

SCDM Live



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9-11 April, 2025 | Brussels, Belgium

Open-source analytics tools for Clinical Data Management

Why open-source?

- Cost-efficiency
- Customization
- Community support
 - Faster problem solving
- Complete transparency
 - Improved trust
 - Improved security





Japie
van Tonder

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Björn
Koneswarakantha

Principle
Quality Data
Scientist,
Roche



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Clinical Data
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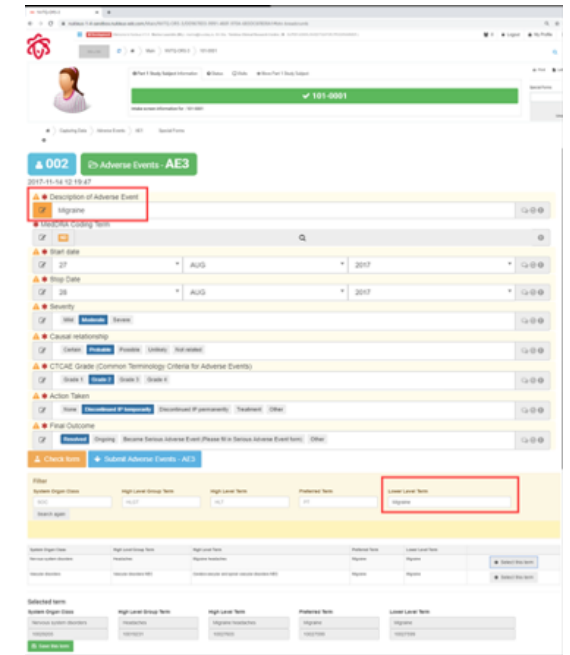


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Principal
Clinical Data
Scientist,
Bayer

Automation of study-specific clinical database build and validation by leveraging common open-source software development tools

Japie van Tonder, Scigenix Pty Ltd

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- **Manual validation** → Lack of automation leads to inconsistencies
- **Slow process** → Delayed study timelines
- **Expensive & resource-heavy** → Labor costs
- **Limited adaptability** → A lack of automation makes it difficult to scale processes efficiently

The Automation Framework – Overview

- Goal
 - Automate database validation (“UAT”)
- How?
 - Programmatic approach using open-source tools
- Outcome
 - Faster, more reliable, and scalable database workflows

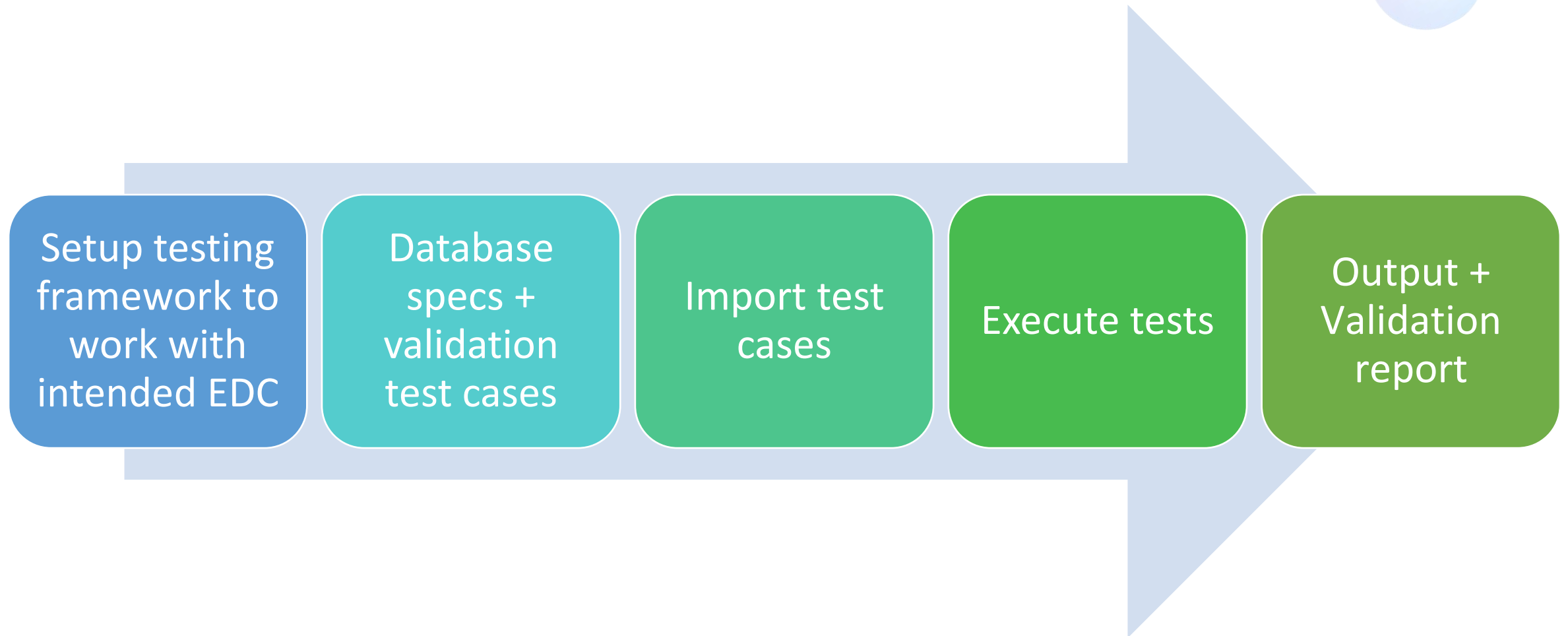


Modern Front-End Testing Frameworks

- Web development teams minimize manual testing by using automated front-end testing frameworks
- Reduces human error, increases efficiency, and ensures consistency
- **Cypress** – Fast, reliable end-to-end testing for modern web apps
- **Playwright** – Multi-browser automation, ideal for UI consistency checks
- **Jest & Mocha** – JavaScript-based testing frameworks for unit and integration tests
- Many other frameworks



Validation of the EDC system



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- Initial setup

- Programming link up specifications / testing framework / EDC
- 2 months

- After automation

- Execution of all tests reduced from roughly 2 days to 2 hours
- **92% increase in efficiency**
- Test → Update → Re-test cycle significantly faster
- Easily perform a re-test of the entire database with each post-production change
- Ultimately increased build quality (no human error in testing)

Benefits of Automation

- Faster EDC deployment → Saves days/weeks of effort
- Improved accuracy & consistency → Reduces human errors
- Lower licensing costs → Open-source
- Scalable & adaptable → Works with various EDC platforms

Conclusion

- / !

- Consider adopting open-source tools in your workflows

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"By leveraging automation and established software development practices, we can reduce human effort, improve accuracy, and accelerate clinical database deployment."



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Björn Koneswarakantha, Hoffmann-La Roche

Cross Industry Organisation



Intercompany quality analytics consortium

- Founded 2022
- 19 industry members
- <https://impala-consortium.org/>
- Statistical Open Source Packages
- Scientific Publications
- Quality Frameworks (RAPID, Quality Briefs)
- Joint Health Authority Engagement

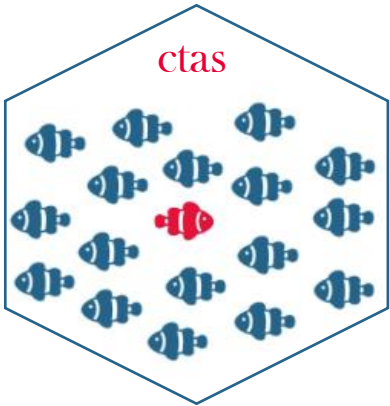


phuse.global

Risk Based Quality Management

- Founded 2024
- > 3 industry members
- RBQM focus (Critical to Quality, Centralized Monitoring, Quality Tolerance Limits)
- 6 Projects
- Open Source Packages

Open Source Landscape – Quality Monitoring Clinical Trials



Quality Tolerance Limits.

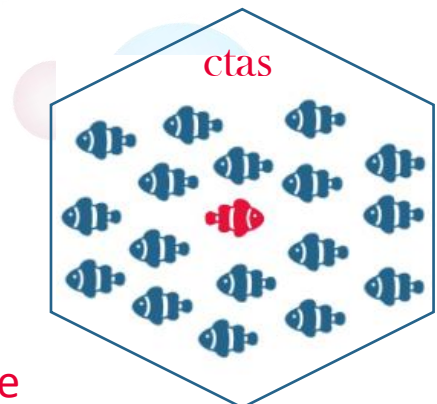
<https://github.com/openpharma/rbqmR>



End to End RBQM Framework

- Mapping
- Processing
- Reporting

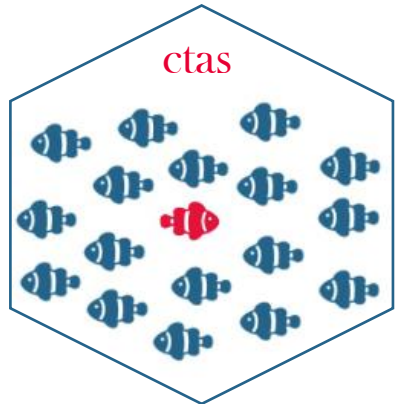
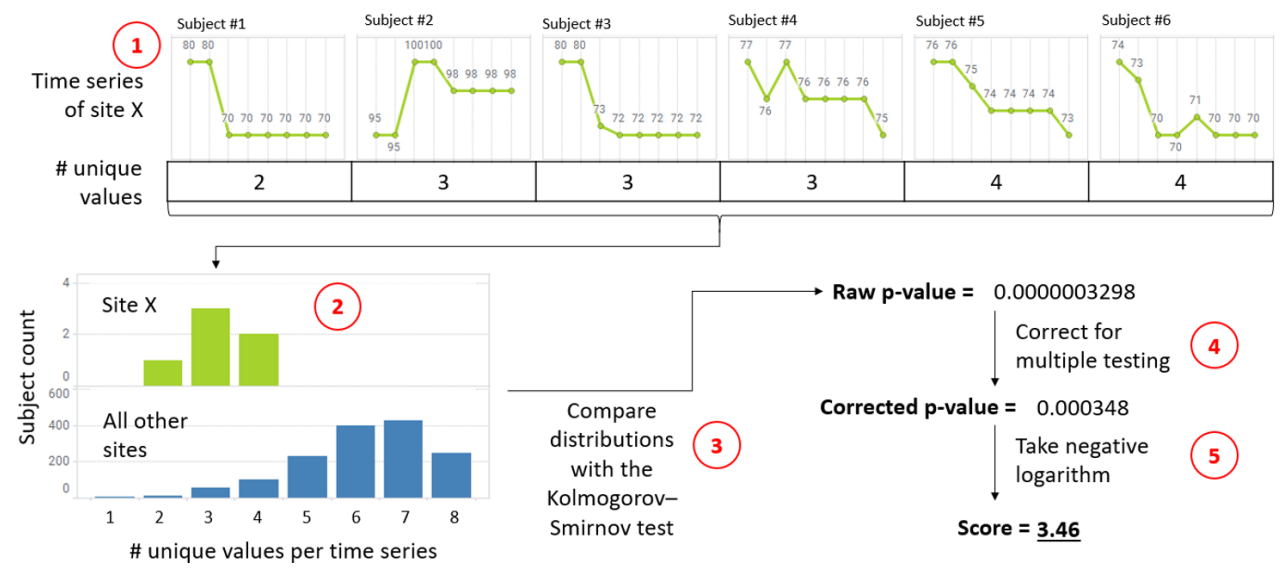
<https://github.com/Gilead-BioStats/gsm>



<https://github.com/IMPALA-Consortium/ctas>

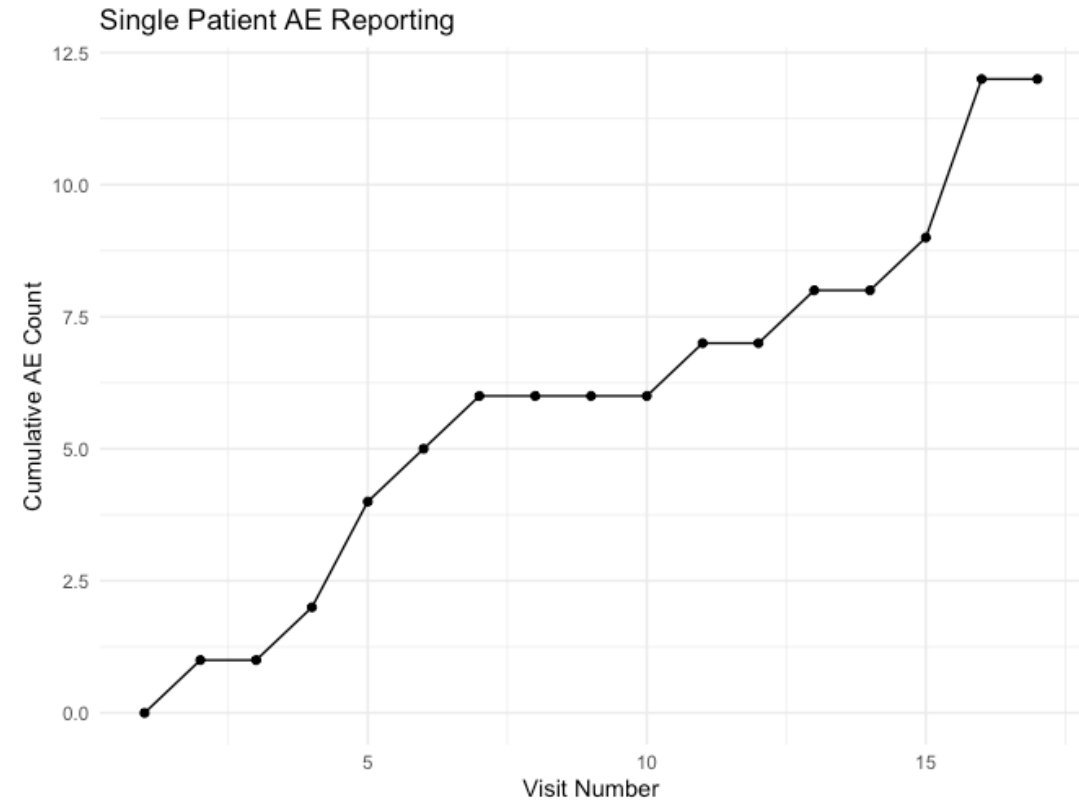


- CTAS (Clinical Trial Anomaly Spotter) is a CSM tool focused on identifying anomalous time series of continuous variables.
- “Unsupervised” tool which does not use pre-specified KRIs.
- Originally developed by Bayer where it is available for all company studies.
- Code base shared with IMPALA for co-development in July 2023.

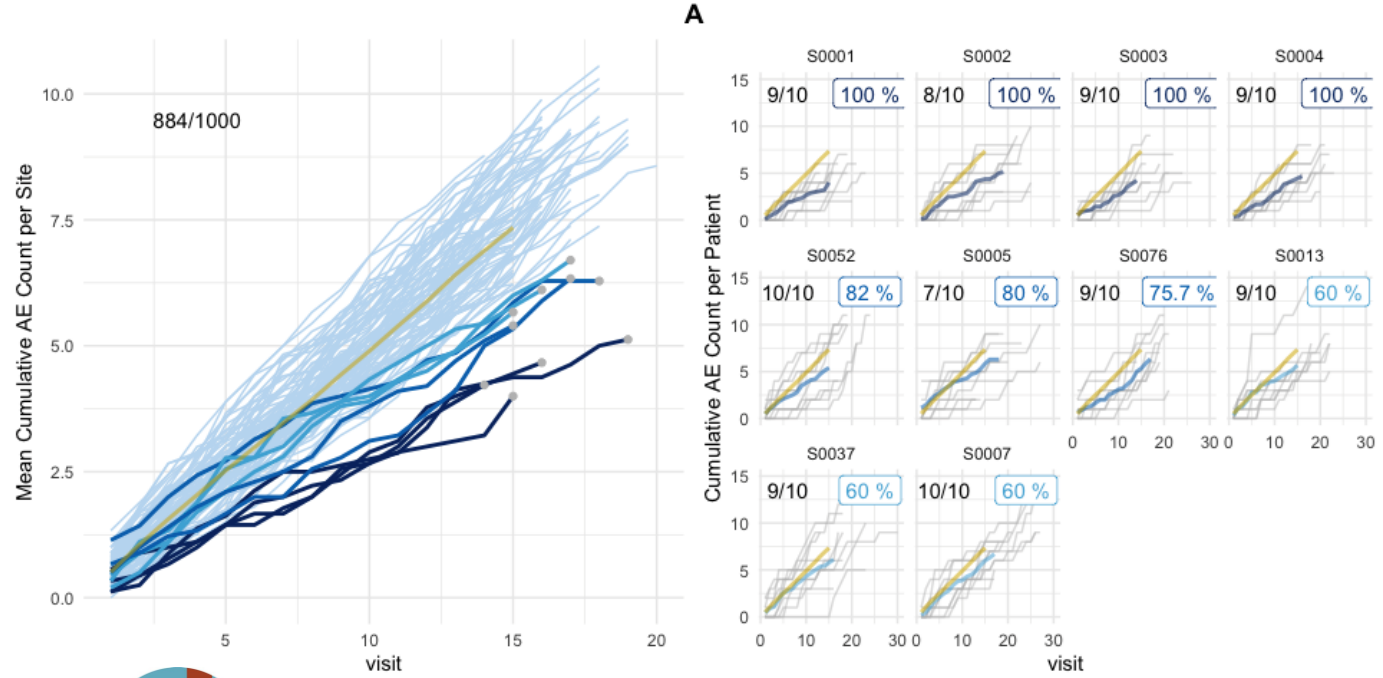


Adverse Event Reporting in Clinical Trials - Patient

Clinical Trial - Patient Visit



{simaerep} Calculate Event Reporting Probabilities *Bootstrap - Simulations*



Collaborative Scientific Evaluation Within IMPALA
<https://doi.org/10.1007/s43441-024-00631-8>



<https://github.com/IMPALA-Consortium/ctas>
<https://impala-consortium.github.io/gsm.simaerep/>

- AE Reporting Rate
- SAE Reporting Rate
- Non-important PD Rate
- Important PD Rate
- G3+ Lab Abnormality Rate
- Study Discontinuation Rate
- Treatment Discontinuation Rate
- Query Rate
- Outstanding Query Rate
- Outstanding Data Entry Rate
- Data Change Rate
- Screen Failure Rate
- KRI Glossary
- Error Log

Generated with the Good Statistical Monitoring {gsm} package

24 Red KRIs 65 Amber KRIs

60 of 176 sites with at least one **red or amber** KRI (34.1% of total).

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<https://github.com/Gilead-BioStats/gsm>



<https://doi.org/10.1007/s43441-024-00651-4>

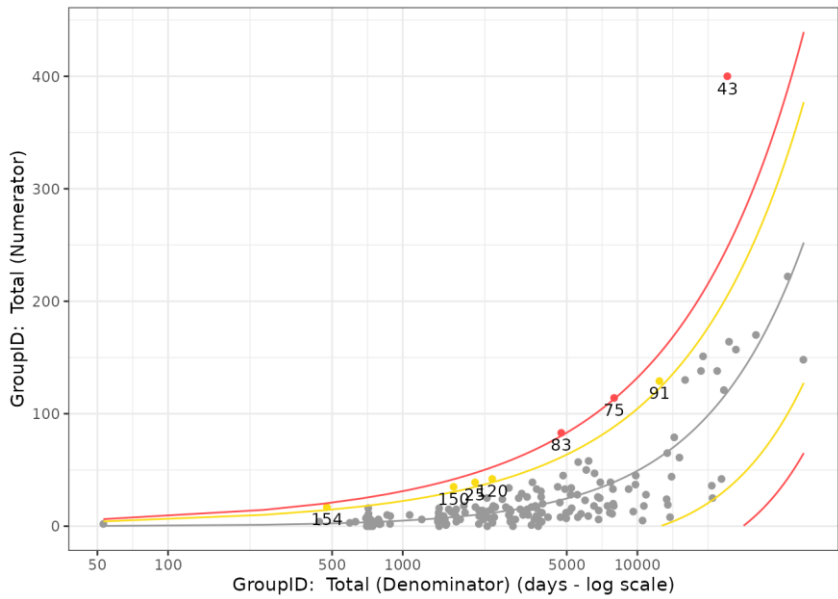
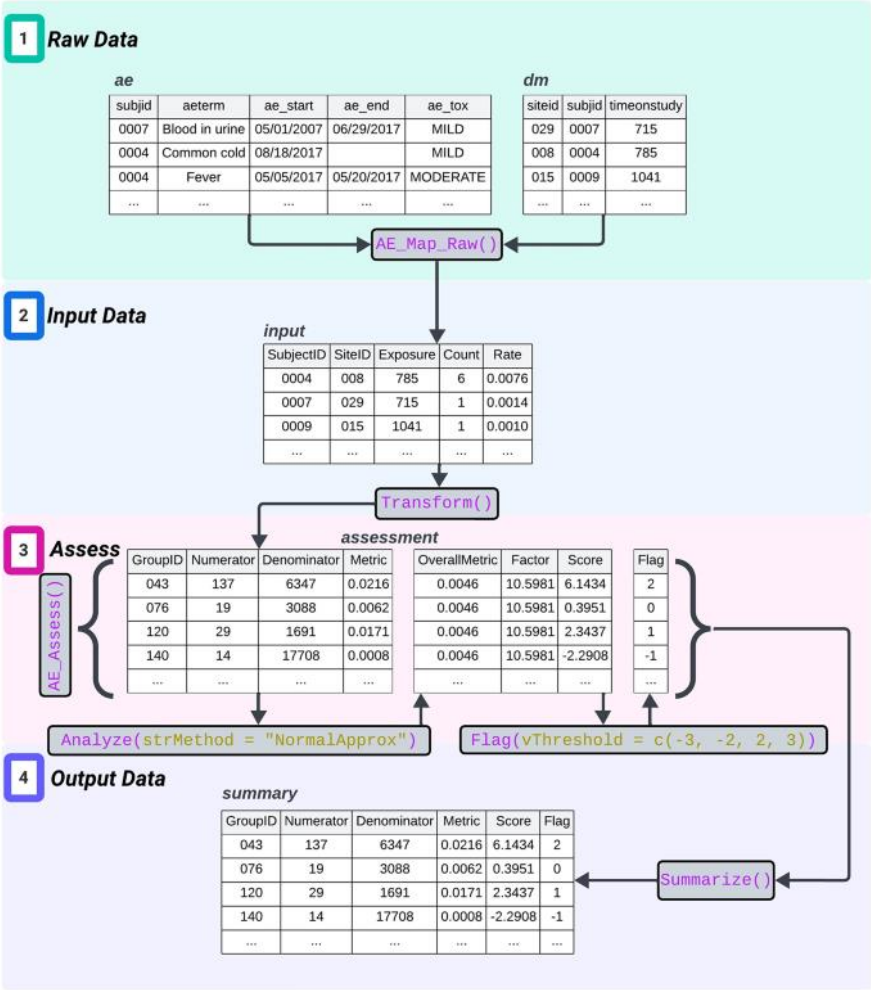
{gsm} – Good Statistical Monitoring



End to End RBQM Framework

- Mapping
- Processing
- Reporting

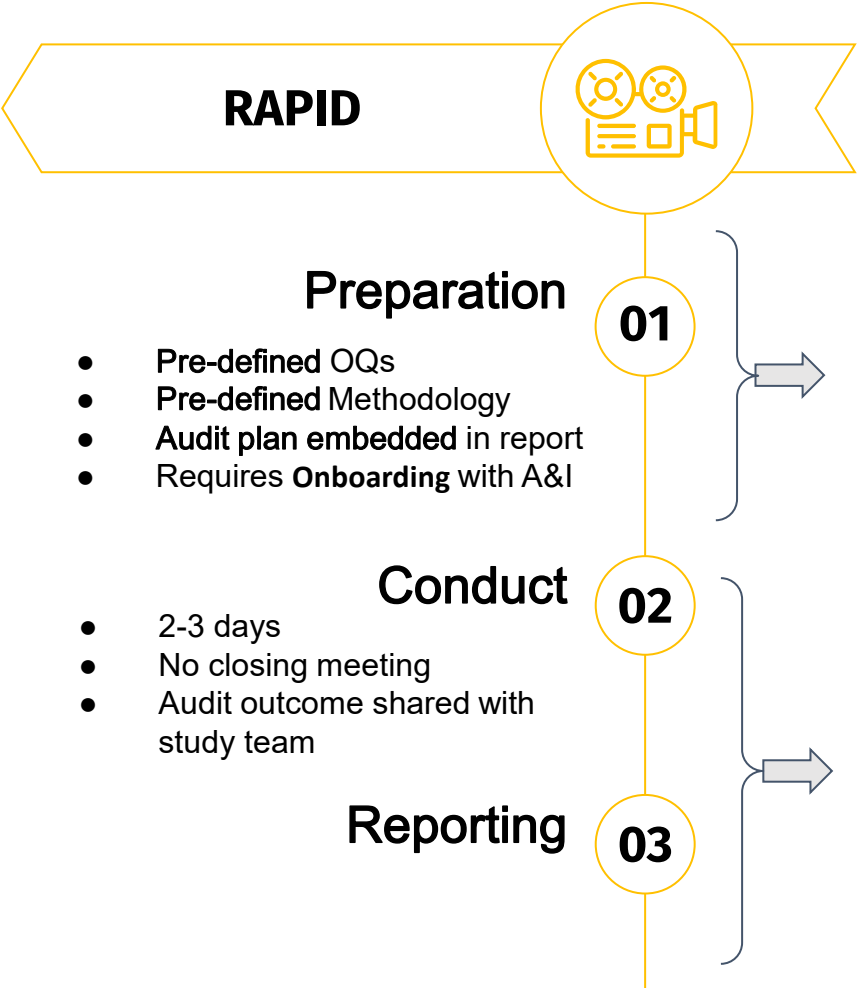
<https://github.com/Gilead-BioStats/gsm>





RAPID Audits

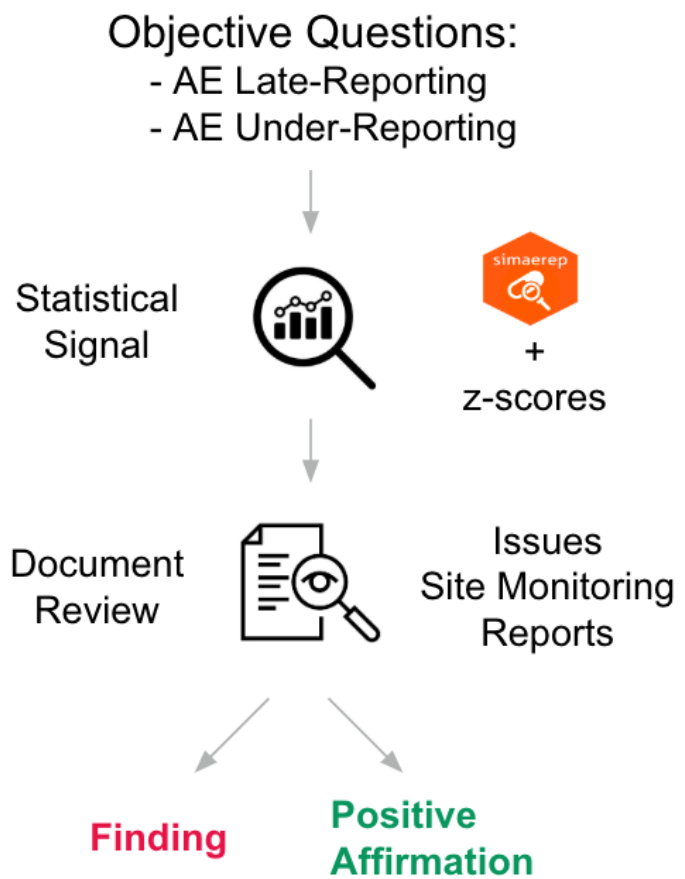
Real-time Audit Package Informed by Data



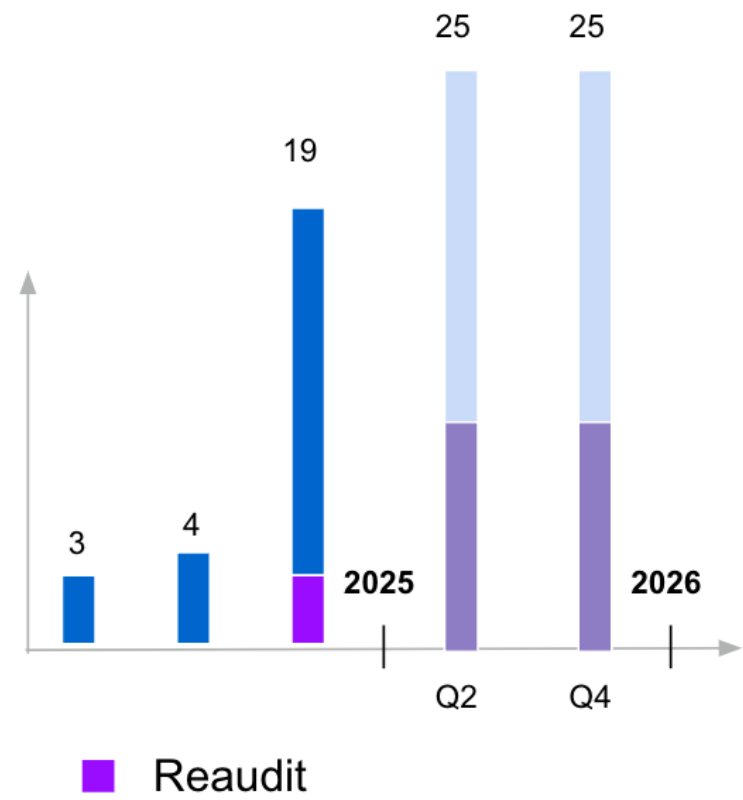
- ### RAPID Audits
- Maintain Industry Standard
 - Pre-Defined Methodology
 - Based on Data Analytics
 - High Coverage
 - Fast
 - Minimal Preparation Time

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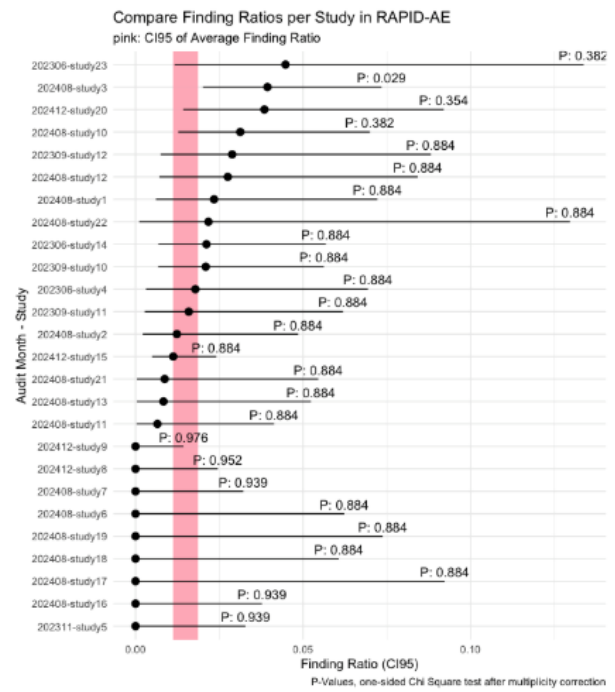
Audit Process



Studies Audited



Portfolio Oversight



Outlook

- RBQMverse metapackage suite similar to pharmaverse (metapackage for data submission)
- Increase Inter-Operability
- Continued Release of gsm extensions



Thank You



DaVinci: A Modular R/Shiny Framework for Interactive Data Visualization in Clinical Research

Isabel Glauß, Boehringer Ingelheim

Agenda

- ➔ Interactive Data Visualization with R/Shiny
- ➔ Modular Approach
- ➔ DaVinci Framework
- ➔ DaVinci Modules and their Use Cases
- ➔ How to Set Up a DaVinci App
- ➔ Our Open-Source Commitment

Disclaimer

The views and opinions expressed in this presentation are those of the presenter and not necessarily those of Boehringer Ingelheim. Boehringer Ingelheim does not guarantee the accuracy or reliability of the information provided herein.

Interactive Data Visualization with R/Shiny

- Regular data reviews are key in clinical trials
 - ➔ Examples:
data exploration, quality monitoring, safety reviews, etc.
- Traditional data review based on extensive static outputs are cumbersome to handle and may not immediately reveal all insights
- Better solution:
Interactive R/Shiny apps with real-time access to clinical data



83% of our trial teams using DaVinci apps see a **(strong) positive business impact** regarding speed & value compared to static outputs

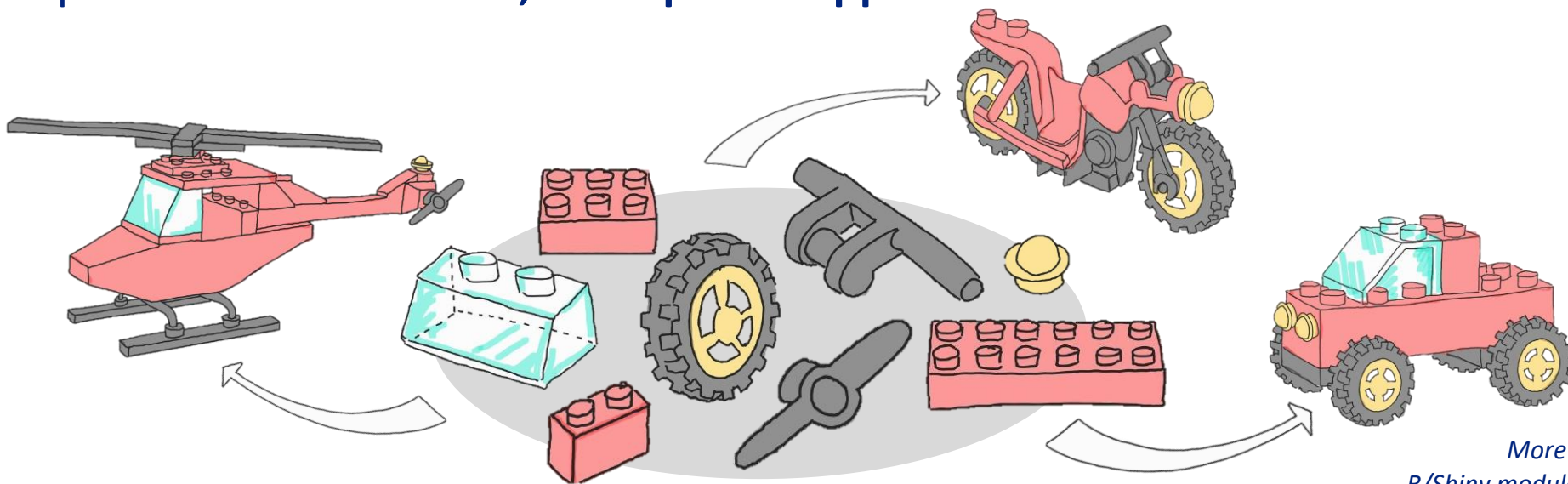


What is R/Shiny?

- R is an open-source programming language mostly used for data analysis, statistical computing and graphics
- {shiny} is an R package for creating web apps using R code
- shiny.posit.co

The Modular Approach

- One comprehensive stand-alone app that satisfies the needs of as many studies as possible quickly becomes unwieldy with trial-specific adjustments being impossible
- Therefore: DaVinci provides R/Shiny modules which serve as functional building blocks that can be composed into **customized, trial-specific apps**

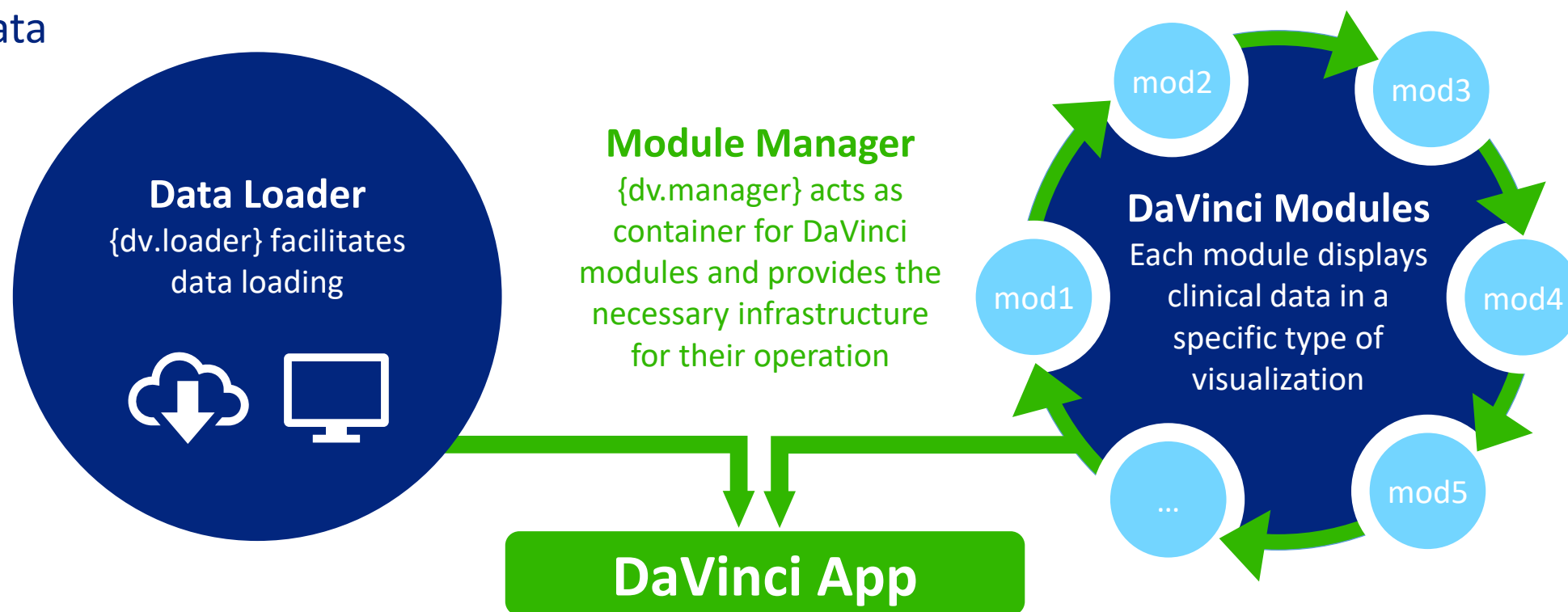


*More about the concept of
R/Shiny modules can be found here:
mastering-shiny.org/scaling-modules*

The DaVinci Framework

Main Components

DaVinci (= **Data Visualization** for **Clinical Insights**) provides a modular framework with a rich and growing set of R/Shiny modules to review and explore clinical trial data interactively



Key Features

Bookmarking



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DaVinci Module Gallery

... and example use cases

Safety Review,
Clinical Quality Monitoring

Patient Profile {dv.papo}	Clinical Timelines {dv.clinlines}	eDISH Plot {dv.edish}	Hierarchy Table {dv.tables}
Lineplot {dv.explorer.parameter}	Boxplot {dv.explorer.parameter}	Correlation Heatmap {dv.explorer.parameter}	Forest Plot {dv.explorer.parameter}
ROC curve {dv.explorer.parameter}	Scatterplot {dv.explorer.parameter}	Matrix of Scatterplots {dv.explorer.parameter}	Waterfall Plus Heatmap {dv.explorer.parameter}
Listings {dv.listings}	Bookmark Manager {dv.bookman}	Further modules are already in the pipeline...	

Exploratory Parameter
Analysis

Any use case

The DaVinci Workflow

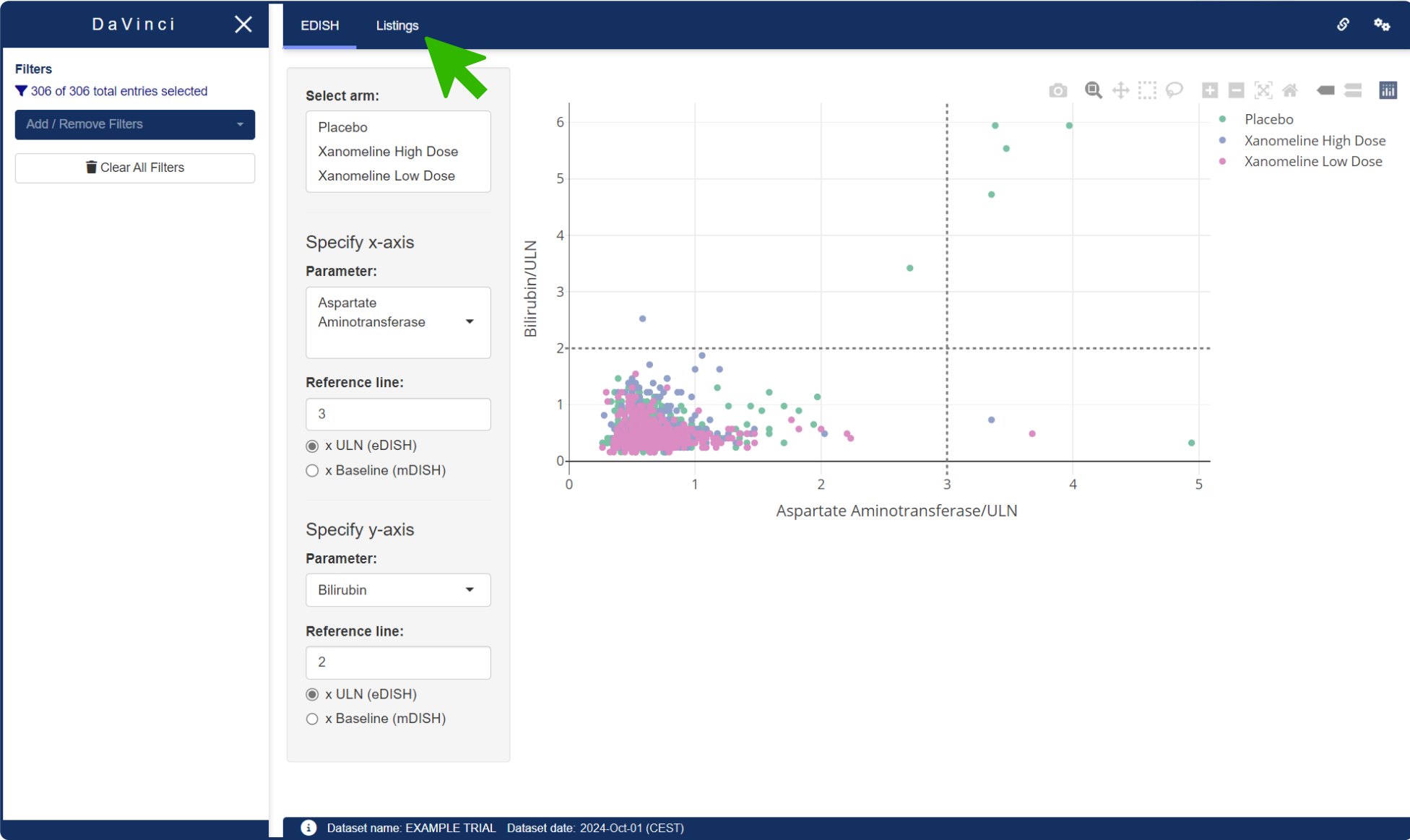
How to Set Up a DaVinci app

Note:
DaVinci can handle **any data source**, including SDTM and ADaM.
Raw data may require further preprocessing.



```

01 # I) LOAD DATA ---
02 data_list <- dv.loader::load_data(
03   sub_dir = "path/to/data",
04   file_names = c("dm", "ae", "lb")
05 )
06
07 # II) PREPROCESSING ---
08 data_list$dm <- dv.listings::convert_data(data_list$dm)
09 data_list$ae <- dv.listings::convert_data(data_list$ae)
10 data_list$lb <- dv.listings::convert_data(data_list$lb)
11
12 # III) SPECIFY MODULES ---
13 edish <- dv.edish::mod_edish(
14   module_id = "mod1",
15   subject_level_dataset_name = "dm",
16   lab_dataset_name = "lb",
17   baseline_visit_val = "SCREENING 1"
18 )
19 listings <- dv.listings::mod_listings(
20   module_id = "mod2",
21   dataset_names = c("dm", "ae", "lb")
22 )
23
24 # IV) LAUNCH APP ---
25 dv.manager::run_app(
26   data = list("EXAMPLE TRIAL" = data_list),
27   module_list = list("EDISH" = edish, "Listings" = listings),
28   filter_data = "dm"
29 )
  
```



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Our Open-Source Commitment

- After several years of in-house user research and development, DaVinci is now **open-source and available on GitHub!**



- DaVinci homepage:
<https://boehringer-ingelheim.github.io/davinci>
- DaVinci repositories:
[https://github.com/orgs/Boehringer-Ingelheim/repositories?q=dv.](https://github.com/orgs/Boehringer-Ingelheim/repositories?q=dv)

- Benefits of open-sourcing DaVinci:



- Makes our packages accessible to others
- Encourages enhancements and direct contributions from the community



Homepage



Repositories



Isabel Glauß

