Assessing the Performance of FDA Risk Evaluation and Mitigation Strategies (REMS)

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Presentation Overview

- Assessing the performance and effectiveness of a Risk Evaluation and Mitigation Strategy (REMS) is a requirement of every approved REMS program. However, measuring the effectiveness of a REMS program is challenged by limitations in interpreting the relative performance of the assessment survey results.
- Pharmaceutical manufacturers with a REMS faces difficulty is stating subjectively stating the effectiveness of the REMS in achieving its goals and the need if any for corrective actions.
- ASSESS (Awareness Safety Surveys for Evaluative Studies and Statistics) is a novel registry and analytical tool used for:
 - Examining the influence of multiple variables on influence REMS assessment scores
 - Determining if normal ranges exist and if appropriate performance benchmarks can be established



ASSESS Research Methodology

- BioTrak developed analytical methods and tools to answer "What variables are most highly correlated to, or most influence, the assessment score with patients?
- ❑ The influence of program-specific variables on "overall assessment score" as the dependent variable output was examined. Variables included:
 - Therapeutic class
 - Disease category
 - Level of safety risk (lower, moderate, higher)
 - Disease presentation (acute, chronic)
 - Type of REMS
 - Number of Serious Risk Messages in REMS

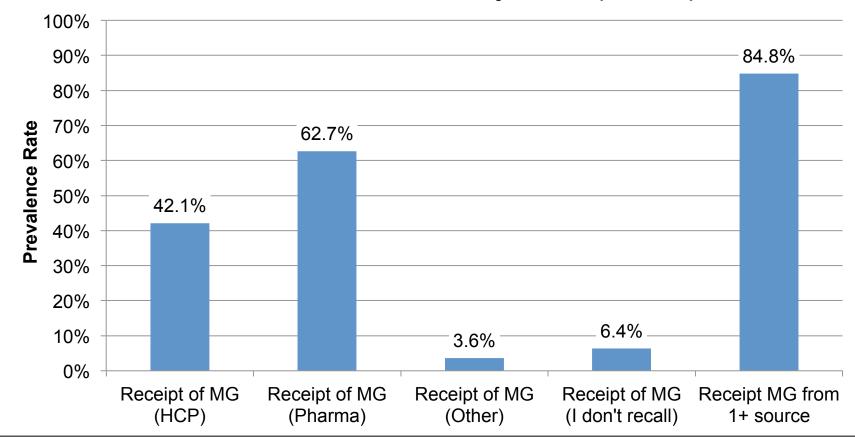


ASSESS Research Methodology

- The influence of program-specific (inter-program) variables was also examined.
 - Normalized assessment scores in order to test respondent-specific variables (intra-program). This allows "pooling" of data from different REMS assessment surveys.
 - Three types of normalization techniques were developed:
 - T-Score (lacks sensitivity)
 - Distance from the Mean (can be influenced by outliers)
 - Distance from the Median (preferred)
 - Respondent-specific variables included:
 - Receipt of Medication Guide
 - Receipt of Counseling on the Medication Guide
 - Method of patient recruitment
 - Any and all demographic questions

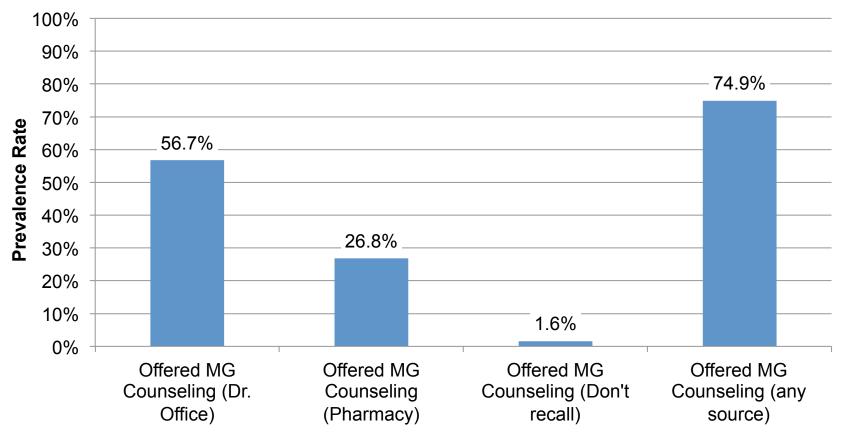


Medication Distribution Rates by Source (N=1,463)





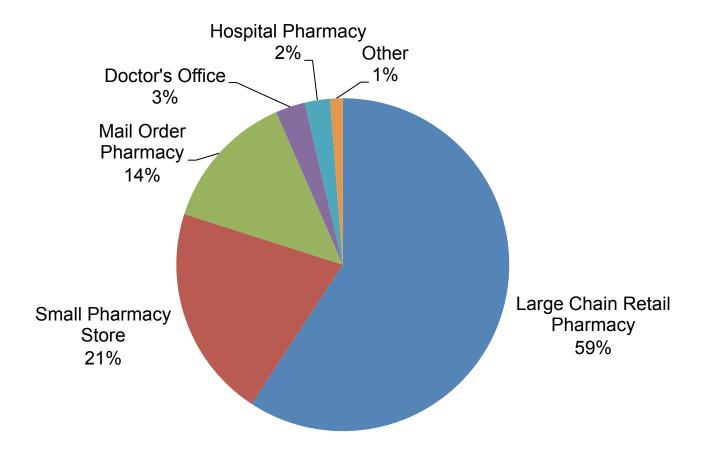
Medication Distribution Rates by Source (N=1,271)





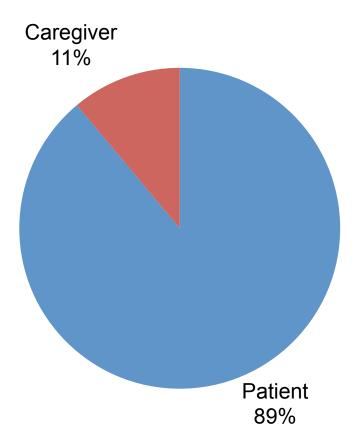


Rx Dispensing Channels Used (N=976)



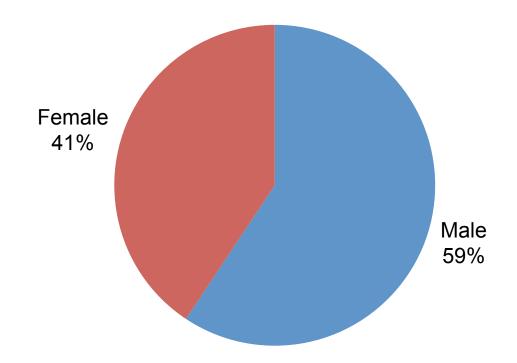


Survey Taker (N=1,463)

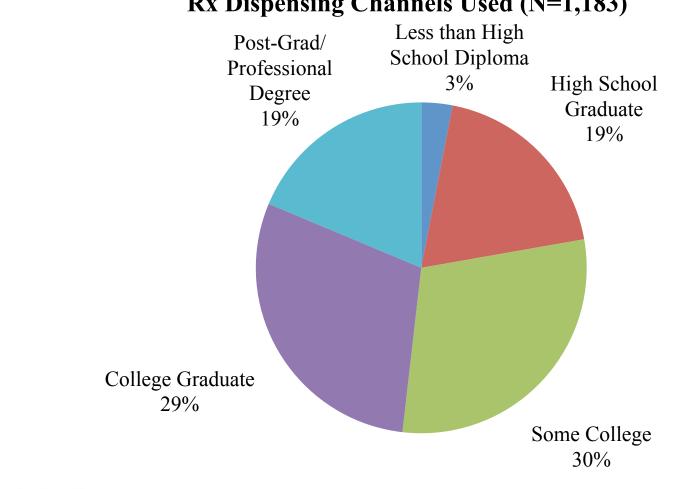




Respondent Gender (N=1,463)



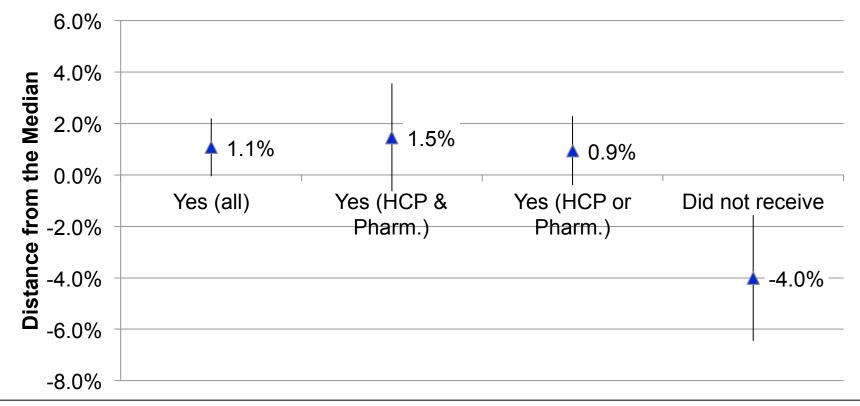




Rx Dispensing Channels Used (N=1,183)

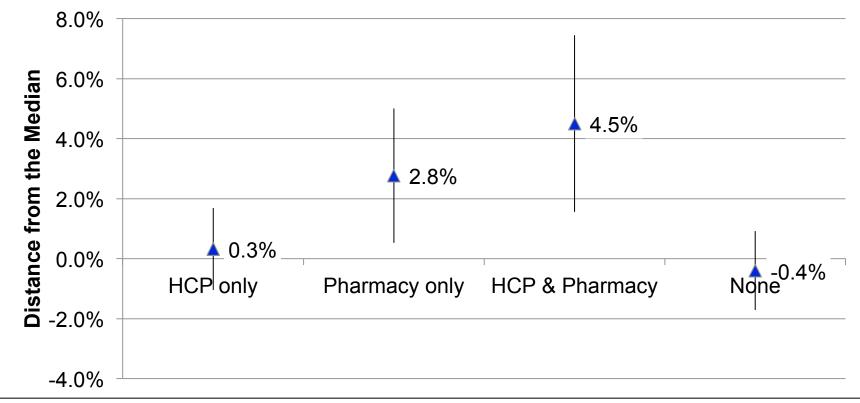


Effect of Medication Guide Distribution on Distance from the Median Assessment Score (N=1,463)



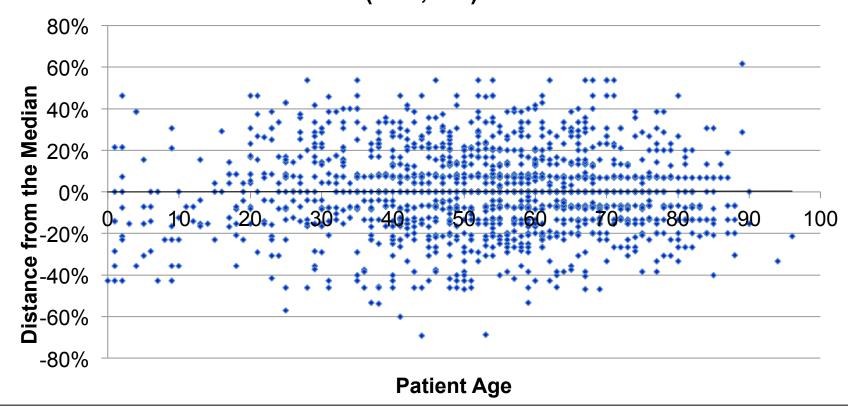




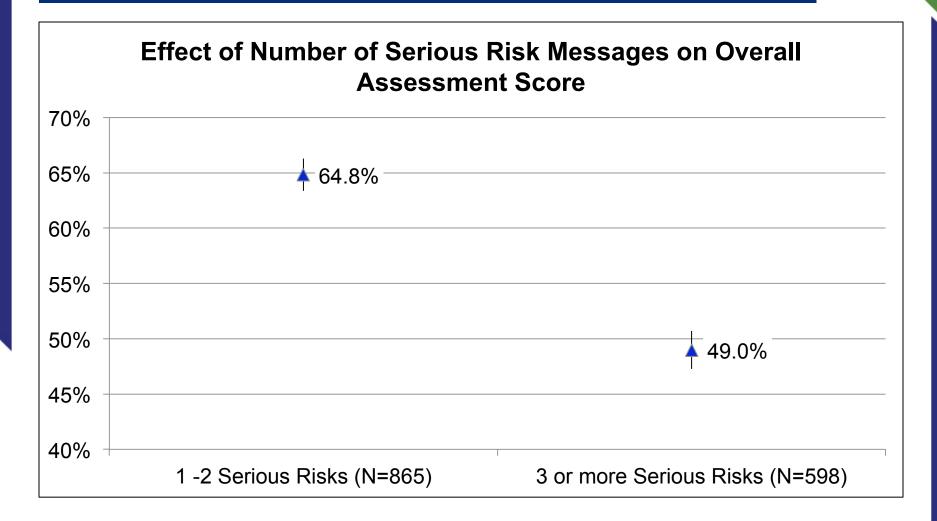




Age vs. Distance from the Median Assessment Score (N=1,463)









Key Takeaways

- Receipt of a Medication Guide from an HCP, pharmacist or both increases patient knowledge of the key risks messages associated with a REMS. However, the relative increase the mean assessment score is small (~1%).
- Counseling of patients about the REMS key messages has a positive influence on knowledge about these risks. When both HCP and pharmacists provided counseling, the mean assessment score increased 4.5%.
- There is not a correlation between patient age and assessment knowledge scores for all programs analyzed.
- The number of REMS key risk messages greatly influences knowledge scores. The mean overall assessment score for programs with 1-2 key risk messages was 65% compared to 49% for REMS with 3 or more key risk messages.



For More Information

• We hope you found this research summary interesting. To learn more or to discuss your REMS program, please contact:

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