The long and winding road of digital outcome: From academic study to regulatory qualification

Prof. Laurent Servais, Oxford University





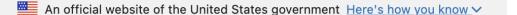




Conflict of interest

Laurent Servais has given consultancy in the digital field to Roche-Sysnav-Aparito-Dyne and Biogen

LS hold a patent on a method to estimate energy expenditure at the upper limb level with no financial return







digital outcome

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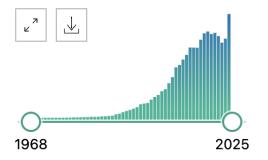
MY CUSTOM FILTERS LA

132,063 results

Cite

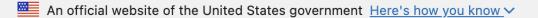
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RESULTS BY YEAR



TransCatheter aortic percutaneous corona replacement and cor valve stenosis and co international, multice controlled trial.

Kedhi E, Hermanides RS, Amat-Santos IJ, Andreas







outcome measures wearable device

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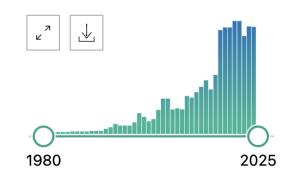
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RESULTS BY YEAR



2,335 results

Share

Patient Preferences in Cochle

Freeman MH, Patro A, Lindquist NR,

Moberly AC, Haynes DS, Bennett MI Cite

Otol Neurotol. 2025 Jan 1;46(1):54-

PMID: 39627903

INTERVENTIONS: Survey administer Sources of information regarding CI deciding on a manufacturer, and ma

THE LANCET Digital Health IF: 23.8

npj | Digital Medicine

IF: 15.35

| OPEN | ACCESS | 8 | 1 | 24 | Digital

Digital Biomarkers





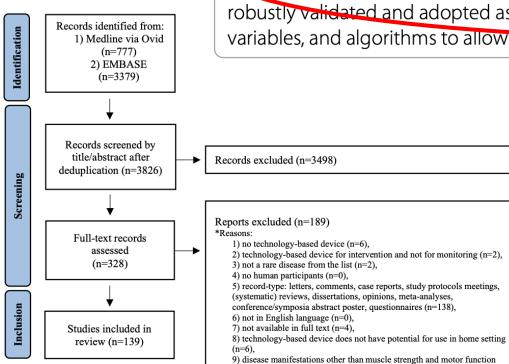
International Journal of Digital Healthcare





Abstract

Developing drugs for rare diseases is challenging, and the precision and objectivity of outcome measures is critical to this process. In recent years, a number of technologies have increasingly been used for remote monitoring of patient health. We report a systematic literature review that aims to summarize the current state of progress with regard to the use of digital outcome measures for real-life motor function assessment of patients with rare neurological diseases. Our search of published literature identified 3826 records, of which 139 were included across 27 different diseases. This review shows that use of digital outcome measures for motor function outside a clinical setting is feasible and employed in a broad range of diseases, although we found few outcome measures that have been robustly validated and adopted as endpoints in clinical trials. Future research should focus on validation of devices, variables, and algorithms to allow for regulatory qualification and widespread adoption.



assessed (e.g., cognitive, feeding, exclusively sleep, voice) (n=6); note,

11) studies assessing the impact on carers or exclusively on healthy

10) more than three diseases (of the same or different families assessed or

12) studies presenting exactly the same data than another included study

studies of eye movement excluded,

population (n=1),

(n=3).

disease of interest is part of a mixed group (n=21).

Poleur et al.

Orphanet Journal of Rare Diseases (2023) 18:224

https://doi.org/10.1186/s13023-023-02813-3

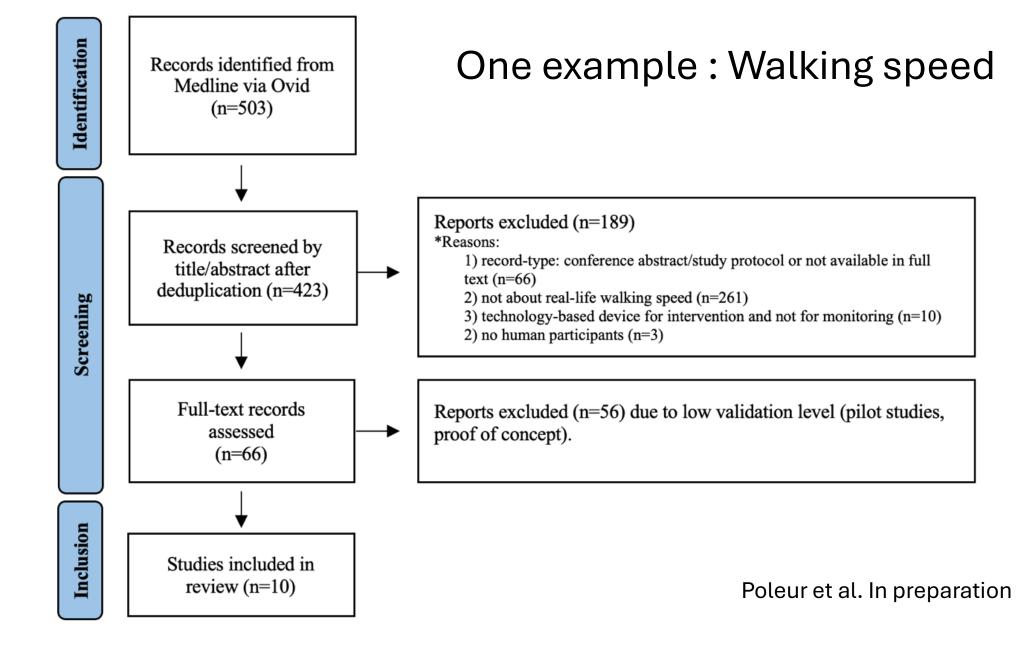
Orphanet Journal of Rare Diseases

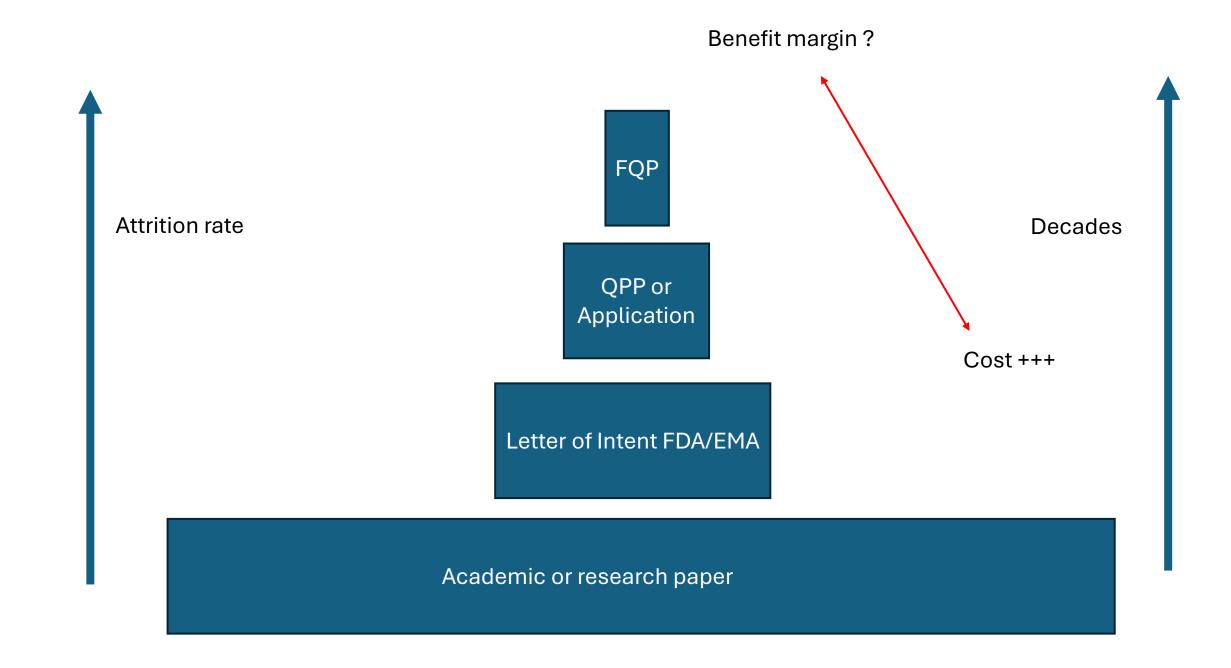
REVIEW

Open Access

The use of digital outcome measures in clinical trials in rare neurological diseases: a systematic literature review

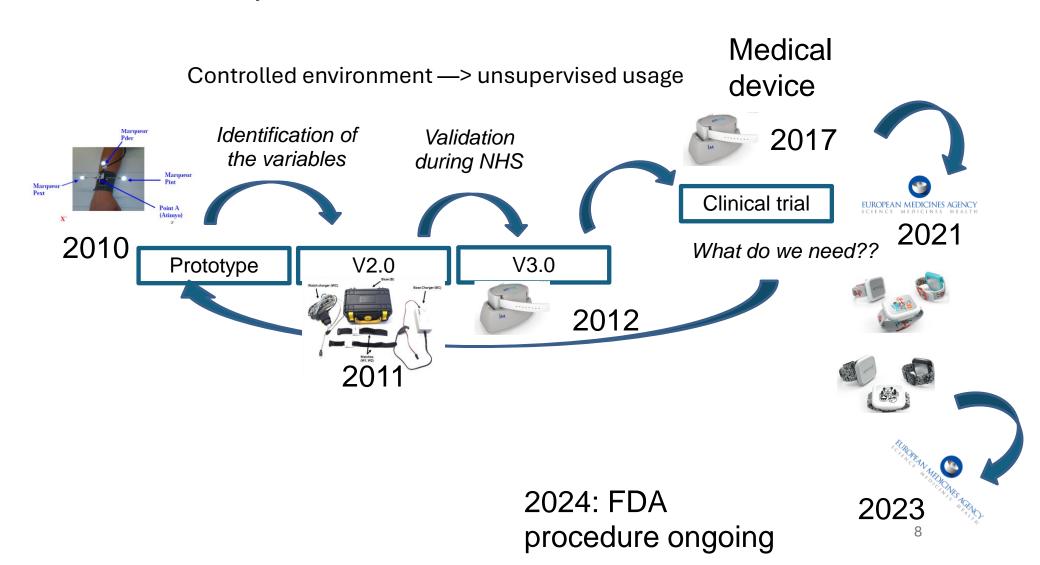
Margaux Poleur^{1,3,4*}, Theodora Markati² and Laurent Servais^{2,3}





The long and winding road of SV95C

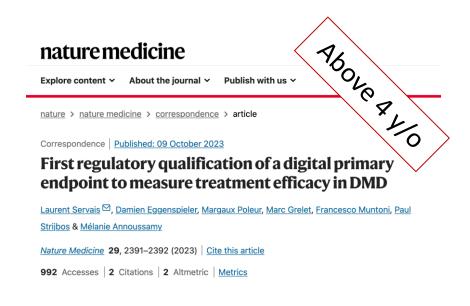
Technical development timeline

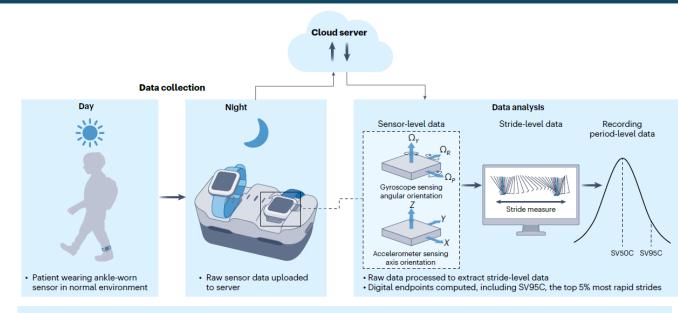


What is SV95C?

Stride velocity 95th centile (SV95C):

a measure of top ambulatory speed of a patient in real life





Continuous data collection in the real-world setting with 2 wearable inertial sensors (on each ankle)

www.nature.com/scientificreports

scientific reports

Check for updates

open Evidentiary basis of the first regulatory qualification of a digital primary efficacy endpoint

Laurent Servais^{3,250}, Paul Strijbos³, Margaux Poleur⁴, Andrada Mirea^{5,6}, Nina Butoianu⁷, Valeria A. Sansone⁸, Carole Vuillerot⁸, Ulrike Schara-Schmidt¹⁰, Mariacristina Scoto¹¹, Andreea M. Seferian¹², Stefano C. Previtali¹³, Már Tulinius¹⁴, Andrés Nascimento^{15,16}, Pat Furlong¹⁷, Teji Singh¹⁸, Roxana Donisa Dreghici¹⁹, Nathalie Goemans²⁰, Eugenio Mercuri^{21,22}, Volker Straub²³, Maitea Gurdi Ormazabal²⁴, Jessica Braid²⁴, Francesco Muntoni¹¹, Alexis Tricot²⁵, Mélanie Annoussamy²⁵ & Damien Eggenspieler²⁵

Key questions asked by regulators

Device

- ✓ Medical device
- ✓ CE-labelled
- ✓ Sensors properties
- ✓ Sensors qualibration
- ✓ Usability
- ✓ Compliance
- ✓ Data integrity

Outcome

- ✓ Qualitative study
- ✓ Context of use
- ✓ Clinical validity
- ✓ Analyticial validity
- ✓ External validity
- ✓ Reliability
- √ Recording period
- √ ((variability))-interference
- ✓ MCID
- ✓ Sensitivity to positive change
- ✓ Sensitivity to negative chance
- ✓ Normative values
- ✓ Discrimination between groups

Height and Dead

The measure is very reliable (ICC of 0.99999)

The measure is very sensitive to change SRM >>1 (especially between 0 and 18 years)

You can easily demonstrate that people with height < 100 cm have a 15 years longer life expectancy than people > 170 cm

You can easily measure MCID with an anchor based method

You can easily show that height is inversly correlated with the most frequent causes of death (Heart infarction- stroke-cancer-suicide...)

So- Height qualifies as a good surrogate outcome for death- and could be used as a primary endpoint for a drug that stops growth in a subgroup of patients (0-15 years) who are unlikely to reach the primary endpoint within a year....

In several conditions (Duchenne- dermatomyositis)-drug that stop the increase of height delay the age at death...



Key opportunities for clinical development

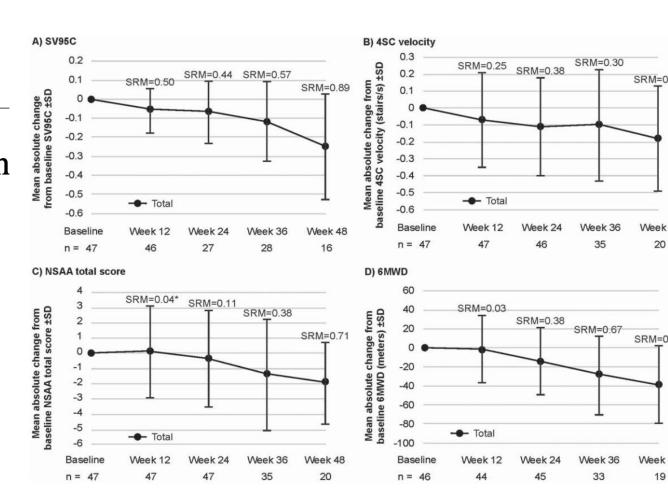
1. Early detection of decline

Journal of Neuromuscular Diseases 11 (2024) 701–714 DOI 10.3233/JND-230188 IOS Press

Research Report

Stride Velocity 95th Centile Detects Declin in Ambulatory Function Over Shorter Intervals than the 6-Minute Walk Test or North Star Ambulatory Assessment in Duchenne Muscular Dystrophy

Michael Rabbia^a, Maitea Guridi Ormazabal^b, Hannah Staunton^c, Klaas Veenstra^b, Damien Eggenspieler^d, Mélanie Annoussamy^d, Laurent Servais^{e,f} and Paul Strijbos^{b,*}



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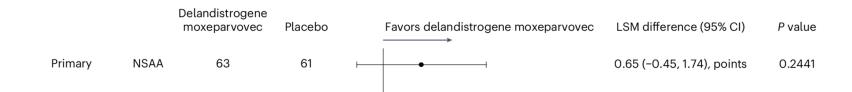
Article Open access Published: 09 October 2024

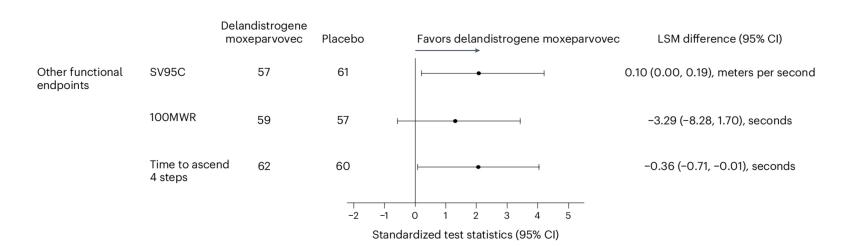
AAV gene therapy for Duchenne muscular dystrophy: the EMBARK phase 3 randomized trial

Jerry R. Mendell [™], Francesco Muntoni, Craig M. McDonald, Eugenio M. Mercuri, Emma Ciafaloni, Hirofumi Komaki, Carmen Leon-Astudillo, Andrés Nascimento, Crystal Proud, Ulrike Schara-Schmidt, Aravindhan Veerapandiyan, Craig M. Zaidman, Maitea Guridi, Alexander P. Murphy, Carol Reid, Christoph Wandel, Damon R. Asher, Eddie Darton, Stefanie Mason, Rachael A. Potter, Teji Singh, Wenfei Zhang, Paulo Fontoura, Jacob S. Elkins & Louise R. Rodino-Klapac

Nature Medicine (2024) Cite this article

2. Avoid the risk of false negative

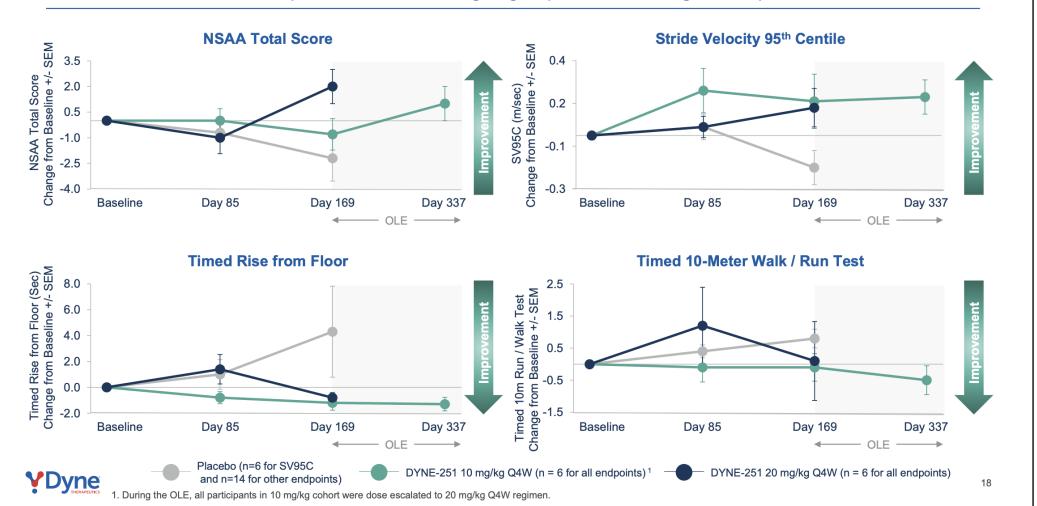




3. Early detection of clinical benefit

Improvements Across Multiple Functional Endpoints in Multiple Cohorts

Baseline Values Inform Interpretation of Data; Ongoing Exploration of Longer Timepoints



4. Application in other conditions like Multiple Sclerosis

Adherence

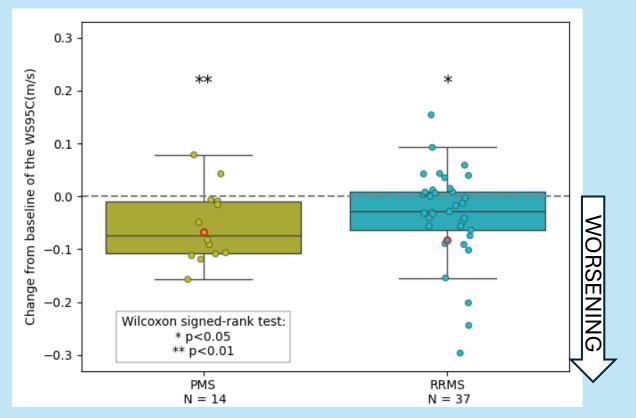
Reliability

Known-group validity

Convergent validity

Ability to detect change

Walking Speed 95th centile



Participants who experienced relapse(s) between visits

5. The challenge of measuring ambulatory function in very young patients



Ask him to do something and hope that he does exactly what you want...



It would be best to not ask him anything and let him do what HE wants...

Baseline characteristics of all subjects

population	N	median age (sd) (y/o)	age range (y/o)
Patient	28	2.98 (1.0)	1.34 - 4.95
Control	35	2.72 (1.05)	1.07 - 4.86

Excellent compliance with DHT wear

Number and percentage of subjects with more than 50 and 180 hours of data recorded on each ankle sensor

population	N	< 50h	50h ≤ < 180h	≥ 180h
Patient	28	1 (3 %)	4 (14 %)	23 (83 %)
Control	35	0 (0 %)	4 (11 %)	31 (89 %)

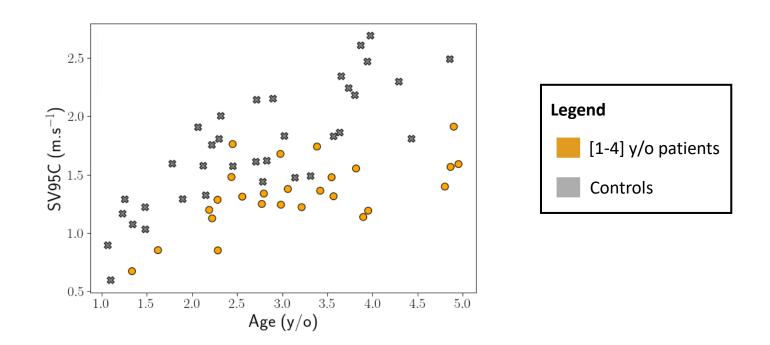
> 95% patients provide ≥ 50h of recordings with the DHT

Excellent SV95C reliability for young subjects

Intra-class correlation coefficient (ICC) between 2 consecutive 2-week baseline recordings

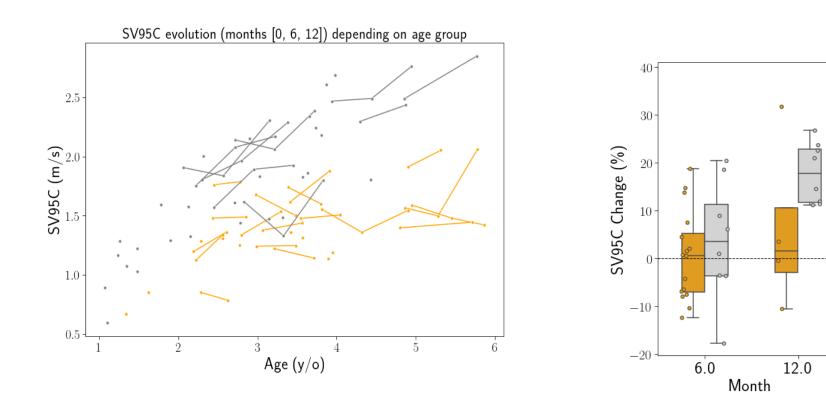
population	N	ICC2K	ICC1
Patient	28	0.99	0.98
Control	35	0.98	0.96

Confirmed ability to discriminate patients from controls



SV95C is significantly different between patients and controls (p<0.01)

SV95C change from baseline





Preliminary longitudinal data shows greater SV95C improvement for controls vs. patients

Conclusion

- 1. Huge attrition rate between academic research and regulatory consideration
- 2.The qualification process is long- costly and incredibly burdensome
- 3. The potential is huge across all fields of medicine



Margaux Poleur



Mélanie Annoussamy 1974-2023

