

# THE EXPERIENCE OF THE CANCER COOPERATIVE GROUPS WITH REAL-WORLD DATA RESEARCH: INSIGHTS FROM A COMPREHENSIVE SURVEY

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RWD93

The future of cancer therapy

# BACKGROUND

RWD have been playing an increasingly important role in the development of anticancer therapies over time [1]. Regulators and payers are now commonly relying on RWE to inform their decision-making relating to antineoplastic treatments [2], and many companies are analyzing RWD to support the market access of their antineoplastic products [3]. However, it is still unclear what the academic RWD research landscape looks like. In this study, we aimed to investigate the extent to which cancer cooperative groups have initiated studies involving the collection and analysis of RWD.

## METHODS

- Online survey created using SurveyMonkey®
- Targeting representatives of cancer cooperative groups
- Data collection between May and August 2022
- 125 participating groups active across:
  - > 5 different continents
  - > 58 different countries
  - > 13 different cancer domains
- Data analysis using IBM® SPSS® Statistics v28



### RESULTS

- 32.8% had formal policies in place to gather and utilize RWD
- 68.0% had experience working with RWD
  - Mainly observational data
  - Prospective and retrospective data to a similar extent
- Most commonly used sources of RWD (figure 1):
  - Cancer registries (75.3%)
  - Electronic health records (68.2%)
  - Patient questionnaires (67.1%)
- Experience with specific types of RWD studies (figure 2):
  - **Prospective cohort studies: 76.5%**
  - Cohort multiple RCTs: 23.5%
  - **Pragmatic trials: 36.5%**
- 65.9% still ran more traditional clinical trials than RWD studies
- RWD most frequently seen as:
  - Data collected in a non-interventional/non-controlled setting
- Most important benefits of RWD research:
  - Large scale and low costs (figure 3)
- Most important challenges of RWD research:
  - Methodological and operational constraints



13.1%

(11)

High significance

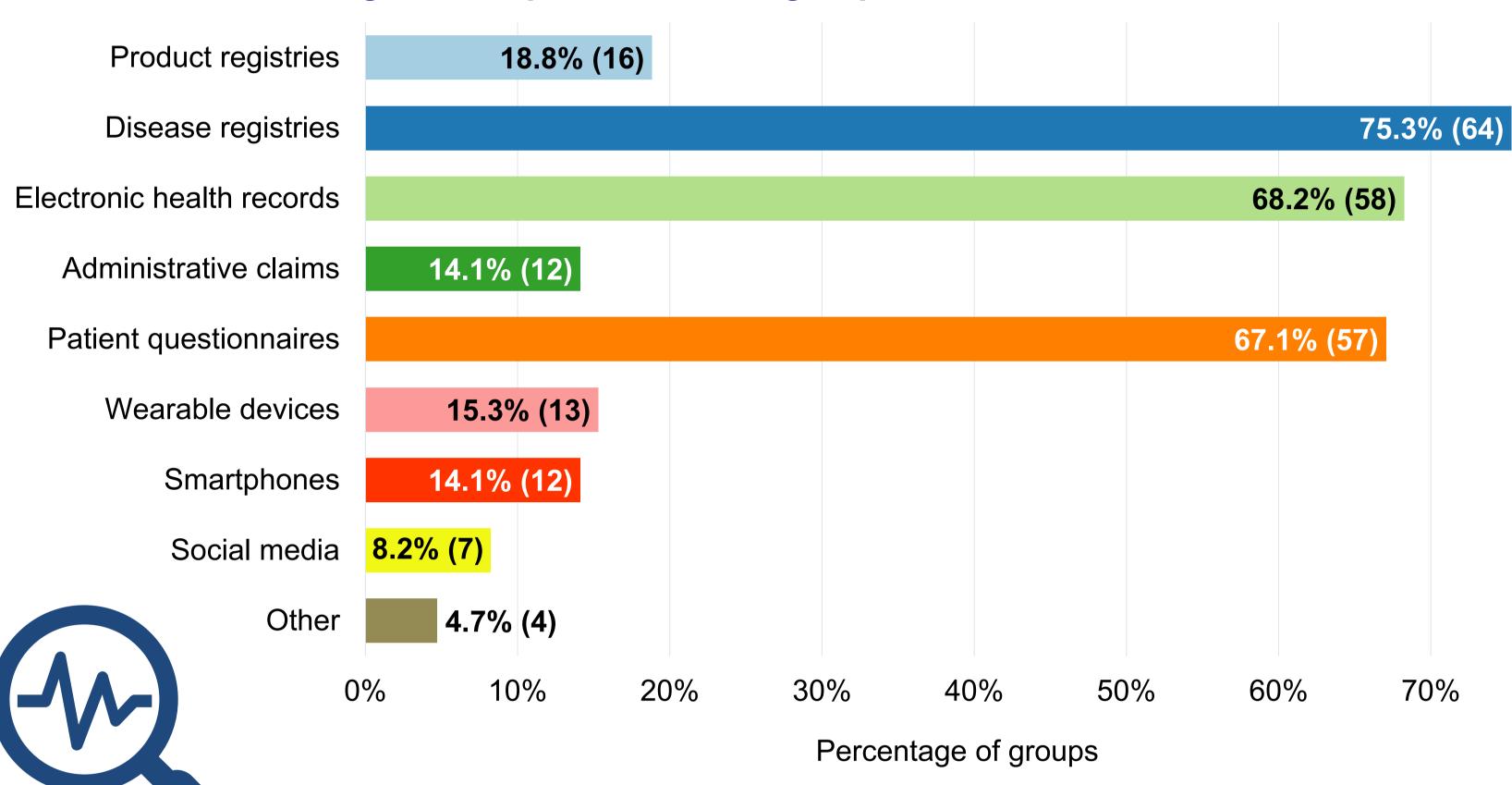
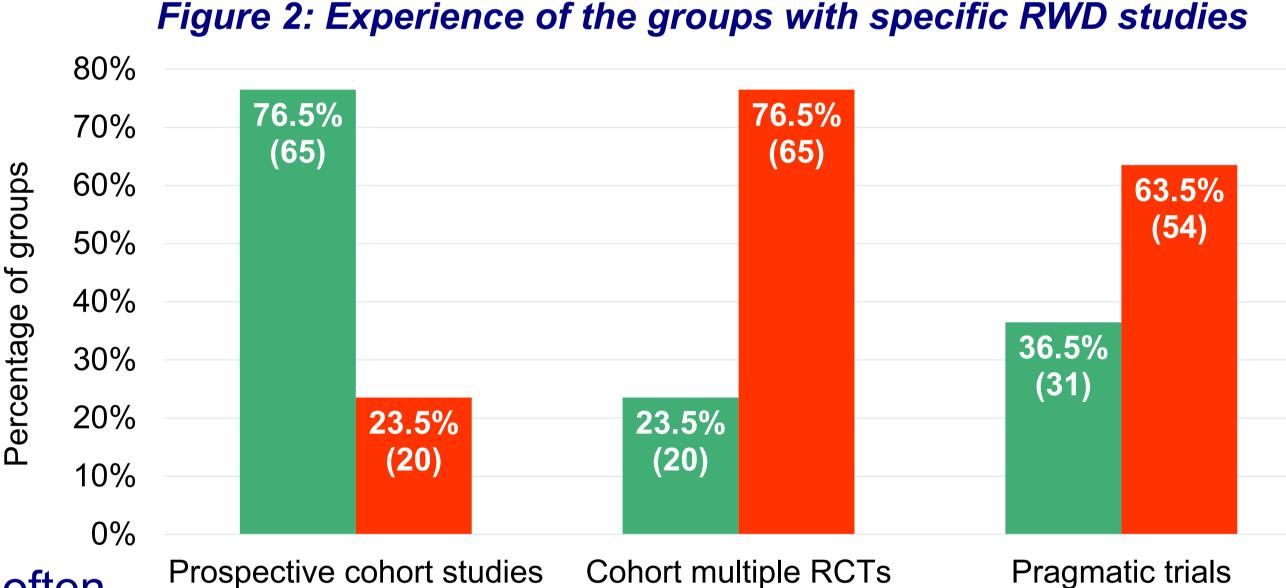


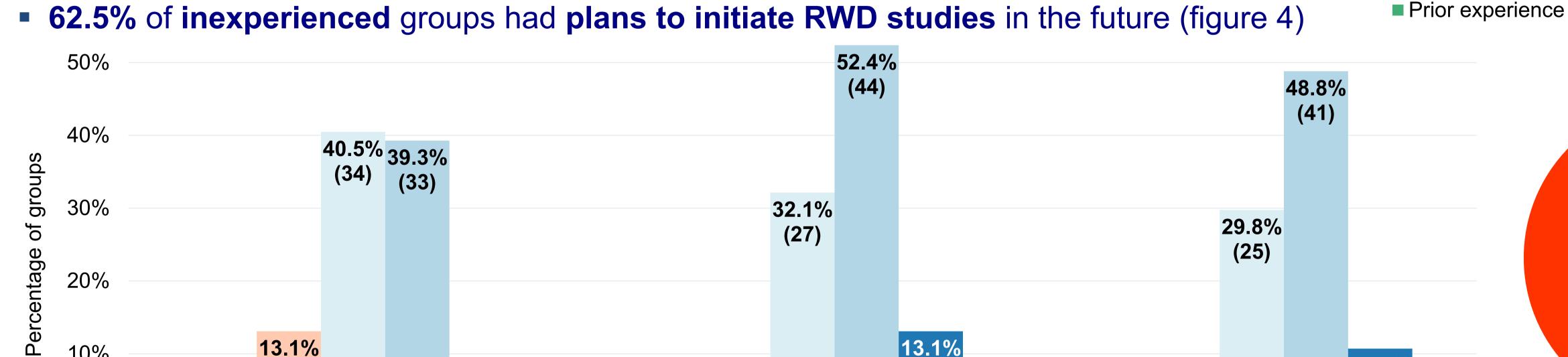
Figure 1: Experience of the groups with different RWD sources



15

(37.5%)





2.4%

Moderate significance

13.1% 10% 6.0% (5) (11) 1.2% (1) 0% Benefits in terms of speed (i.e. benefits relating to the time it takes to generate answers to research questions)

Benefits in terms of scale (i.e. benefits related to the number of patients covered by the data)

10.7% 3.6% (3) 7.1% (9) Benefits in terms of costs (i.e. benefits relating to the resources that have to be spent to collect and analyze the data) Very high significance

Figure 4: Future plans of groups inexperienced in RWD research to set up RWD studies

Future plans

■ No future plans

No prior experience

25

(62.5%)



#### ACKNOWLEDGEMENTS

Low significance

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### **ABBREVIATIONS**

Very low significance

Randomized controlled trial RCT:

RWD: Real-world data RWE: Real-world evidence

## REFERENCES

- Skovlund et al. (2018)
- Pulini *et al*. (2021)
- Deloitte (2020)

#### CONCLUSIONS



Cancer cooperative groups around the world are already incorporating RWD studies into their research agendas. So far, they have mainly worked with observational RWD drawn from cancer registries, electronic health records and patient questionnaires. Their experience with undertaking pragmatic trials or cohort multiple RCTs is limited, so there is still room for expanding the role of academia in interventional RWD research. This would enable the generation of robust and actionable RWE.