



## CDRH Preference Sensitive Areas Discussion: Diseases and Conditions where patient preference studies could be useful



December 8, 2017



# What is MDIC?

*MDIC is a 501(c)(3) non-profit organization and is the first-ever public-private partnership created with the sole objective of advancing regulatory science of medical devices for patient benefit*



## MDIC HIGHLIGHTS



**65 participating member organizations**



**Leading resource on issues important to the Medtech innovation ecosystem**



**6 Projects have been initiated**

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**Congressional testimony on modernizing clinical trials**



**Over \$35m funding from grants and contracts for Program initiatives**





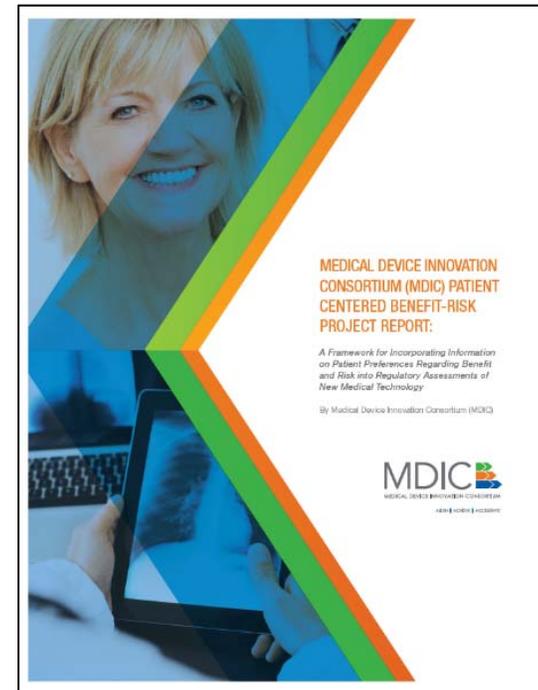
# MDIC Patient Preference Framework

## Framework for Incorporating Patient Centered Benefit Risk Assessment into Regulatory Submissions

- Resource for CDRH, MDIC members, and industry on when and how to collect patient preference information for incorporation into the regulatory process
- Incorporates Catalog of Methods as appendix

Published in 2015, the Framework is the collaborative effort of industry, CDRH and patient preference experts

- An initial thought piece in an emerging area
- To be updated as industry, FDA, and patient groups gain experience with collecting/using patient preference information



<http://mdic.org/spi/pcbr-framework-report-release/framework-report/>



# The Value of Patient Preference Information

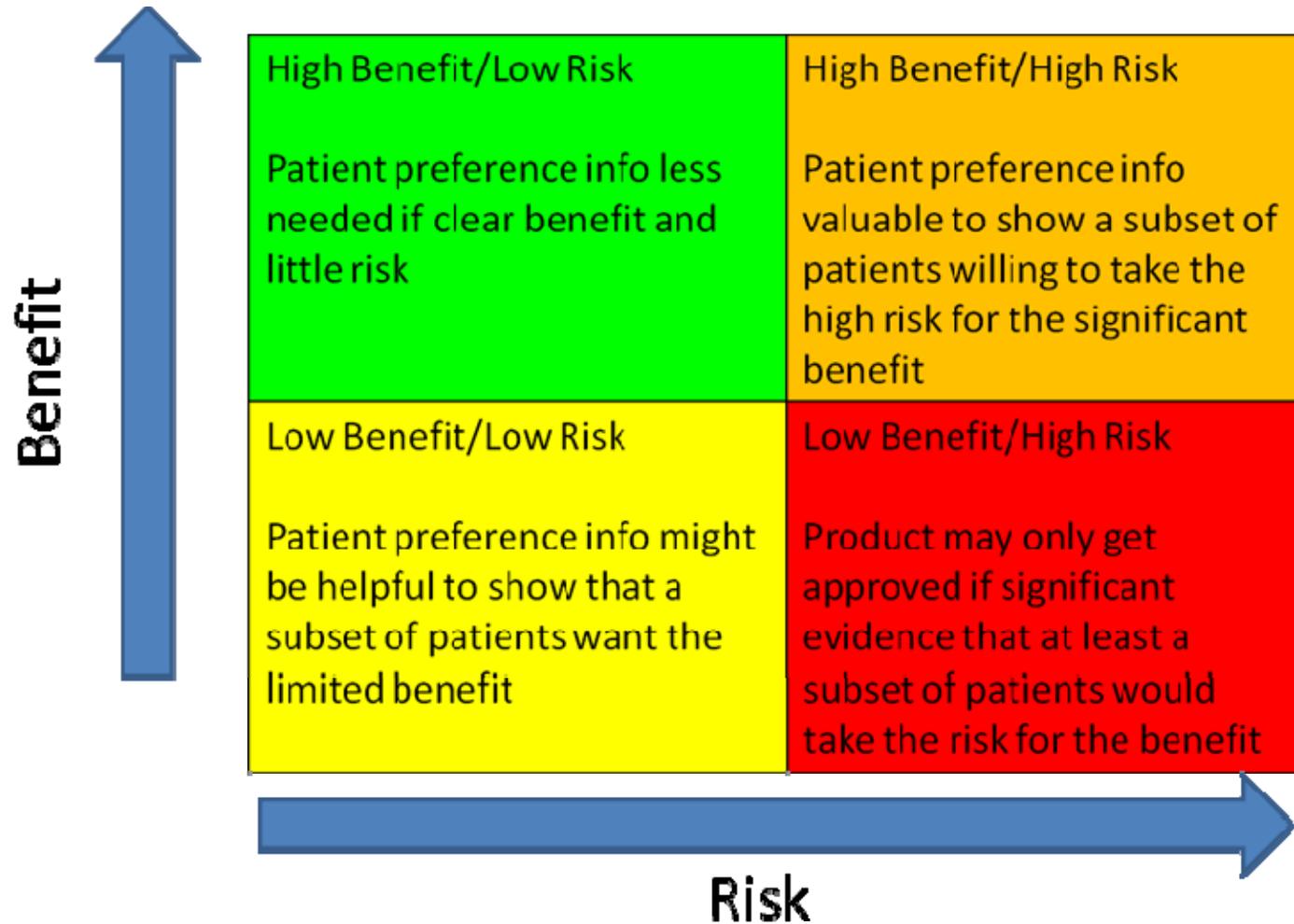
- Identify benefits and harms most important to patients
- Frame the benefit-risk issues and tradeoffs from the patient perspective
- Identify whether there are subgroups of patients that would choose to use the technology over other alternatives
- Support quantitative benefit-risk modeling



<http://mdic.org/spi/pcbr-framework-report-release/framework-report/>



# The value of patient preference information as a function of benefit and risk



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# Identifying preference sensitive areas

- Patients as stakeholders
  - Examples: Patient preference or risk tolerance different from other stakeholders; heterogeneity in patient preference
- Benefit-risk tradeoffs
  - Examples: Marginal benefit-risk scenarios
- Regulatory novelty
  - Example: Familiarity with the use of a particular technology

- See Section III of the MDIC Framework report (<http://mdic.org/spi/pcbr-framework-report-release/framework-report/>)

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## Areas that may be less preference sensitive

- When the patient is not a major stakeholder or decision-maker
- When the disease state/ technology are generally understood by sponsors and FDA staff and there is significant regulatory precedent for approval
- When the treatment is clearly superior to existing therapies with no tradeoffs in risk
- When the treatment meets an unmet medical need with poor outcomes such that the risk of treatment will not be greater than the risks of the untreated disease

- See Section III of the MDIC Framework report (<http://mdic.org/spi/pcbr-framework-report-release/framework-report/>)



# Considerations for Patient Preference

- There is not a “cookbook” or algorithmic approach to identifying preference sensitive areas
- There are factors that characterize situations where patient preference information could be useful, in particular, in the context of regulatory benefit-risk assessments
- Let’s not limit ourselves to the regulatory considerations. Patient preferences can provide valuable insight across the medical device development lifecycle



# Patient Preference Information Resources



<http://mdic.org/spi/pcbr-framework-report-release/framework-overview/>

For more information, visit:  
<http://mdic.org/SPI/resources>

Upcoming and archive webinars:  
<http://mdic.org/mdicx>

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