

PATIENT-CENTERED OUTCOME PROJECT UPDATE

Sarah Pirio Richardson MD, FAAN

New Mexico Veterans Affairs Healthcare System

Nene & Jamie Koch Comprehensive Movement Disorders Center

University of New Mexico



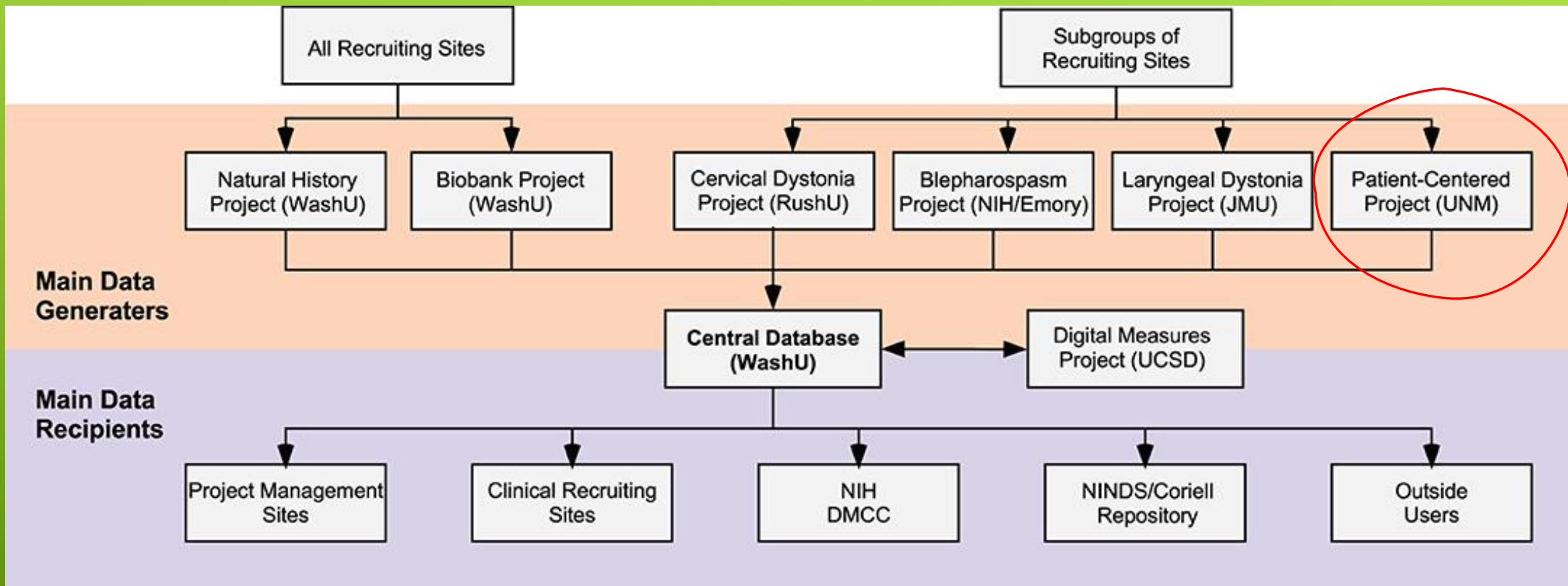
- ▶ Research support from the National Institutes of Health (P20 GM109899; U54 NS116025, R03AG075408, R01DC18282, P20GM109089) Department of Defense (W81XWH-19-CTRR-CTA)
- ▶ Clinical Trial support (Pharma 2B, AEON, ADDEX, SCION, JAZZ, MJFF)

DISCLOSURES

- **BACKGROUND**
- **PCO DEVELOPMENT**
 - **SPECIALIST PANELS**
 - **SURVEY**
- **APP DEVELOPMENT**
- **PCO VALIDATION**
 - **TRAINING**
 - **YR 5 RECRUITMENT**
- **FUTURE DIRECTIONS**

AGENDA

BACKGROUND

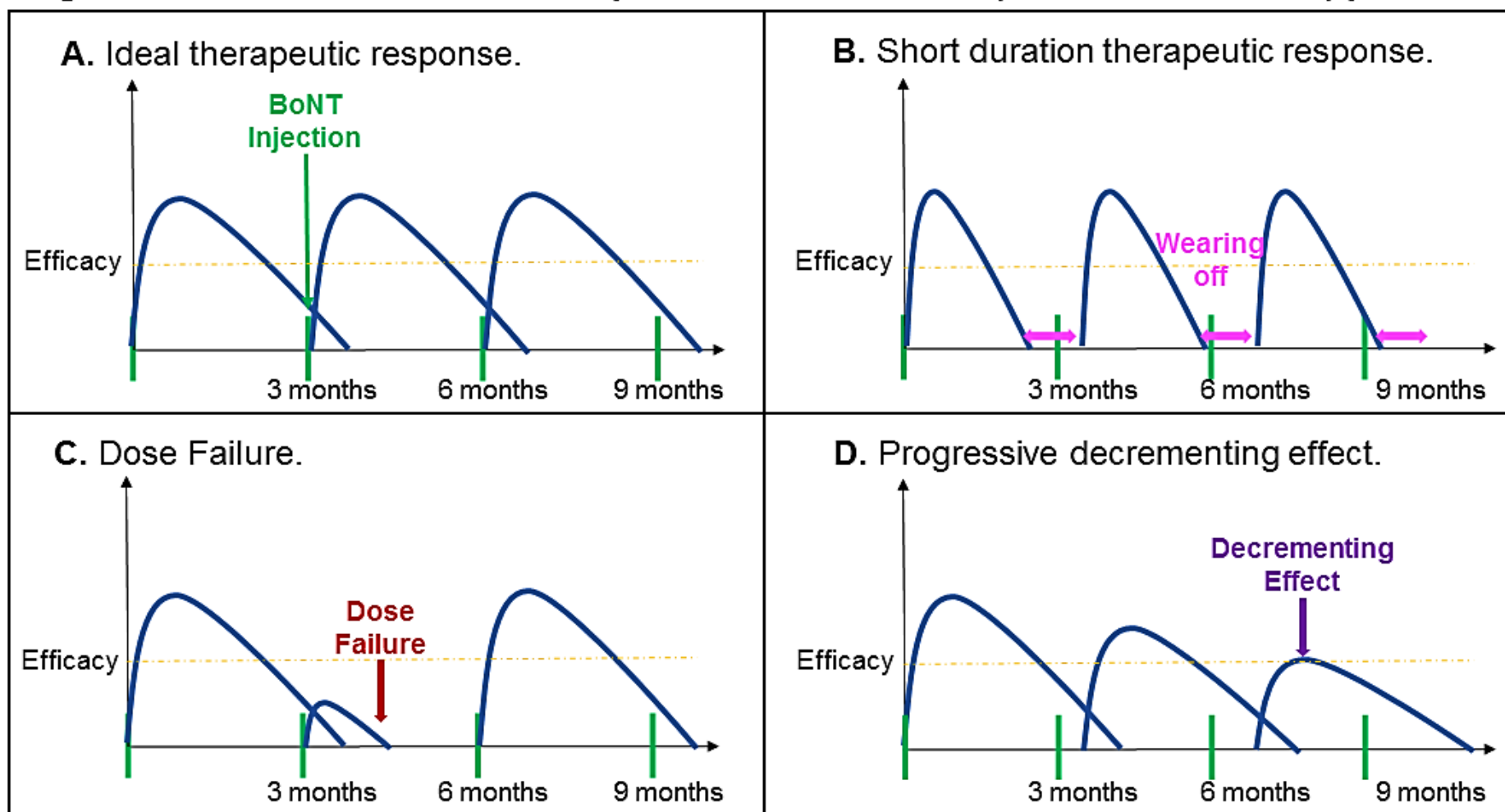


To provide *key data* to establish clinical trial readiness in future clinical trials for novel treatments for dystonia.

MAIN GOAL

- > BoNT is 1st line therapy
- > Lifelong condition requiring use of this therapy for decades possibly
- > BoNT produces significant motor improvements, QOL and pain
- > Yet, 1/3 of patients discontinue use of BoNT
- > Disability may not improve to meet patient expectations despite improvement seen by standard clinical rating scales

Figure 2. Fluctuations in severity over time and complications of therapy.



Develop a Patient-Centered Outcome (PCO) measure

- Cervical dystonia
- Blepharospasm
- Laryngeal dystonia

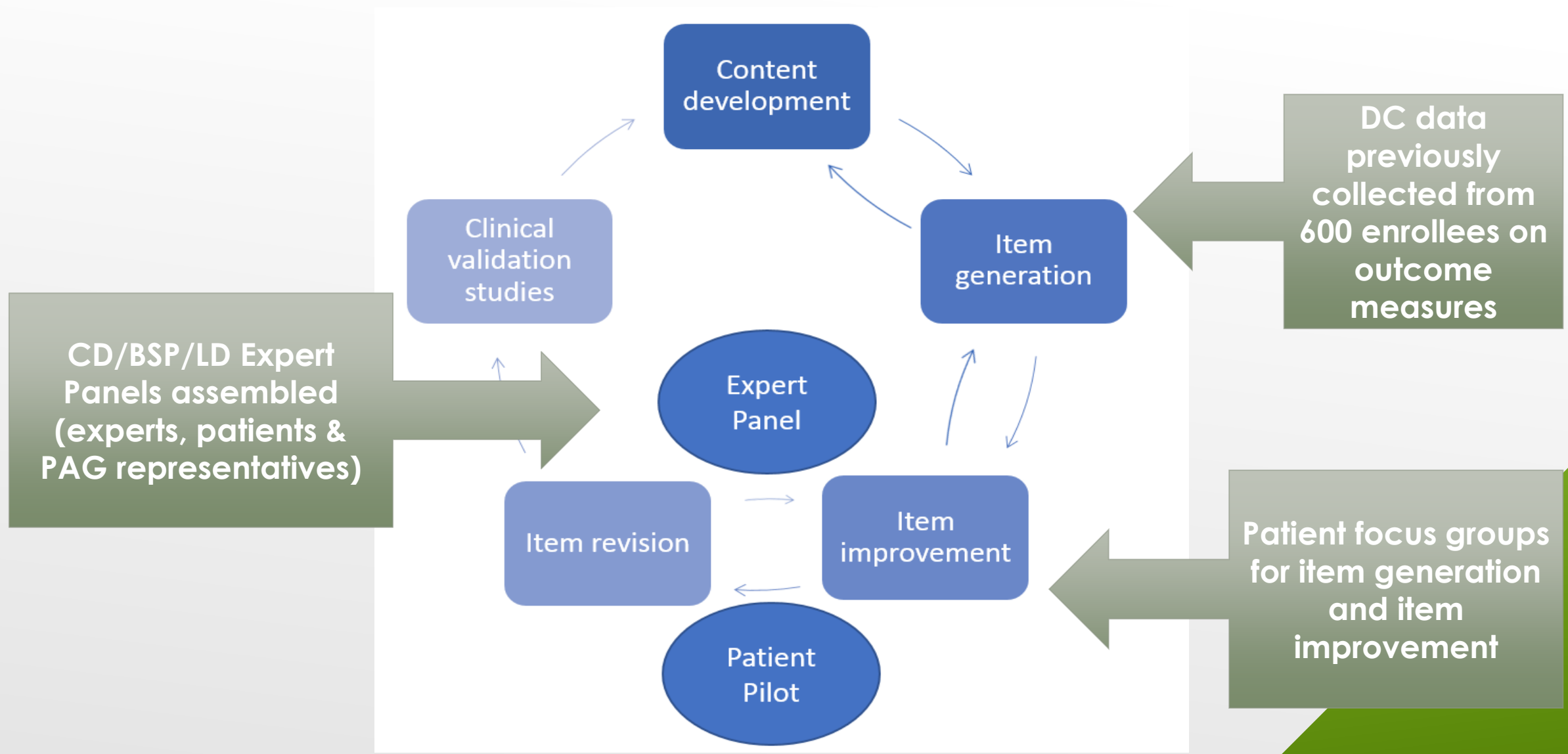
Implement PCO in app-based format

- sensitive to change
- feasible for use on frequent/weekly time scale

Characterize therapeutic response to BoNT over time

- measure effect size
- capture yo-yo effect
- prepare for future adjunct clinical trial

PCO DEVELOPMENT



- ▶ 3 domains
 - ▶ Motor symptoms
 - ▶ Activities (disability)
 - ▶ Psychosocial (including QOL)
- ▶ 14-16 questions
- ▶ Attempted to overlap items and wording consistency across PCOs
- ▶ Guidance from FDA through process

PCO OVERALL CHARACTERISTICS

BSP PANEL CHAIR:

Brian D. Berman MD, MS
Division Chair
Director of PMDC
Professor
Virginia Commonwealth
University



LD Panel Chair:

Sarah L. Schneider MS, CCC-SLP,
Co-Director
UCSF Voice and Swallowing
Center
University of California
San Francisco



Statistician:

Fares Qeadan PhD, MS, MES
Associate Professor
Biostatistics
Loyola University
Parkinson School of
Health Sciences & Public Health





DYSTONIA
MEDICAL RESEARCH FOUNDATION



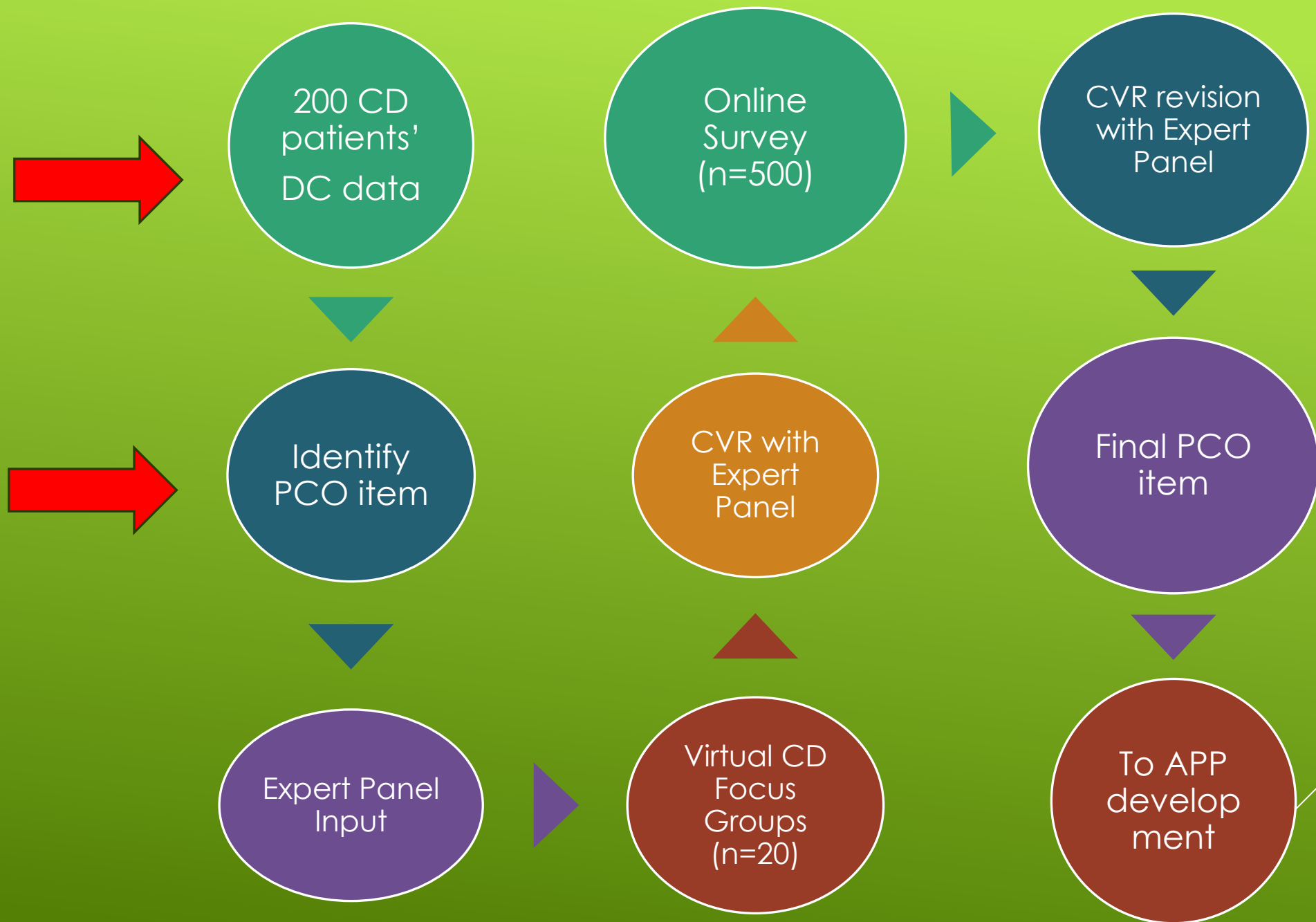
DYSPHONIA
INTERNATIONAL

FORMERLY NATIONAL SPASMODIC DYSPHONIA ASSOCIATION



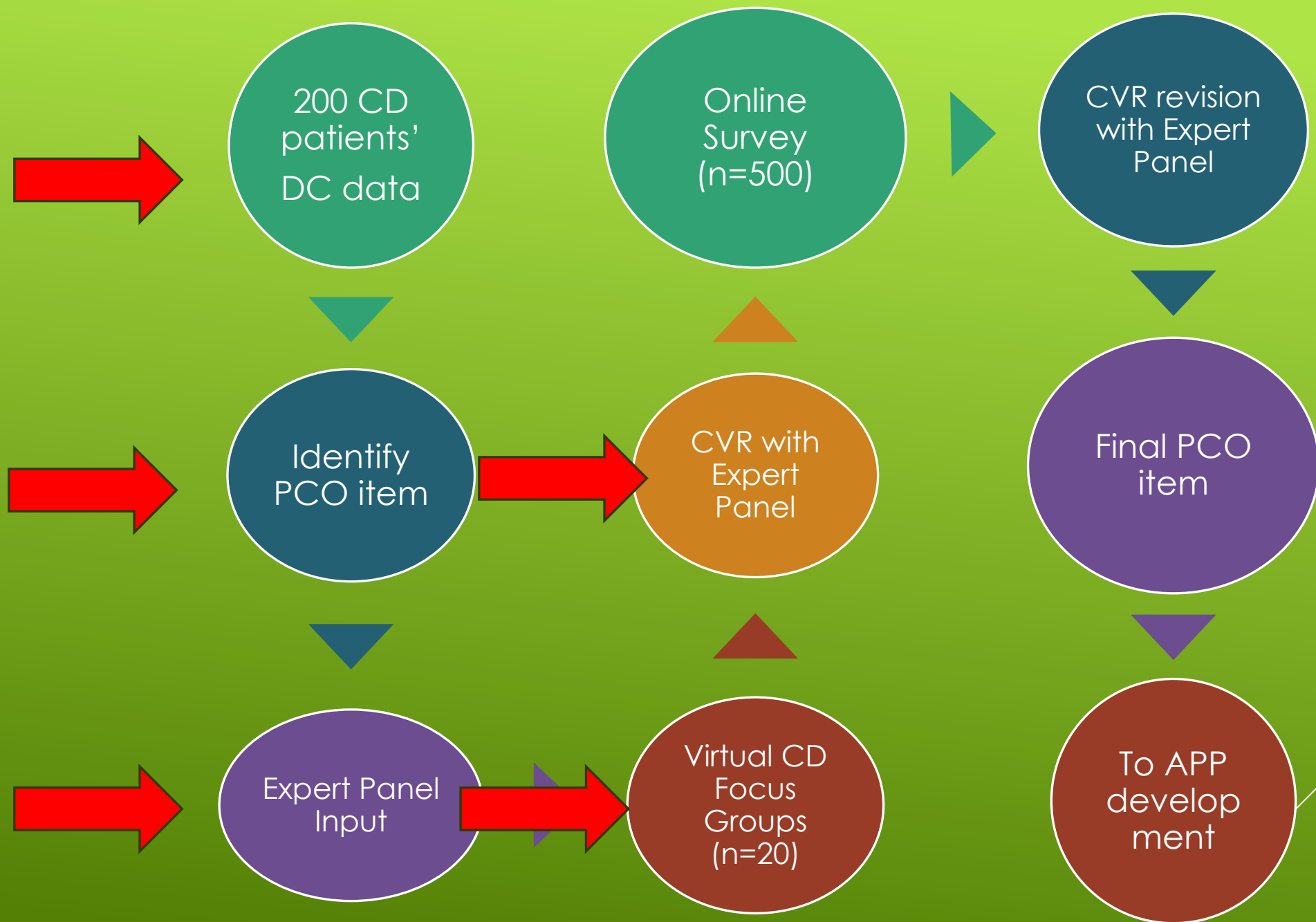
**Benign Essential
Blepharospasm
Research Foundation**

CD Panel ▼	BSP Panel ▼	LD Panel ▼
Chair: Sarah Pirio Richardson MD	Chair: Brian Berman MD MS	Chair: Sarah Schneider MS SLP
NEUROLOGY	OPHTHALMOLOGY	OTOLARYNGOLOGY
Joseph Jankovic MD	Amanda Henderson MD	Adam Klein MD
Charles Adler MD	Andrew Harrison MD	Michael Pitman MD
Marina de Koning-Tijssen MD	NEUROLOGY	NEUROLOGY
Cynthia Comella MD	Gianni de Fazio MD	Charles Adler MD PhD
PHYSICAL THERAPY	Mark Hallett MD	Joel Perlmutter MD
Teresa Kimberly PhD PT	Joseph Jankovic MD	SPEECH LANGUAGE PATHOLOGY
PATIENT ADVOCACY GROUP	PATIENT ADVOCACY GROUP	Edie Hapner PhD CCC-SLP
Janet Hieshetter	Jane Boyd MD	PATIENT ADVOCACY GROUP
Monika Benson		Kimberly Kuman
STATISTICIAN	STATISTICIAN	STATISTICIAN
Fares Qeadan PhD	Fares Qeadan PhD	Fares Qeadan PhD
DC EXEC MEMBER	DC EXEC MEMBER	DC EXEC MEMBER
H.A. Jinnah MD PhD	H.A. Jinnah MD PhD	H.A. Jinnah MD PhD
DC PROGRAM MANAGER	DC PROGRAM MANAGER	DC PROGRAM MANAGER
Gamze Kilic-Berkmen PhD	Gamze Kilic-Berkmen PhD	Gamze Kilic-Berkmen PhD



ROUND 1		
ITEMS		EXCLUSIONS
1	Frustrated_	
2	Down_	
3	Upset_	
4	Depressed_	
5	Socialising_with_friends_of_fami	
6	Fed_Up_	
7	Enjoyment_of_social_situations_	
8	Aggravated_	
9	Stressed_	
10	Irritated_	
11	Scared_	
12	More_self_conscious_in_social_si	
13	Lack_of_confidence_	
	Angry_	OOB below zero
	Anxious_	OOB below zero
	Worried_	OOB below zero
	Impatient_	OOB below zero
	Fearful_	OOB below zero
	Less_relaxed_in_social_situation	OOB below zero
	Uneasy_talking_to_strangers_	OOB below zero
	Embarrassed_about_eating_in_publ	OOB below zero
	Annoyed_	OOB below zero
	Everybody_is_staring_at_you_	OOB below zero
	Embarrassed_going_out_in_public_	OOB below zero
	Lack_of_self_confidence_	OOB below zero

ITEMS	ROUND 1		ROUND 2	
	EXCLUSIONS		EXCLUSIONS	
1	Frustrated_		Frustrated_	
2	Down_		Down_	
3	Upset_		Upset_	Repetitive/duplicate
4	Depressed_		Depressed_	Repetitive/duplicate
5	Socialising_with_friends_of_fami		Socialising_with_friends_of_fami	
6	Fed_Up_		Fed_Up_	Repetitive/duplicate
7	Enjoyment_of_social_situations_		Enjoyment_of_social_situations_	Repetitive/duplicate
8	Aggravated_		Aggravated_	Repetitive/duplicate
9	Stressed_		Stressed_	
10	Irritated_		Irritated_	Repetitive/duplicate
11	Scared_		Scared_	
12	More_self_conscious_in_social_si		More_self_conscious_in_social_si	Repetitive/duplicate
13	Lack_of_confidence_		Lack_of_confidence_	Repetitive/duplicate
	Angry_	OOB below zero		
	Anxious_	OOB below zero		
	Worried_	OOB below zero		
	Impatient_	OOB below zero		
	Fearful_	OOB below zero		
	Less_relaxed_in_social_situation	OOB below zero		
	Uneasy_talking_to_strangers_	OOB below zero		
	Embarrassed_about_eating_in_publ	OOB below zero		
	Annoyed_	OOB below zero		
	Everybody_is_staring_at_you_	OOB below zero		
	Embarrassed_going_out_in_public_	OOB below zero		
	Lack_of_self_confidence_	OOB below zero		



SYMPTOMS DOMAIN

(For each item below please score in the Relevancy and Clarity columns from 1-4 using the Rating Key)

Item	Relevancy	Clarity
1. How much neck tightness or pulling do you have due to cervical dystonia?		
2. How much neck pain do you have due to cervical dystonia?		
3. Does your head twist or turn involuntarily due to cervical dystonia?		
4. How much shaking or tremor do you have in your neck or head due to cervical dystonia?		

Symptom Domain

- How often do you blink too much?
Never-----Always
- How much difficulty do you have keeping your eyes fully open?
None-----Extreme
- How much discomfort do you have due any gritty, sandy or burning sensations in your eyes?
None-----Extreme
- Do spasms close your eyes against your will?
None-----Always
- How much discomfort do you have with bright light?
None-----Always
- How often do you experience uncontrollable movements of your tongue, mouth or jaw?
Never-----Always

QUANTIFICATION OF CONTENT VALIDITY RATING: CD Expert Panel

TABLE 1: Rating Key for Expert Panel

Relevancy	Clarity
1 [not relevant]	1 [not clear]
2 [item needs some revision]	2 [item needs some revision]
3 [relevant but needs minor revision]	3 [clear but needs minor revision]
4 [very relevant]	4 [very clear]

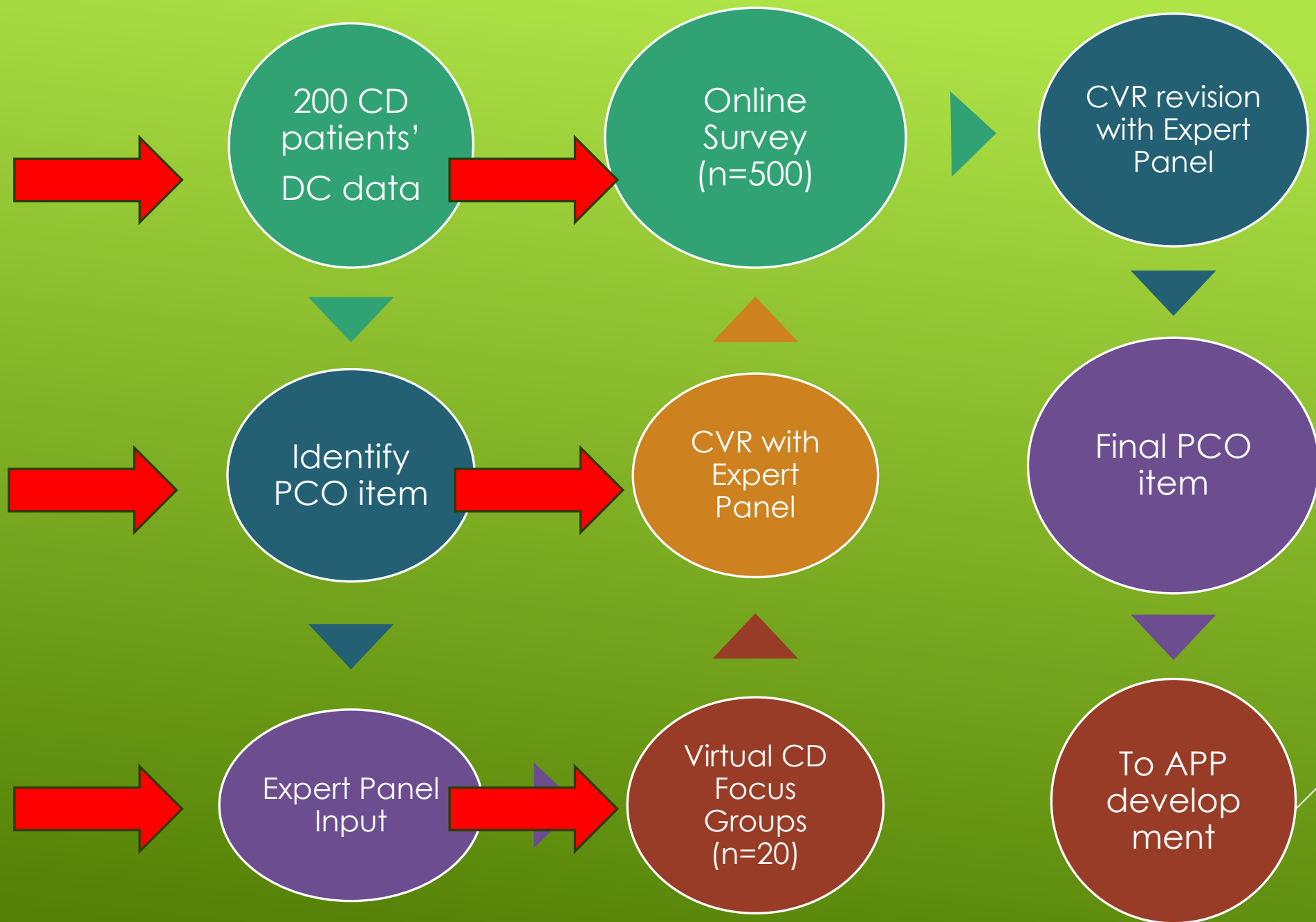
Symptoms Domain										Number Agreement	I-CVI
SD Q1. Relevancy	4		3	4	4	4	4	4	4	8	1
SD Q1. Clarity	4		2	4	4	4	4	3	4	7	0.875
SD Q2. Relevancy	4		4	4	4	4	4	4	4	8	1
SD Q2. Clarity	4		4	4	4	3	3	3	4	8	1
SD Q3. Relevancy	4		3	4	4	4	4	4	4	8	1
SD Q3. Clarity	4		3	2	4	3	4	4	4	7	0.875
SD Q4. Relevancy	4		4	4	4	4	4	3	4	8	1
SD Q4. Clarity	4		4	4	4	3	4	3	4	8	1

ACTIVITIES DOMAIN

(For each item below please score in the Relevancy and Clarity columns from 1-4 using the Rating Key)

Item	Relevancy	Clarity
1. How much difficulty do you have in your activities of daily living (dressing, eating, bathing, writing) due to your cervical dystonia?		
2. How much limitation do you have in work performance (either household work or outside employment) due to your cervical dystonia?		
3. How much limitation do you have in driving due to your cervical dystonia?		
4. How much limitation do you have in exercising due to your cervical dystonia?		
5. How much limitation do you have in activities that require holding the head straight (such as using a computer or watching television) due to your cervical dystonia?		
6. How much limitation do you have in your leisure activities due to your cervical dystonia?		

Activities Domain										Number Agreement	I-CVI
AD Q1. Relevancy	4		4	4	4	4	4	4	4	8	1
AD Q1. Clarity	4		3	4	4	4	4	3	4	8	1
AD Q2. Relevancy	4		4	4	4	4	4	4	4	8	1
AD Q2. Clarity	4		3	4	4	4	4	4	4	8	1
AD Q3. Relevancy	4		3	4	4	4	4	4	4	8	1
AD Q3. Clarity	4		3	4	4	3	4	4	2	7	0.875
AD Q4. Relevancy	1		1	4	4	3	4	4		5	0.625
AD Q4. Clarity	4		1	2	4	3	4	3	2	5	0.625
AD Q5. Relevancy	4		4	4	4	4	3	3	4	8	1
AD Q5. Clarity	4		3	4	4	3	4	4	4	8	1
AD Q6. Relevancy	4		3	4	4	3	4	3	4	8	1
AD Q6. Clarity	4		3	4	4	3	4	3	2	7	0.875



Distribution of response by weeks:

week	Frequency	Percent	Cumulative Frequency	Cumulative Percent
June 22-June 26	99	16.78	99	16.78
June 27-July 3	303	51.36	402	68.14
July 4-July 10	84	14.24	486	82.37
July 11-July 15	104	17.63	590	100.00

Question		Frequency	Percent of patients reported YES for relevance of question to their diagnosis of cervical dystonia	Rank
1	neck tightness or pulling	519	97.01	1
11	quality of life	437	95.83	2
2	neck pain	468	91.23	3
9	ability to do activities that require holding your head straight	424	91.18	4
13	ability to interact in social situations	397	89.01	5
10	ability to do leisure activities	408	88.50	6
3	twisting or turning	436	86.85	7
14	feeling anxious or depressed	379	85.75	8
8	ability to exercise	393	83.97	9
6	work performance	391	81.63	10
5	ability to do activities of daily living	374	77.11	11
12	sleep	343	75.88	12
4	shaking or tremor	363	73.63	13
7	ability to drive	344	72.27	14

- The development of these PCO measures was accomplished during the COVID-19 pandemic
 - 1) using robust existing patient-centered data from previous Dystonia Coalition projects
 - 2) active engagement with PAGs
 - 3) use of virtual focus groups and online surveys

PCO DEVELOPMENT : CONCLUSIONS

APP DEVELOPMENT

Collaboration with TekSynap

Weekly meetings
iOS beta testing
(through TestFlight)
Android beta testing
(through Google
Drive download)

Application Features

- User-friendly interface
- Easy-to-read text
- Simple questionnaire slider bar
- Menu toolbar
- Push-notification reminder switch

Data Storage

Web-based secure
admin panel
Accessibility
iOS compatibility
Android
compatibility

“SYMPTOM SNAP”

- 16 Cervical Dystonia questions
- 18 Blepharospasm questions
- 15 Laryngeal Dystonia questions
- Numerical rating scale format
- Sliding bar with anchors

DEVELOPMENT OF A SMARTPHONE APPLICATION ABLE TO CAPTURE PATIENT-CENTERED OUTCOME (PCO) MEASURES FOR DYSTONIA

Sarah Pirio Richardson, Paul Reyes, Arlann Erskine, Brian Berman, Sarah L. Schneider, Janet Hieshetter, Kimberly Kuman, Cynthia Comella, David Peterson, Gamze Kilic-Berkmen, Laura Wright, Fares Qeadan, Samantha Pentecost, Joel S. Perlmutter, H. A. Jinnah



INTRODUCTION

GOAL

To establish clinical trial readiness for novel treatments for dystonia.

BACKGROUND AND STAGE A: PCO DEVELOPMENT

Botulinum neurotoxin (BoNT) is a first-line therapy for focal dystonia resulting in significant improvement, yet 1/3 of patients discontinue use suggesting that the therapy may not fully address patient expectations. Patient-Centered Outcome (PCO) measures for three major dystonia subtypes – cervical dystonia (CD), blepharospasm (BSP), and laryngeal dystonia (LD) – across motor, disability, and psychosocial domains were developed.

STAGE A: APP DEVELOPMENT

Develop a smartphone application able to capture PCO measures to track changes in responses over time.

METHODS

Collaboration with software company TekSynap

- Weekly meetings with developers
- iOS beta testing (through TestFlight)
- Android beta testing (through Google Drive download)

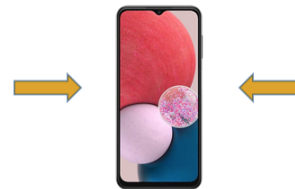
RESULTS

Application Features

- User-friendly interface
 - Easy-to-read text
 - Simple questionnaire slider bar
 - Menu toolbar
 - Push-notification reminder switch
- Pages
- Introduction Page
 - Login Page
 - Home Page
 - Questionnaire Pages
 - Contact Us Page
 - Notification Page

RESULTS

TEST THE APP



TEST THE APP

RESULTS

Questionnaires

- 16 Cervical Dystonia questions
- 18 Blepharospasm questions
- 15 Laryngeal Dystonia questions
- Numerical rating scale format

Data Storage

- Web-based secure admin panel

Accessibility

- iOS compatibility
- Android compatibility



CONCLUSIONS

NEXT STEPS

Stage B: Project Recruitment

- Invite patients regularly receiving BoNT as part of their standard clinical care to install the app on a smartphone and complete the questions in the app on a weekly basis throughout their BoNT cycle
- Use app data to measure therapeutic response to BoNT on a weekly basis

Future Application/Data Uses

- Application used as a journal for users to record their symptoms
- Data used to provide direction in development of novel treatments for dystonia

REFERENCES AND ACKNOWLEDGEMENTS

Kilic-Berkmen G, et al. The Dystonia Coalition: A Multicenter Network for Clinical and Translational Studies. *Front Neurol.* 2021;12(660909)



DYSTONIA
MEDICAL RESEARCH FOUNDATION



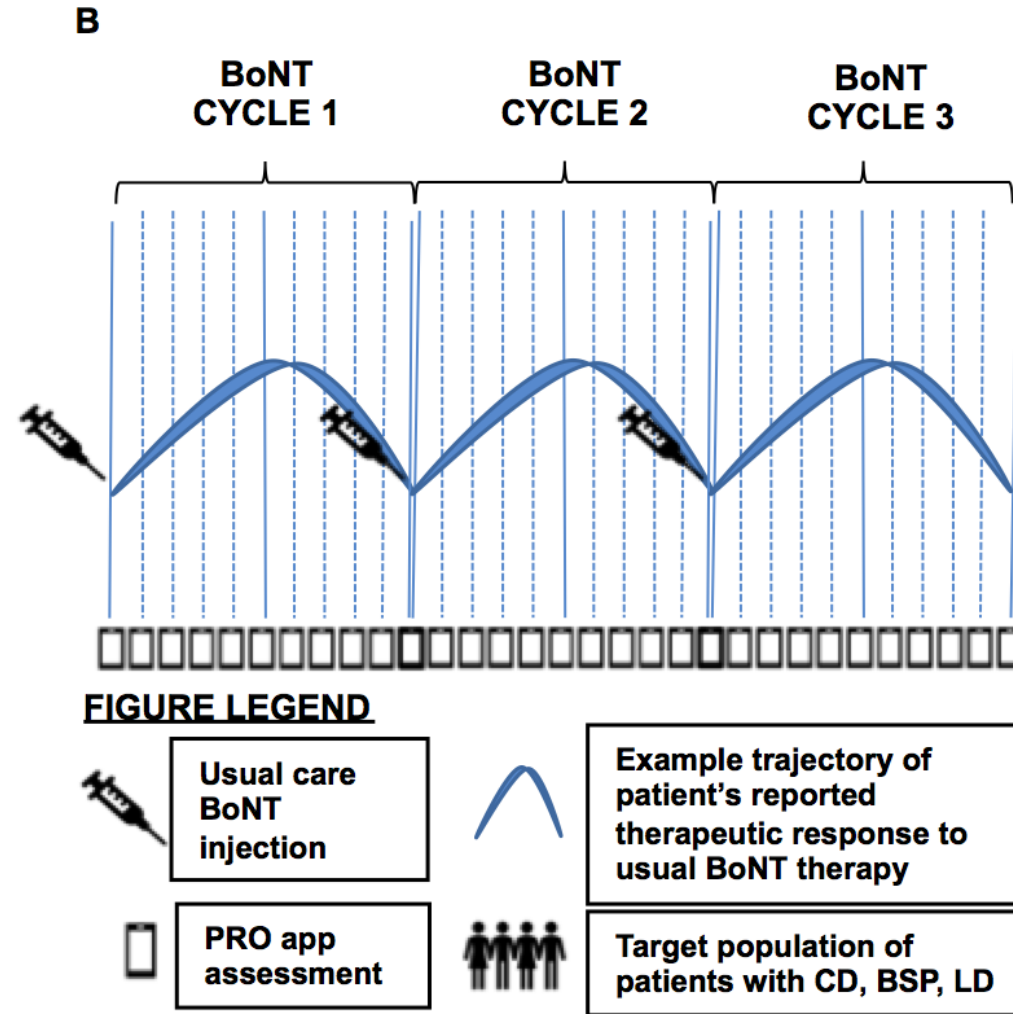
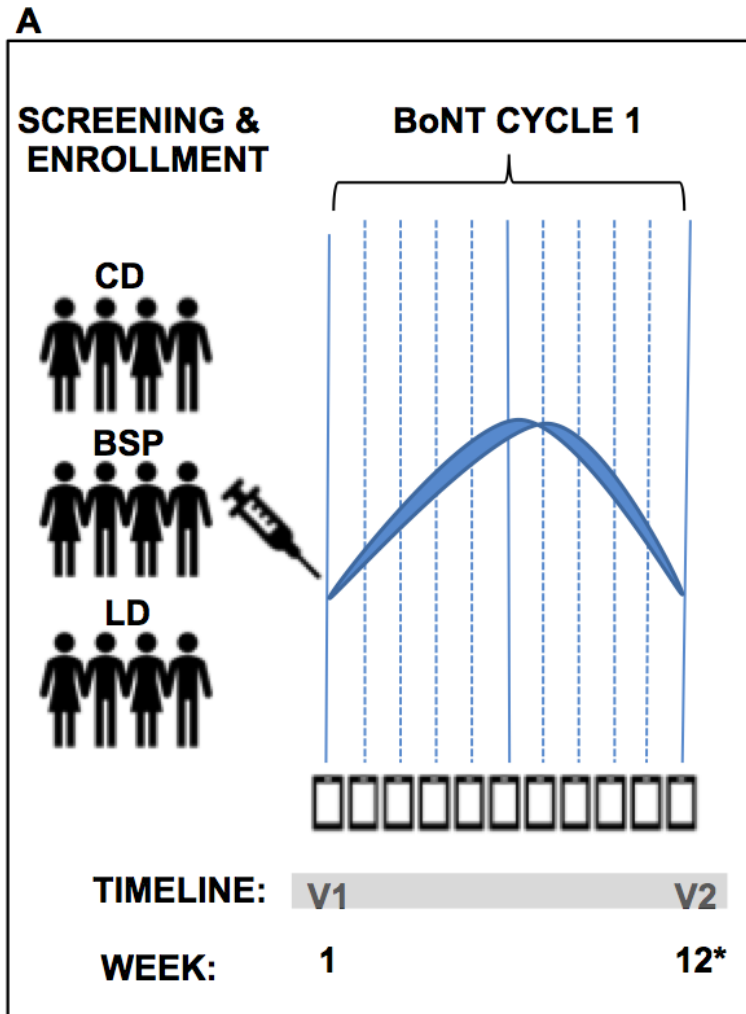
DYSPHONIA
INTERNATIONAL
FORMERLY NATIONAL SPASMODIC DYSPHONIA ASSOCIATION

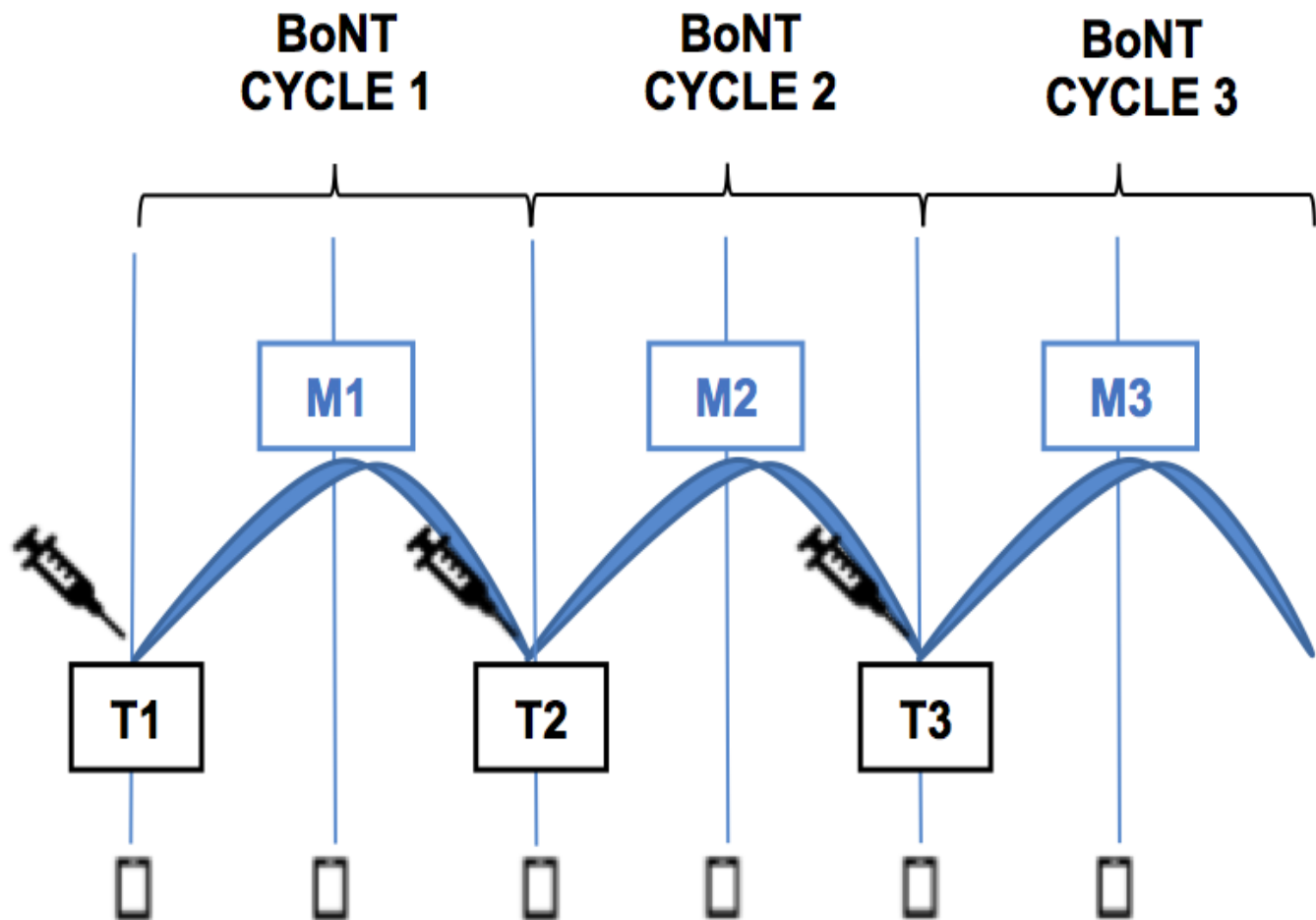


Benign Essential
Blepharospasm
Research Foundation



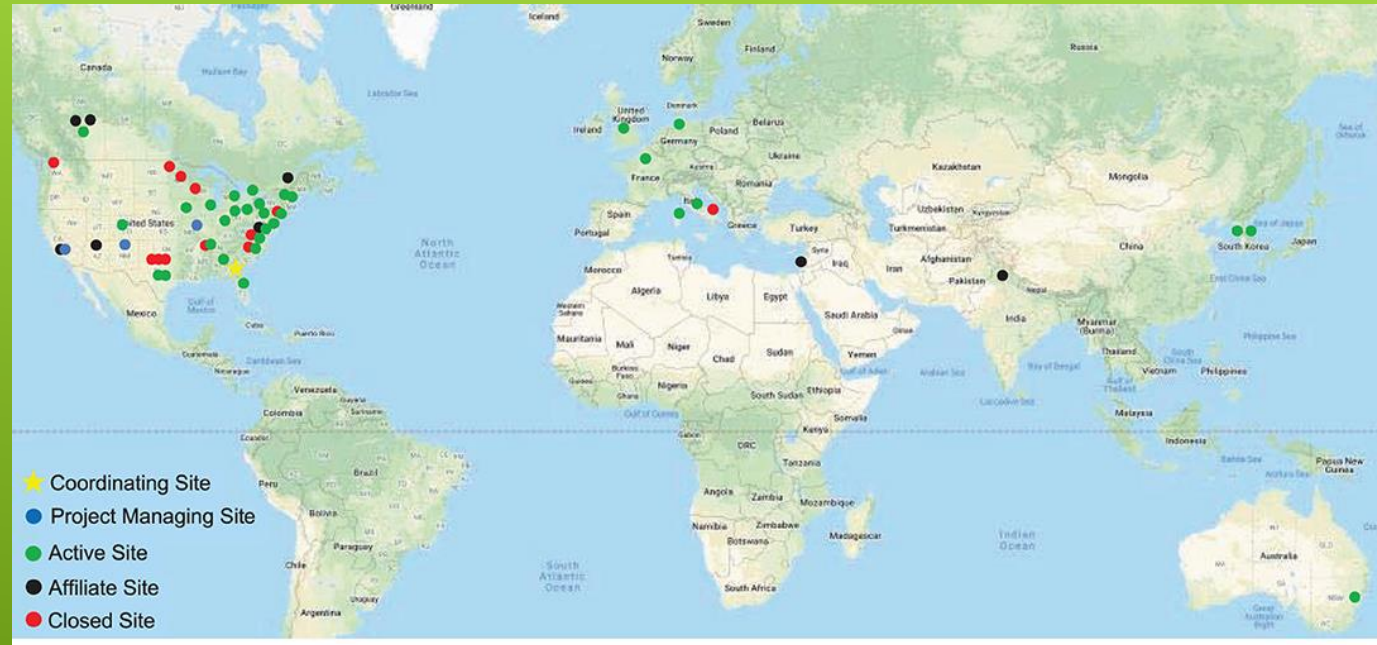
PCO VALIDATION





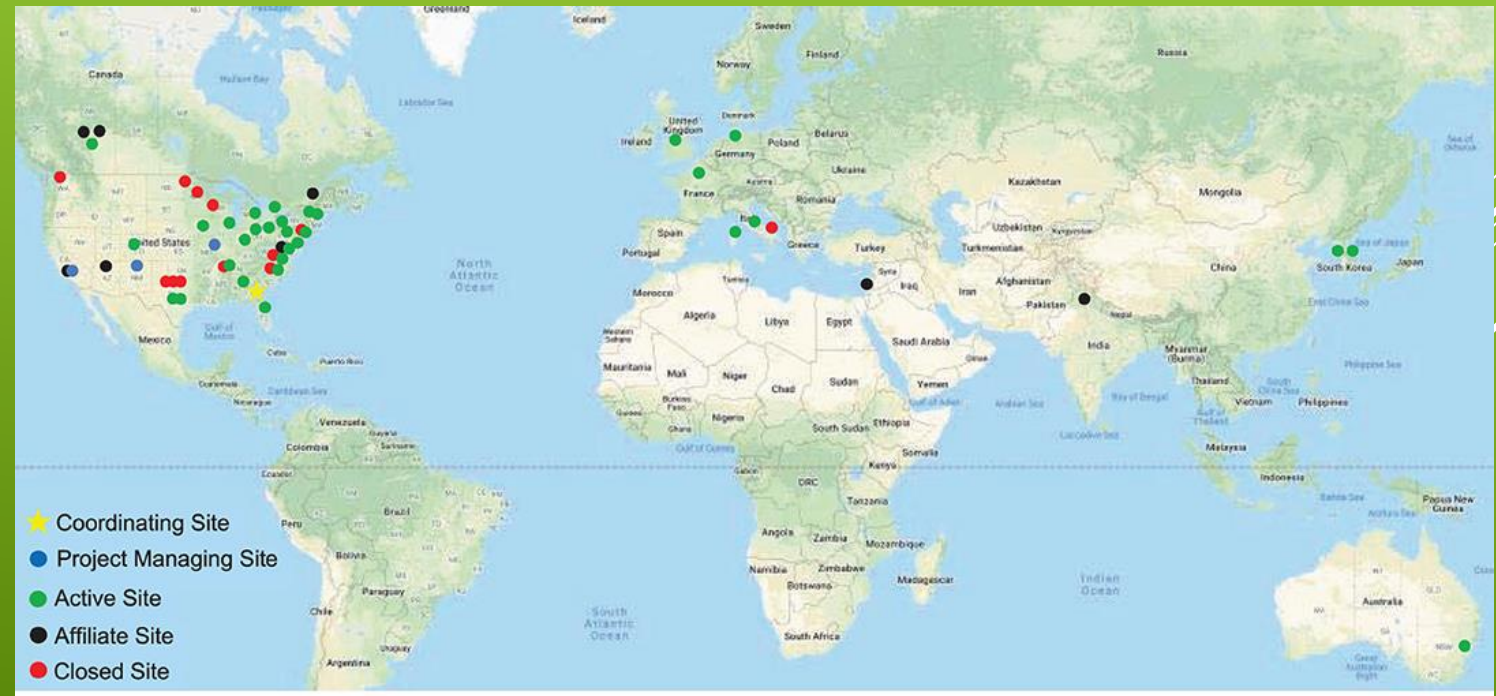
ENROLLMENT
GOAL:
80 CD
80 BSP
80 LD
(CEILING 100)

- ▶ Sites were chosen based on interest in participating and track record of successful enrollment in prior DC funding cycles
- ▶ Active site
 - ▶ IRB-approved
 - ▶ Site activated by DC
 - ▶ MOU with DMRF
- ▶ English-speaking



SITE ACTIVATION PROCESS

- ▶ **Baylor**
- ▶ **Emory**
- ▶ **Rochester**
- ▶ **Rush**
- ▶ **Toronto Western**
- ▶ **U Calgary**
- ▶ **U Cincinnati**
- ▶ **Colorado Anschutz**
- ▶ **U Florida**
- ▶ **U Iowa**
- ▶ **U New Mexico**
- ▶ **U Maryland**
- ▶ **VCU**
- ▶ **WashU**
- ▶ **Westmead Hospital**



PCO coordinator:
Paul Reyes
University of New
Mexico



PCO Coordinator:
Arlann Erskine
University of New
Mexico



- ▶ Each PCO recruiting site will have 4 months (from the start day of the project) to enroll 10 cervical dystonia, 10 blepharospasm, and 10 laryngeal dystonia patients
- ▶ Once the 4-month period is over, recruitment will become competitive, and any PCO site can recruit until total targets are reached as long as <25% total n
- ▶ The aim is to complete enrollment of all 100 cases of each subtype (CD, BSP, LD) within 6 months of project start date, and then follow each case over 3 injection cycles

PCO RECRUITING QUOTA

- ✓ Attend or review recorded PCO Investigator and Coordinator Training
- ✓ Obtain APP access and training (to be coordinated by UNM Site)
- ✓ Receipt of revised Study Manual and all PCO CRFs (to be coordinated by UNM Site and Emory)

SITE ACTIVATION PROCESS

FUTURE DIRECTIONS

- ▶ Use as an outcome measure in clinical trials
- ▶ Allow the identification of therapeutic gaps
 - ▶ Comparison to clinician rating scales and objective measures
- ▶ Diary function



NIH/NCATS/NINDS U54 NS116025

