Good practice in aDSM within mSTR operational research.

7th webinar of the Virtual Medical Consilium (VMC) within framework of the Regional operational research on introduction of modified fully-oral shorter treatment regimens for DR-TB (mSTR)

June 4, 2021 Liga Kuksa aDSM
active Drug Safety Monitoring

aDSM components

- 1. Clinical monitoring
 - <u>active and systematic</u> clinical and laboratory assessment during treatment to detect drug toxicity and AEs
- 2. Management of AEs in a timely manner
- 3. Systematic and standardized recording and reporting of AEs
 - Data collection to include safety data
 - At least all SAEs reported and assessed for causality
 - Close coordination between national TB and PV structures

aDSM Level of drug safety reporting

"Intermediate Package«

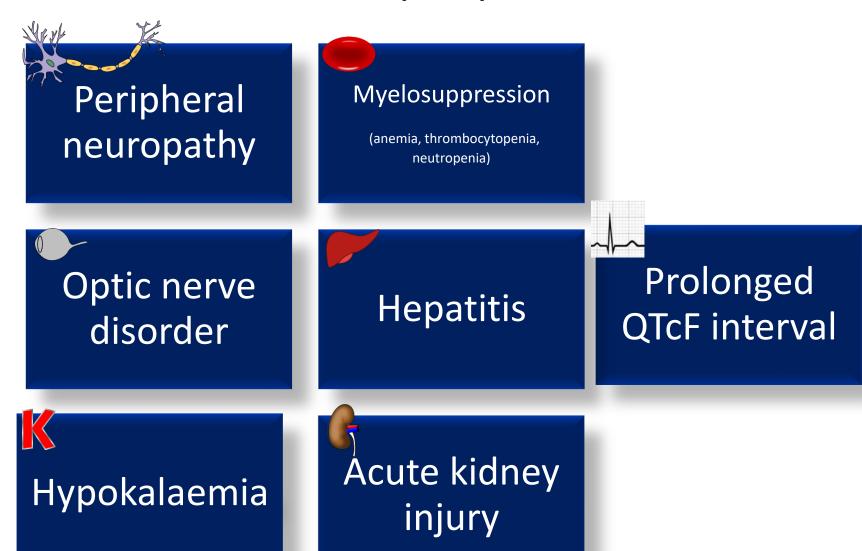
that includes recording and reporting of

- all Serious Adverse Events (SAEs), and
- Adverse Events of Special Interest (AEIs)

A Serious Adverse Event (SAE) is

- any untoward occurrence in a patient given a pharmaceutical product and that at any dose:
 - Results in death,
 - Is immediately life-threatening,
 - Requires inpatient hospitalisation or prolongation of hospitalisation.
 - Results in persistent or significant disability/incapacity
 - Is a congenital anomaly/birth defect
 - Is considered otherwise medically significant and requires intervention

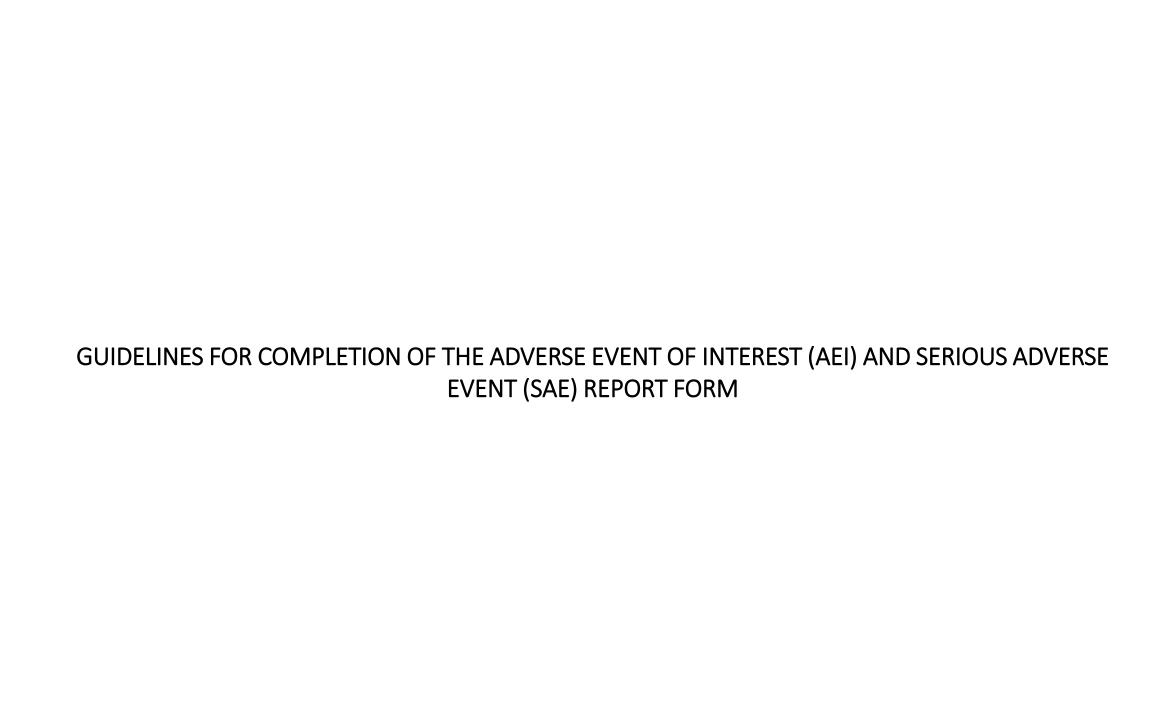
AEs of interest (AEI) within mSTR OR





Severity Grading Scale

- It is based on the standardized and commonly used toxicity table of NIAIDS the Division of Microbiology and Infectious Diseases (DMID) grading system, complemented with a selection of terms from the NCI's Common Terminology Criteria for Adverse Events (CTCAE) scale.
- Severity of an Adverse Event is the evaluation of its intensity based on the scale detailing signs and symptoms and/or lab values matching with what is generally admitted as being a mild, moderate, severe or life-threatening intensity for the condition.



For parameters not included in the table, the following general definitions apply:

Grade 1 - MILD	Grade 2 - MODERATE	Grade 3 - SEVERE	Grade 4 - LIFE-THREATENING		
Transient or mild discomfort	Mild to moderate	Marked limitation in			
(<48 hours); no medical	limitation in activity -	activity, some assistance	Extreme limitation in activity,		
	,	usually required; medical	significant assistance required;		
required	needed; no or minimal	intervention/therapy	significant medical		
	medical	' '	intervention/therapy required,		
	intervention/therapy	possible	hospitalization or hospice care		
	required		probable		

Example #1

• Patient started treatment on 26.10.2020 with QTcF was 415 msec after 4 month of treatment(25.02.21) QTcF is 502 msec



Grade 3

Example #2

- Patient, 17 years old, with primary pulmonary TB, smear and culture positive; MDR (HR) FQ sensitivity. There are no concomitant diseases.
 Treatment started on 04/05/2021 with regimen # 1: Bdq Lfx Lzd Cfz Cs in standard doses.
- The patient is compliant to treatment, but over the past 10 days, she cries a lot, does not come into contact, sits in a corner and cries.



Grade 1?

Grade 2?

Grade 3?

Grade 4?

Which adverse event?

For parameters not included in the table, the following general definitions apply:

Grade 1 - MILD	Grade 2 - MODERATE	Grade 3 - SEVERE	Grade 4 - LIFE-THREATENING
Transient or mild discomfort	Mild to moderate	Marked limitation in	
(<48 hours); no medical intervention/therapy required	limitation in activity - some assistance may be needed; no or minimal medical intervention/therapy required	activity, some assistance usually required; medical intervention/therapy required, hospitalization possible	Extreme limitation in activity, significant assistance required; significant medical intervention/therapy required, hospitalization or hospice care probable

Example #3

- A 46-year-old female with new pulmonary MDR-TB, resistant to R, H but sensitive to FQ
- 29.12.20 started treatment with Lfx 1000 mg, Bdq 400/200mg, Lzd 600mg, Cfz 100 mg, Cs 750 mg. –
- 18.01.2021 registered severe pain in joints and muscles what started to impact daily activities. NSAID was prescribed as well



	nd SAE Report Form WHO Euro						Anne	x #8
	Adverse Ever	nt of Intere	st (AEI) and S	Serious Adverse	Event (SAE)	Report Form	(part I)	
	Country	C)	Study site	0	Participant ID	0 0 0 0	
A Visit	Information				nr. of month			
B AEI/	SAE information							
B1	Event onset date		dd/mm/yyyy					
B2	Event end date		dd/mm/yyyy					
В3	Term of AE (select	only ONE		If other, s	pecify			
B4	Is Adverse event s	seriouse?						
B4.1	If YES, seriousnes	s criteria:	_]			
B5	Severity Grade							
B6	Event outcome							
C Rele	vant laboratory tes	ts		Date (dd/mm/yyyy)	Result (un	it)	Reference range	
								╕

SAE/AEI form

- The AEI/SAE Report Form is designed to allow for a proper case assessment and appropriate reporting in accordance with the applicable international standards (ICH E2B). The available fields must be completed as much as possible with the relevant information available at the time of reporting.
- In case of the any serious adverse event or **grade 3 and grade 4 adverse** event of interest (7 AEIs), the SAE/AEI form should be completed
- The form contains the essential information that is required to conduct proper causality assessment and is user friendly (most fields are just checkboxes)

	B1 Event onset date	/ dd/mm/yyy	yy B2 Event end date//	dd/mm/yyyy
B3 Term of AE	(select only ONE)			
	1 Peripherial neuropahty	2 Myelosupression	3 Prolonged QT interval 4 Hepatitis	5 Optic neuritis
	6 Hypokalemia	7 Acute kidney injury	8 Nausea/vomiting 9 Diarrhea	10 Arthralgia
	11 Vertigo	12 Hearing loss	13 Headache 14 Sleep disturbance	15 Abdominal pain
	16 Anorexia	17 Gastritis	18 Depression 19 Tinnitus	20 Allergic reaction
	21 Skin rash	22 Seisure	23 Hypothyroidism 24 Psychosis	25 Suicidal thought
	26 Other (specify)			

SAE/AEI form

- If all signs and symptoms experienced by a patient can be grouped under a single diagnosis, diagnosis should be reported by selecting one of the Adverse Event Terms under section "B".
 - In the situations, where diagnosis is not feasible at time of reporting, and/or event other than listed has occurred, the other term or the signs and symptoms should be listed under "other" in section B.
- Please note that only one AE term should be selected or listed.
- In case of more than one adverse event another AEI/SAE reporting form should be completed separately.

	and SAE Report Form R WHO Euro						Annex #8
	Adverse Event of Inter	est (AEI) and	Serious Adve	erse Event (S	AE) Report I	orm (part II)	
	Country	0		Study site	0	Participant I	0 0 0 0
AEI	I/SAE information	Adverse event (fr	rom part I)	0	1	f other specify	
D D1	Suspected drug	1-Levofloxacin	2-Bedaquiline	3-Linezolid	4-Clofazimin	e 5-Cycloserine	6-Delamanid
	Daily dose						
	Batch numb						
	Treatment start date dd/mm/yy						
	Treatment stop date dd/mm/yy					-	
D2	Action taken in response to	D A					
If c	dose reduced, New daily dose (g)					
	On dd/mm/y	ууу					
	If drug interrupted From dd/mm/y	/vv				1	
	To dd/mm/y					i 	
	If drug permanently withdraw On dd/mm/y						
D3	Event diminished after drug stopped/dose reduce	d?					
D4	Event reappeared after drug/dose reintroduction?						
D5	Causality assessment: Is AE related to drug?						
	if other drug, specif	·y:					
	Other causal factors or Inte	racting Drugs					
E Cor	ncomitant medications (Inc Drug name (INN)	luding the drugs to Daily dose (g) ar				_	file) stop date Continue
	Brag Hame (1111)	Total Good (g) an	Ta Touce Indice		Tredement be	Tredement	Stop date Contanded
		5					
Form	Completion Name	of person completing	form		Date Fo	orm completed	dd/mm/yyyy

I исследуемое нежелательное явление (ИНЯ) или серьезное нежелательное явление (СНЯ)

Код	участника	
4		

2 - Улучшение

Клиническое

Месяц лечения	Į.
0	9
1	1
2	1
3	1
4	1,
5	2,

вт. дата начала ня	12/15/2020	в4. Является ли НЯ серьезное?	2- Несерьезное 🔍
В2. Дата окончания явления	M/D/YYYY	В.4.1. Если " ДА", критерия серьезности:	~
ВЗ. Наименование НЯ	2 - Миелосупрессия 🔍	В5. Степень тяжести	2 - Степень II 🔻 🗸

Подозреваемое лекарство (укажите все препараты схемы лечения)

ВЗ.1. Если другое, указать

D1. Подозреваемое лекарство		D2. Меры, принимаемые в ответ		D3. НЯ ослабло после отмены/снижения дозы	ы?	D4. НЯ снова возникло после повторного назначения преп/ доз	Ы	D5. Оценка причинно-следственной связи: Связано с препаратом?
1 - Lfx	•	1 - Доза оставлена без и	•	9 - н/п	•	9 - н/п	•	9 - н/п
2 - Bdq	•	1 - Доза оставлена без и	•	9 - н/п	•	9 - н/п	•	9 - н/п
3 - Lzd	•	2 - Доза снижена	•	1- ДА	•	1- ДА	•	1- ДА
4 - Cfz	•	1 - Доза оставлена без и	•	9 - н/п	•	9 - н/п	•	9 - н/п
5 - Cs	•	1 - Доза оставлена без и	•	9 - н/п	•	9 - н/п	•	9 - н/п
	•		•		•		•	

Вб. Исход явления

Condition term	Grade 1	Grade 2	Grade 3	Grade 4
Anaemia	10.5 - 9.5 g/dL	9.4 - 8.0 g/dL	7.9 - 6.5 g/dL	< 6.5 g/dL
	[105 - 95 g/L]	[94 - 80 g/L]	[79 - 65 g/L]	[< 65 g/L]

Comments



The transformation is pretty bad, but the worst part is filling out the paperwork for the adverse events.