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An agency of the European Union

29 September 2023

Submission of comments on

ICH Reflection paper on proposed international harmonization of real-world evidence terminology and convergence of general principles regarding planning and reporting of studies using real-world data, with a focus on effectiveness of medicines

(EMA/CHMP/ICH/295401/2023)

Please note that these comments and the identity of the sender will be published unless a specific justified objection is received.
When completed, this form should be sent to the European Medicines Agency electronically, in Excel format (not PDF), to the following address:
ICH@ema.europa.eu
All the cells with an asterisk (*) should be filled in prior to completing the columns "Comment and rationale" and/or "Proposed changes / recommendation".
For more details on how to use this template please refer to the tab "Manual for commenter".

Name of organization or individual*	Line from* (line Nr or 0 for general comment)	Line to* (line Nr or 0 for general comment)	Section number	Comment and rationale (to go to next line within the same cell use Alt + Enter)	Proposed changes / recommendation (if applicable - to be used if you want to propose specific text changes)
ACRO	0	0		The Association of Clinical Research Organizations (ACRO) represents the world's leading clinical research and technology organizations. Our member companies provide a wide range of specialized services across the entire spectrum of development for new drugs, biologics and medical devices, from pre-clinical, proof of concept and first-in-human studies through post-approval, pharmacovigilance and health data research. ACRO member companies manage or otherwise support the majority of all biopharmaceutical sponsored clinical investigations worldwide and advance clinical outsourcing to improve the quality, efficiency and safety of biomedical research. ACRO recognize the challenges acknowledged by ICH in the reflection paper and is therefore supportive of the need for harmonization of terminology and general principles in order to enable the use of RWE in regulatory decision-making.	
ACRO	40	40	Main technical issues to be addressed	ACRO recommends adding in further detail on the challenges relating to levels of data quality and validity. This should include data completeness to allow comparability and data integrity to a level that is acceptable for use.	Add "(data completeness to allow comparability and data integrity to a level that is acceptable for use)" so text reads "levels of data quality (data completeness to allow comparability and data integrity to a level that is acceptable for use) and data validity"
ACRO	46	61	Main technical issues to be addressed	ACRO notes that there is also lack of clarity regarding RWD in a clinical trial setting. RWD can come from both patient reported outcomes and wearables where data is collected in a trial setting in the Real World. The FDA documentation is not clear. In Guidance "Submitting Documents Using Real-World Data and Real-World Evidence to FDA for Drug and Biological Products", section IV B discusses study designs using RWD to collect trial endpoints, but section IV C describes RWD (inter alia) as "data collected from digital health technologies in non-research settings". We recommend that clarification is added to this document to confirm that RWD can be collected in a research setting providing it is in the Real World.	Addition of the need for consistency in approach with respect to RWD in a clinical trial setting.
ACRO	112	115	Important considerations	ACRO notes that Health Technology Assessment (HTA) bodies are not explicitly mentioned as a stakeholder benefiting from ICH harmonization. In order to represent the medicinal product lifecycle, ACRO recommends explicitly including HTA bodies as a stakeholder.	Add HTA bodies as important stakeholders.
ACRO	120	148	Important considerations	ACRO supports the integration of existing and upcoming guidances in the development process in order to minimize duplication. As noted in the paper, the evolution of trial methodology and data collection is enabling an interoperability and integration of clinical research and clinical care. ACRO and ACRO members are providing thought leadership in decentralized clinical trials through the ACRO DCT Toolkit. Digital endpoints and EMR/EHRs have been identified as one of the key elements defining decentralized trials. As such, ACRO would recommend that the interface considers initiatives relating to DCTs and modern clinical trial design in addition to those listed. This would also include ICH E6(R3) annex 2 contents relating to decentralized elements.	Addition of Guidance relating to Decentralized Clinical Trials.

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ACRO	149	150	Important considerations	ACRO notes the list of suggested expertise required in development of the initiative. ACRO would recommend inclusion of relevant technology, real world evidence and data source expertise. This is because techniques for data collection and evaluation are evolving rapidly and it would be important to ensure outputs from this initiative are "future-proof". In conclusion, thank you for this opportunity to provide feedback, and please do not hesitate to contact ACRO (knoonan@acrohealth.org) if we can provide additional information or answer any questions.	Add "technology" and "RWE professionals" and "data source experts" so text reads "(e.g., pharmacoepidemiology, biostatistics, regulatory science, technology, RWE professionals, data source experts)"

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