

# Updating Systematic Reviews: Drug Therapy for Rheumatoid Arthritis in Adults

## A PCORI Virtual Multi- Stakeholder Workshop

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December 12, 2016



PATIENT-CENTERED OUTCOMES RESEARCH INSTITUTE

# Agenda

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- Welcome
- Background and goals for the day:
  - PCORI's Evidence Synthesis Program
  - AHRQ's Evidence-based Practice Center (EPC) Program
  - Prior Rheumatoid Arthritis Review Key Questions and Analytic Framework
  - Questions to guide the discussion
- Discussion
- Summary and closing remarks



# Welcome

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## Housekeeping

- Participants' lines are live
  - Please mute your line when you are not speaking to reduce background noise
- Today's conversation is being recorded and will be posted to the PCORI web site
- We will take comments in the order indicated on the agenda
- Comments and questions from the public may be submitted via the chat window
  - We will attempt to include these submissions in the discussion when feasible
  - We cannot guarantee a question will be addressed



# PCORI's Evidence Synthesis Program



# PCORI and Evidence Synthesis

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- *PCORI's authorizing legislation states that **evidence synthesis** is a core function of PCORI:*

“(C) PURPOSE.—The purpose of the Institute is to assist patients, clinicians, purchasers, and policy-makers in making informed health decisions by advancing the quality and relevance of evidence concerning the manner in which diseases, disorders, and other health conditions can effectively and appropriately be prevented, diagnosed, treated, monitored, and managed through research and evidence synthesis that considers variations in patient subpopulations....”



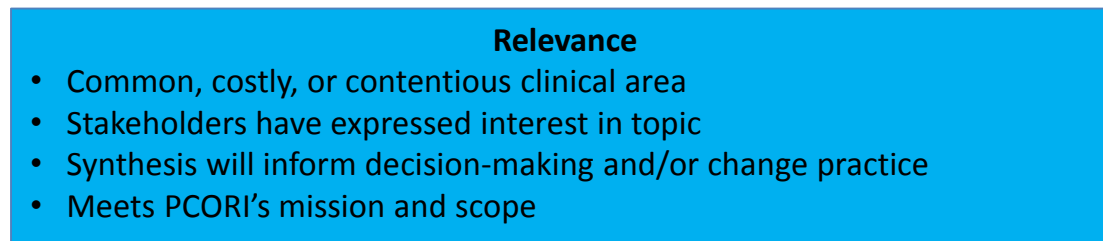
# PCORI's Evidence Synthesis Program

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- Initial goals:
  - Research to address heterogeneity of treatment effects, more personalized individual health care choices
  - More rapid deployment of actionable CER evidence in context
- We are focusing on short-turnaround, rigorous, relevant products
  - Strategic, selective focus on generating new research products (IPD MA, other research “re-use” opportunities)
  - Locating and qualifying existing CER SR products for targeted updating through a partnership with the Agency for Healthcare Research and Quality



# Decision Tree for PCORI CER Systematic Review Topic Selection



Yes

**Gap test: Has the evidence previously been synthesized?**

No

Candidate for new  
systematic review

Yes

**Strength of evidence**

Low or insufficient

**Urgent issue of potential harms?**

Yes

Consider update  
and/or  
dissemination  
work; develop  
framework to  
inform future  
research

No

**Is there sufficient intervening  
research since completion?**

Yes

Candidate for  
updating or other  
analysis

No

Future research  
or no further  
action

High or moderate

**Recency: Search dates within 1 year?**

Yes

Candidate for  
dissemination  
work

No

Candidate for  
updating

Work collaboratively with  
CER SER authors/funders to  
avoid duplication of efforts  
before proceeding



## Planned Targeted SER Updates in Collaboration with AHRQ

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- Treatment of Atrial Fibrillation
- **Treatment of Rheumatoid Arthritis**
- Treatment of Post-Traumatic Stress Disorder
- Nonsurgical Treatments of Urinary Incontinence





# AHRQ's EPC Program



# Prior Key Questions



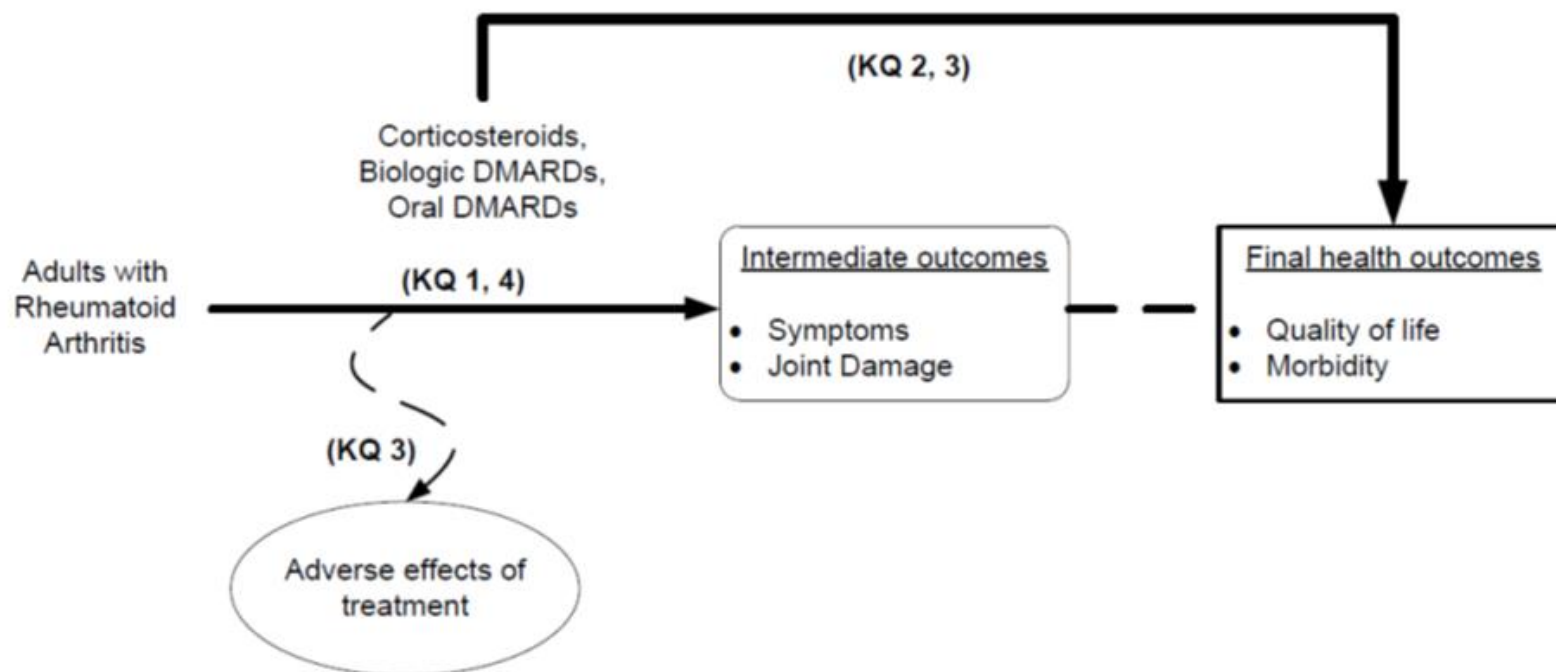
# Prior Key Questions

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1. For patients with RA, do drug therapies differ in their ability to reduce disease activity, to slow or limit the progression of radiographic joint damage, or to maintain remission?
2. For patients with RA, do drug therapies differ in their ability to improve patient reported symptoms, functional capacity, or quality of life?
3. For patients with RA, do drug therapies differ in harms, tolerability, patient adherence, or adverse effects?
4. What are the comparative benefits and harms of drug therapies for RA in subgroups of patients based on stage of disease, prior therapy, demographics, concomitant therapies, or comorbidities?



Figure A. Analytic framework for treatment for rheumatoid arthritis



# Questions to Guide the Scoping Discussion



# Scoping Question 1

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The prior review evaluated the comparative effectiveness of treatments for patients with all stages and severities of rheumatoid arthritis (i.e., early/established/end-stage, low/moderate/severe).

Is there a case to be made for **prioritizing** the review to **specific disease states** for this update?

Are questions surrounding the treatment of any **specific subpopulation(s)** currently more controversial than others?



## Scoping Question 2

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The prior review provided a comprehensive summary of the comparative effectiveness of the various classes of pharmaceutical agents available to treat rheumatoid arthritis.

Is there a case to be made for **focusing in on certain class comparisons** in this review update, rather than all possible combinations?

Are some comparisons currently more clinically relevant than others?



## Scoping Question 3

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What would you say represents the most compelling or controversial clinical question related to rheumatoid arthritis right now?





## Scoping Question 4

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Is there anything that is emerging in the area of rheumatoid arthritis treatment since the prior review that you feel needs to be addressed by this update (e.g., new treatments for rheumatoid arthritis, such as the targeted synthetic kinase inhibitor tofacitinib)?

Is something critical missing?



## Scoping Question 5

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Do you have any other comments for us on behalf of your organization?



# Discussion



# Order of Comments

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- Arthritis Foundation
- American College of Rheumatology
- American Osteopathic Association
- AbbVie
- Amgen
- Bristol-Myers Squibb
- Horizon Pharma
- Regeneron
- CVS Health
- Magellan Health
- HealthFirst
- National Institute of Arthritis and Musculoskeletal and Skin Diseases
- Arthritis Foundation

*\*Comments are not required of participants. Any participant may pass on the opportunity to comment.*



# Order of Comments

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- Arthritis Foundation
  - Suzanne Schrandt
- American College of Rheumatology
  - Amy Miller
- American Osteopathic Association
  - Bernard Rubin
- AbbVie
  - Jerry Clewell
- Amgen
  - Brad Stolshek
- Bristol-Myers Squibb
  - Leticia Ferri
- Horizon Pharma
  - Jeffrey Kent
- Regeneron
  - Nisha Koria
- CVS Health
  - Jeff Mattiucci
- Magellan Health
  - Corey Grevenitz
- HealthFirst
  - Nora Lopez
- National Institute of Arthritis and Musculoskeletal and Skin Diseases
  - James Witter
- Arthritis Foundation
  - Suzanne Schrandt



# Summary and Closing Remarks



# THANK YOU!

