|-----------------------|---|
| study file management | study file management guidelines and checklists for monitoring (sample of study files annually, etc.) |

Study coordination

| DSMP Component | Examples of Monitoring Activities |
|---|--|
| roles and responsibilities are clarified, education needs are addressed, planned meetings or communications with documented meeting notes/minutes | periodic debriefing to determine if expectations are clear and if educational needs exist scheduled meetings are on the calendar, and meeting outcomes are noted and available to staff etc. |

DSMP specifics

GOAL: provide a framework by which to reduce harm or injury to participants, in order to further promote a level of conscientious conduct.

Minimum required

Assessment of level of risk

A plan for safety review

- anticipated AÉs
- AE grading and attribution
- unanticipated and/or serious AE reporting
- periodic reporting of AEs

Ensure compliance with principles of informed consent

Assessment of protocol compliance, including violations/deviations

A plan for compliance with privacy related regulations (e.g., HIPAA)



Additional considerations

Prospective stopping rules

- unacceptable risk (toxicity stopping rule)
- strong evidence of futility/efficacy (interim analyses)

Plan for on-going review

- information to be provided
- review frequency
- rationale for info provided and frequency

Study enrollment

- observed accrual rate compared to expected accrual rate
- eligibility rate

Safety review questions

- reasons for drop-outs
- AEs too frequent or severe?
- should the protocol be modified?



Questions?

Please direct any questions to DSMB@med.cornell.edu for a prompt response!