2nd Annual Cardio-Oncology Workshop:

Assessment of Cardiovascular Toxicities in Immuno-Oncology Trials

Session 6. From big data to smart data for identification of cardiovascular toxicities in post-marketing

December 1, 2017

ASCO's CancerLinQ®: Using real-world evidence for discovery

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American Society of Clinical Oncology
Vice President and Medical Director
CancerLinQ



ASCO & CancerLinQ



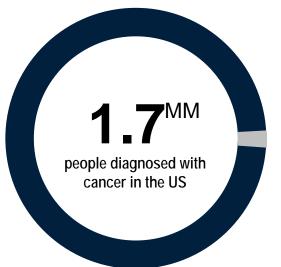
- Leading professional organization representing physicians caring for those with cancer
- >44,000 members from 100+ countries
- Mission: Conquering cancer though research, education, and promotion of the highest quality patient care



- Not-for-profit subsidiary of ASCO
- Dedicated staff and governing board
- Mission: Empowering the oncology community to improve quality of care and patient outcomes through transformational data analytics



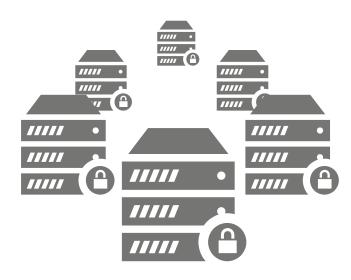
Getting to the data



97%

of patient data

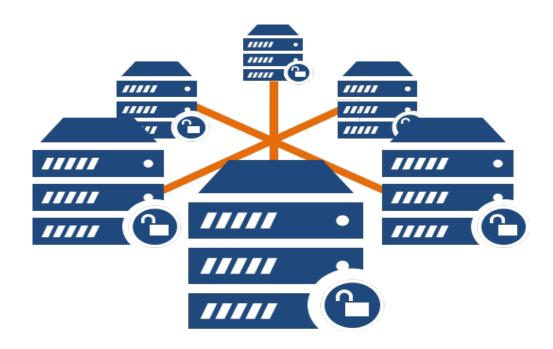
locked away in unconnected
files and servers





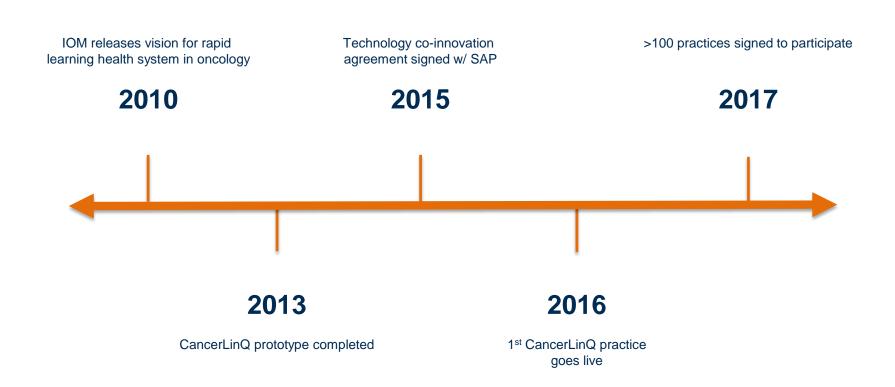
What if...

We could bring all the electronic data that is collected from the every day care of every cancer patient into one rapid learning network?





CancerLinQ milestones



QI



Measure and benchmark quality of care

Research



Unlock, assemble, and analyze de-identified cancer patient medical records

QI



Provide guidance by identifying the best evidence-based course of care

ASCO
CANCER*LINQ*
Learning Intelligence Network for Quality

Research



Uncover patterns to generate knowledge



Key functions & capabilities



Quality performance indicators: real-time clinical quality metrics, prospective opportunities to improve performance



CancerLinQ Insights: cohort creation & data exploration for trends from the aggregated, de-identified database



Visualized timeline: a longitudinal view of oncologic milestones in a patient's clinical event history, to construct a patient's story



Powerful analytic reports: suite of analytic reports for quick observations and insights of the practice patient population at a glance



CancerLinQ progress to date

113

practices/ cancer centers

29

implementations in progress

39

active sites

12

source systems represented

~2,500

oncologists

~600K

active cancer patient records

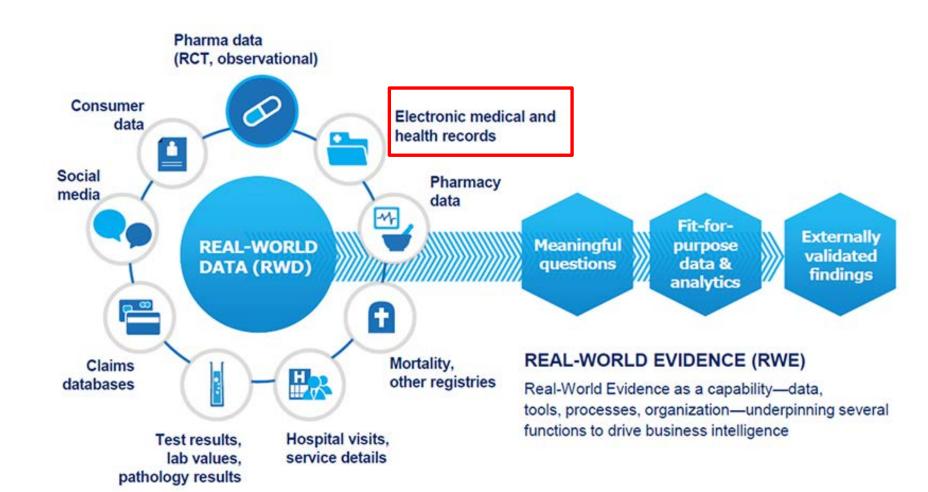


How CancerLinQ works





What is real-world evidence?





What is CancerLinQ Discovery™?

An extension of CancerLinQ's QI-focused database designed to support hypothesis-based research

- Key structured data elements → additional editorial/curation effort to ensure that those data elements exist in a canonical form
- 2. Uses natural language processing and manual curation to extract additional data from unstructured data
- 3. Initial area of focus: non-small cell lung cancer
- Third parties can submit data requests to the CancerLinQ
 Discovery Research & Publications Committee for approval



Using CancerLinQ for RWE-driven research

- Hypothesis generation from observational data, e.g., offlabel use, risk stratification
- Patterns of care
- Post-market toxicity assessment **
- Cohort identification, frequency of target population*
- Cohort assembly, location of target population*
- Registry-driven randomized clinical trials
- Comparative effectiveness research
- Collection of patient-reported outcomes

(*use case – clinical trials facilitation)



RWE to gain insights re CV toxicity of IO

Search for diagnostic codes (ICD9/10) - timing

- Myocarditis
- Cardiomyopathy/CHF
- Pericarditis, etc.

Search for biomarkers

- Troponin T or troponin I
- > CK-MB
- BNP/NT-proBNP
- AST or LDH (non-specific in ca population)

Search for new drugs

- ACE inhibitors
- Beta blockers
- Diuretics