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# RE: PCORI's Proposal for Peer Review of Primary Research and Public Release of Research Findings

Dear Executive Director Selby:

The Biotechnology Industry Organization (BIO) is pleased to submit the following comments on the Patient-Centered Outcomes Research Institute's (PCORI's) Proposal for Peer Review of Primary Research and Public Release of Research Findings (the "Draft Proposal"). BIO is the largest trade organization to serve and represent the biotechnology industry in the United States and around the globe. BIO represents more than 1,000 biotechnology companies, academic institutions, state biotechnology centers, and related organizations in the United States. BIO members are involved in the research and development of novel interventions to prevent, treat, and cure diseases through the most advanced science.

BIO supports PCORI's goal of increasing the availability of accurate, scientific evidence to inform clinical decision-making, and we maintain an ongoing desire to see the Institute successfully carry out its statutory mandate. In fact, we appreciate the focus of the Draft Proposal on addressing the various aspects of this mandate. The comments provided below aim to strengthen this focus and relate to the practicality of the process steps and potential unintended consequences resulting from aspects of the proposed process.

#### I. Peer Review of Primary Research

In the Draft Proposal, PCORI offers a step-by-step approach to meeting the statutory requirement for conducting peer-review assessment of the research studies it funds. BIO is supportive of the general process, however in the sections below we offer several recommendations and identify specific concerns around three particular aspects of the proposal: study registration; construction of the draft final report; and, populating the PCORI peer review team.

# A. Registration

In the Draft Proposal, PCORI notes that the Awardee Institution will be responsible for registering a study on relevant, existing databases to the extent a study meets the eligibility requirements for such registration. The examples given are the registration of: clinical trials and observational comparative effectiveness studies on ClinicalTrials.gov; clinical registries on the Registry of Patient Registries; and, evidence synthesis studies at PROSPERO. While PCORI notes that registrations within these existing databases must reflect that these

<sup>&</sup>lt;sup>1</sup> Patient-Center Outcomes Research Institute (PCORI). 2014. Proposal for Peer Review of Primary Research and Public Release of Research Findings (available at: <a href="http://pcori.airprojects.org/sites/default/files/PCORI-peer.pdf">http://pcori.airprojects.org/sites/default/files/PCORI-peer.pdf</a>).

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studies are funded by PCORI, through the inclusion of the term "PCORI" and the PCORI application number, BIO asks that the Institute also consider requiring Awardee Institutions to ensure these registrations are cross-linked with the description of the study on the PCORI website. This will improve the ability of stakeholders to find relevant studies more easily, no matter how they search for them (e.g., by funding mechanism, study design, therapeutic area).

#### B. Draft Final Report

In the Draft Proposal, PCORI identifies a timeline for an Awardee Institution to submit a draft final report as well as the key components of the report and how each fulfills a part of the Institute's statutory requirements. We find this to be a particularly helpful method of providing context for the proposed process around creating, editing, and finalizing this report. BIO is concerned, however, that there remain four unaddressed issues that we ask PCORI to resolve in the final peer review process protocol.

First, it is unclear if PCORI intends to put into place a protocol, and what that protocol would be, to arrive at a version of the report considered acceptable by both PCORI and the Awardee Institution. For example, it is unclear how PCORI will proceed if the Awardee Institution disagrees with edits made by PCORI's peer reviewers. It also is unclear whether, in the case that PCORI and the Awardee Institution do not agree on a particular point, the published final report will reflect this division. In such a situation, BIO urges PCORI to be as transparent as possible about any such issues in the final report that is made publicly available. This is important because this information may provide necessary context for stakeholders in identifying how best to utilize a study's findings.

Second, we ask that PCORI add a section to the list of required sections in the final report that contains a statement of hypothesis, clearly articulating the research question to be answered. A thorough understanding of the purpose of the research is crucial context for interpreting its results. A definitive statement of the research question also will assist stakeholders in understanding whether the research findings may be applicable to them.

Third, PCORI notes that the ancillary information section of the final report should include a disclosure of "any direct or indirect links the entity has to industry," as required by statute. BIO asks PCORI to expand this requirement such that the investigators should report any direct or indirect links they, or their institution, have with any entity that may cause or be perceived to cause a conflict of interest or bias the investigators' conclusions (e.g., the broadest definition of industry, to include insurers; non-industry entities that might stand to gain financially, in improved reputation, etc. from the results of a research study). Expanding the scope of the requirement would more comprehensively contextualize the study findings and conclusions and their potential applicability to specific stakeholders.

Fourth, we note that studies funded by PCORI's early rounds of funding (2011-2012) are set to conclude soon and some made have concluded already. PCORI should identify how it will meet statutory obligations for peer-review and dissemination in regards to studies completed before the peer review process is finalized. Additionally, PCORI should include in the final protocol a discussion of how the Institute will handle ongoing projects that did not already specify a date for the completion of data analysis as a project milestone. As described in the Draft Proposal, it is that completion date that will trigger the three-month

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<sup>&</sup>lt;sup>2</sup> ACA § 6301(h)(3)(B).

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timeline by which the Awardee Institution must submit a draft final report to PCORI. However PCORI addresses existing awardees, the Institute should ensure as much uniformity and predictability for both the Awardee Institutions and stakeholders who may utilize the research findings.

#### C. PCORI Peer Review Team

According to statute, PCORI's peer review must assess funded research on two parameters: scientific integrity and adherence to PCORI's methodological standards. To do this, the Draft Proposal identifies two types of peer review team members: content experts, "sourced by PCORI and also from those suggested by the study Principle Investigator (usually external to PCORI)"; and, a methodologist, "selected by PCORI from among nationally recognized experts in this field." The Draft Proposal also notes that PCORI has "the option of engaging a qualified vendor to perform the peer review of draft final reports" through a similar peer review process and based on the same standard of expertise for reviewers themselves. First, BIO asks that PCORI provide additional details on when and how PCORI may decide to exercise this external vendor option and how the process will be managed.

Second, in regard to the peer review team itself, BIO urges PCORI to utilize a transparent process for considering and selecting peer reviewers, and to consider a diversity of stakeholder representatives (e.g., patients, providers) for inclusion in a peer review team. Given the diversity of research subjects PCORI funds, to improve the timeliness and efficiency of identifying peer reviewers, BIO recommends the Institute consider establishing a standing group of potential reviewers with diverse subject matter expertise. These reviewers would agree to be part of this group for a certain time period, during which they could be called upon to serve as a peer reviewer whenever a draft final report in their area of expertise is submitted for review. Though the final composition of the peer review team would still be at PCORI's discretion, we also recommend that PCORI provide stakeholders, in addition to the Principle Investigator, the opportunity to recommend individuals to join a standing peer reviewer group. PCORI could continuously, or at specific intervals, request nominations and add individuals to the existing group. We believe that this type of process would better ensure experts in relevant fields are readily available to participate in PCORI's peer review process.

In particular, we note that expertise from the biopharmaceutical industry will be an important resource in reviewing research that includes innovative vaccines, therapeutics, and diagnostics. In fact, where specific products or technologies are the focus of PCORI-funded research, we urge PCORI to provide the manufacturers thereof an opportunity to offer feedback on the draft study report as a form of context for the broader peer review.

#### II. Making Research Findings Publicly Available

BIO appreciates PCORI's focus on making research findings applicable to patients and supports the general framework identified in the Draft Proposal to do so. We note that the Draft Proposal did not include a discussion of whether the data sets from funded research will be made available to interested stakeholders, including the general public, and what process will be used to govern requests for the use of such data. BIO urges PCORI to

<sup>&</sup>lt;sup>3</sup> <u>Id</u>. at 6301(d)(7)(A)(i).

<sup>&</sup>lt;sup>4</sup> PCORI Draft Proposal at p.6.

<sup>&</sup>lt;sup>5</sup> PCORI Draft Proposal at p.6.

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consider this issue in the final proposal, since allowing use of such data may be helpful to researchers and other stakeholders adding to the evidence base in a particularly therapeutic area. Additionally, in the following sections, we offer recommendations and identify specific concerns surrounding three issues in this section of the Draft Proposal: translation of research findings for patients; posting of the full final study report; and, peer review by a third-party publication.

### A. <u>Translation of Research Findings</u>

The Draft Proposal identifies the need to translate the final report for patients and the general public to fulfill the statutory requirement that PCORI "convey the findings of research in a manner that is comprehensible and useful to patients and providers in making health care decisions." BIO believes that ensuring research findings are made available to patients in a manner that is useful is critical to meeting PCORI's goal of improving information at the point of patient-decision making. To this end, we recommend that the Institute work with patient advocacy organizations with expertise in therapeutic areas relevant to the research in question to draft the required 500-word "lay" abstract. These organizations have extensive experience helping patients both gain entry to and navigate the healthcare system and are already trusted sources of information for their members. PCORI also should consider partnering with these organizations and other external stakeholders to evaluate, potentially through a survey mechanism, how useful particular patient populations have found these "lay" abstracts in informing their healthcare decisionmaking. This information, in turn, can inform PCORI's future efforts to improve the relevance of the research funded by the Institute and the mechanisms by which research findings are disseminated.

#### B. Making the Final Report Public

In the *Public Posting to PCORI.org* and the *Posting of Full Final Reports* sections of the Draft Proposal, PCORI identifies when each required aspect of the research report findings—the final report, 500-word lay and professional abstracts, standalone results table, and ancillary information—will be made publically available. PCORI goes on to note two competing factors in the publication of studies: (1) statute requires PCORI to make research findings available within 90 days of the receipt of the final findings; but, (2) third-party publications, to which investigators may want to submit their work, may not accept studies that already have been made public by PCORI. To meet the first requirement, PCORI proposes to begin the 90-day period on the date that the notification of acceptance for publication of the final report is provided to the Awardee Institution. To meet the second requirement PCORI proposes to only make available the 500-word abstracts, standalone results table, and ancillary information within that 90-day timeframe, but wait up to 12 months, or potentially longer, before making the final report publicly available to allow time for third-party peer review and publication.

While BIO is sensitive to both the 90-day requirement and the pre-publication issue, the Draft Proposal does not mention a third competing factor: that withholding the complete context contained in the final report may diminish the utility of any of the other summary documents that describe the study or lead to misinterpretations of the study findings. Based on this concern, BIO strongly encourages PCORI to specify that the full final report will be made available publicly at the same time as the summary documents (i.e., the 500 word lay

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<sup>&</sup>lt;sup>6</sup> <u>Id</u>. at 6301(d)(8)(A)(i).

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and professional abstracts, standalone table, and ancillary information). While we appreciate that the Draft Proposal stipulates that information on study limitations will be included in the 500-word medical abstract, this may not be sufficiently detailed for patients as they determine if and how research findings can be integrated into their healthcare decisions. At the very least, we ask that the draft process only withhold the posting of a final report if the investigators have specifically indicated, at the time of their receipt of PCORI's formal acceptance, that they plan to seek publication of the final study report in a peer-reviewed journal or have submitted an abstract for presentation at a conference or symposium.

## C. <u>Publication of Research Findings by Third-Party Publications</u>

The Draft Proposal notes that PCORI intends "to coordinate posting [of the final report] with publication of a peer-reviewed journal version of study findings." While this statement appears to refer to coordinating the timing of publication, it raises the issue, not addressed in the Draft Proposal, of how PCORI intends to address a situation in which a journal makes substantive alterations to a final report already accepted by PCORI and, potentially, based on which 500-word abstracts and a standalone results table have been made publicly available. BIO cautions that there would be significant complexities with attempting to revise a final report based on edits made to a manuscript for publication in a third-party peer-reviewed journal. To address such a situation, PCORI should develop a protocol, in consultation with stakeholders, whereby PCORI and the investigators can consider how any such differences in the PCORI final report and a journal-published report should be identified and communicated to stakeholders.

#### III. Conclusion

BIO appreciates the opportunity to comment on PCORI's Proposal for Peer Review of Primary Research and Public Release of Research Findings. We look forward to continuing to work with the Institute achieve its goal of providing patients with the information they need to make the best healthcare decisions for them. Thank you for your attention to this very important matter.

Respectfully submitted,

/s/

Laurel L. Todd Managing Director Reimbursement and Health Policy

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<sup>&</sup>lt;sup>7</sup> PCORI Draft Proposal at p.7.