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Drug Safety and Effectiveness Network

**Canadian Association for Population Therapeutics
April 21, 2009**

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Outline

- Genesis of the Drug Safety and Effectiveness Network (DSEN)
- Public Policy Objectives for the DSEN
- DSEN Design and Implementation (Diane Forbes)



Driving Force

- Large gaps in the evidence available about the safety and effectiveness of drugs based on their use in the “real world” by diverse patient groups, outside the controlled experimental environments of clinical trials
- Evolution of knowledge about medicines demands that governments and other decision-makers seek better evidence about the balance of benefit and risk throughout the product life cycle



Current Environment

- Post-market studies are largely *ad hoc* – predominantly driven by investigator interest
- Evidence generated does not always correspond to the needs of decision-makers (e.g., public payers, etc)
- Limited coordination and collaboration among researchers and decision makers to identify and address the most urgent evidence gaps
- Need for more rapid response to important policy concerns related to drug safety and/or effectiveness



A Public Policy Priority

- 2004 First Ministers Health Accord – the “10 year plan”
- Strengthening evaluation of real-world drug safety and effectiveness (RWSE) included as one of the five priority elements in the [National Pharmaceuticals Strategy](#) (NPS)
 - Recognition that RWSE knowledge gaps are a clear barrier to effective, evidence-based decision making
 - Need for greater coordination of efforts to generate and transfer information necessary to fill evidence gaps and support decision makers in a timely manner



NPS

- Provided opportunity for collaborative development of options to improve our knowledge of RWSE
- *Medicines that Work for Canadians: Business Plan for a Drug Effectiveness and Safety Network* (2007)
 - Collaborative effort among NPS partners, Canadian Institutes of Health Research (CIHR), and the Canadian Drug Policy Development Coalition
 - http://www.hc-sc.gc.ca/hcs-sss/pubs/pharma/2007-med-work_eff/index-eng.php



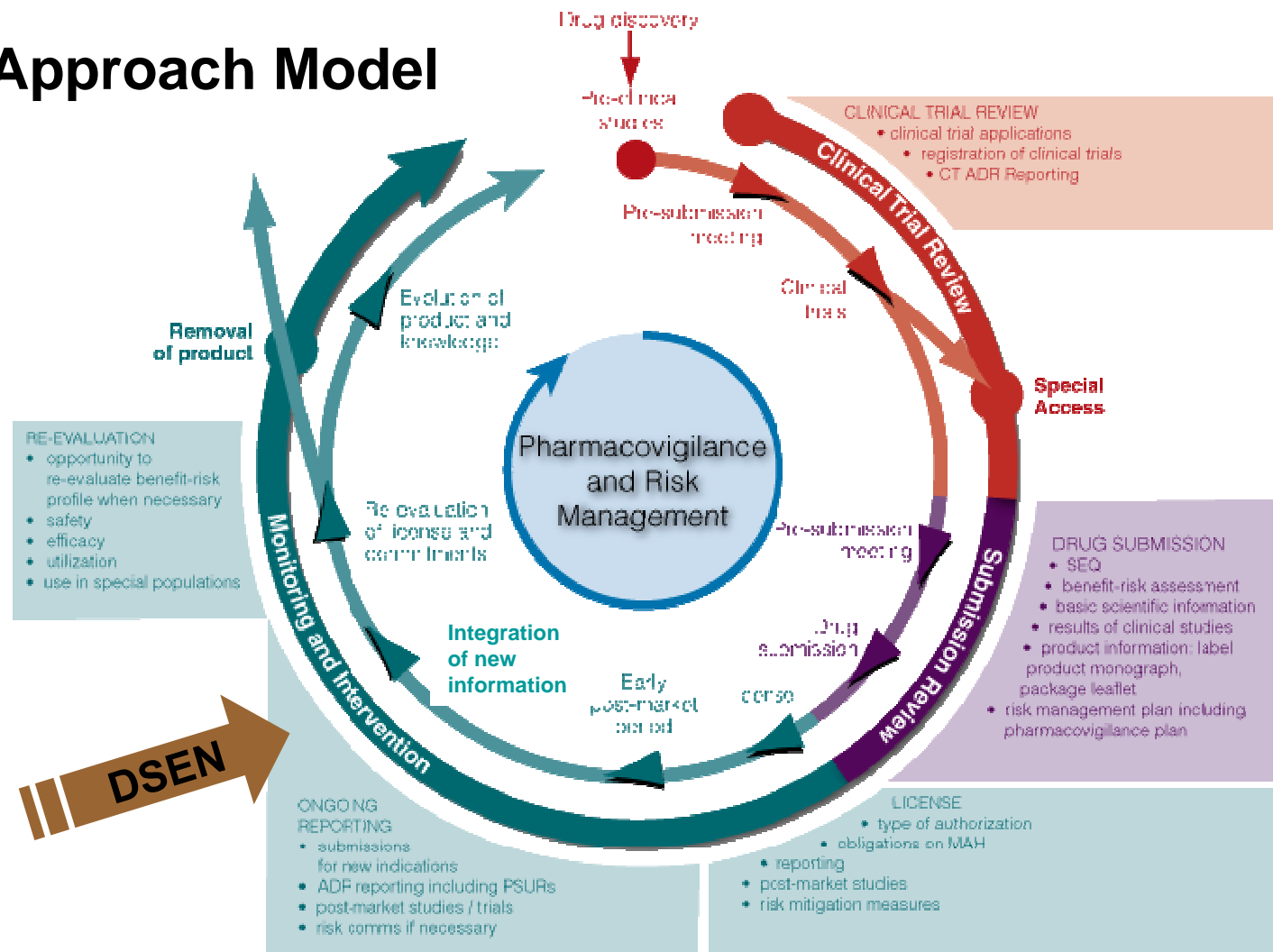
Post NPS

- DSEN included in the Government of Canada's ***Food and Consumer Safety Action Plan*** (December 2007)
 - Support product life-cycle approach to drug regulation by providing key evidence to Health Canada for use in ongoing risk-benefit assessment of drug products
 - Complement other pharmacosurveillance activities – provide additional tool

http://www.healthycanadians.gc.ca/pr-rp/action-plan_e.html



Life-Cycle Approach Model



News Release

Government of Canada Works to Improve Knowledge About the Safety and Effectiveness of Drugs

January 14, 2009

TORONTO – The Honourable Leona Aglukkaq, Minister of Health, today announced that the Government of Canada is continuing to support the Drug Safety and Effectiveness Network (DSEN), first announced in July 2008.

“Canadians can be confident that this Government is taking the steps necessary to ensure that our drug safety system remains one of the best in the world,” said Minister Aglukkaq. “The Drug Safety and Effectiveness Network complements Canada’s rigorous pre-testing of new drugs by studying how Canadians respond over time to already-approved drugs. The results will help in decision-making and enhance overall consumer safety.”



Public Policy Objectives

- Promote safe and effective use of pharmaceuticals by filling gaps in knowledge required to make effective evidence-based decisions about drugs
 - Decisions made at different points throughout the regulatory and health care system including post-market surveillance; reimbursement; prescribing, utilization
- Increase capacity within Canada to undertake high-quality post-market studies of RWSE
 - To support increased availability of needed evidence



Public Policy Objectives

- Leverage greater value from existing investments in post-market research within Canada by:
 - Building on what already exists
 - Improving coordination of research efforts, both nationally and internationally
 - Promoting greater collaboration
- Contribute to improved system efficiency to support accessible and sustainable health system responsive to the health needs of Canadians



The diagram illustrates the relationships between existing and proposed/new entities across three categories: Organization, Program, and Committee. Each category has a light blue box for 'Existing' and a yellow box for 'Proposed or New'. Arrows indicate relationships: Organization to Process, Program to Data Repository, and Committee to Input Output. The 'Proposed or New' boxes are also connected to their respective counterparts in the same row.

Existing	Proposed or New	Relationship	Proposed or New
Existing Organization	Proposed or New Organization	Process	Proposed or New Process
Existing Program	Proposed or New Program	Data Repository	Proposed or New Data Repository
Existing Committee	Proposed or New Committee	Input Output	



LINKS

- 1 Databases
- 2 Methods
- 3 Research Centres

Patients Consumers Healthcare Professionals Hospitals Drug Manufacturers

MANUFACTURERS, PRESCRIBERS,
AND CONSUMERS OF HEALTH PRODUCTS

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graph TD
    DSE[/Drug Safety Event/] --> SDAR[Spontaneous ADR Reporting]
    DP[/Drug Prescribed/] --> HCSO[Health Care System Operations]
    DEE[/Drug Effectiveness Event/] --> DBPO[Drug Benefit Plan Operations]
    SDAR --> DSDR[(Direct Data Surveillance Reports)]
    HCSO --> ESD[Existing Stored Data]
    DBPO --> SD[Set Data Standards]
    DSDR --> ID[Issue Identification]
    ESD --> ID
    SD --> ID
    ID --> PEA[Priorities for Evidence Assembly]
    ID --> DUS[Drug utilization studies]
    PEA --> DUS
    PEA --> OCS[Observational comparative studies]
    PEA --> RWC[Real-world comparative studies]
    DUS --> NOD[(New Observational Data)]
    OCS --> NOD
    OCS --> NED[(New Experimental Data)]
    RWC --> NED
    NOD --> GNE[Generate new evidence]
    NED --> GNE
    NED --> AR[Analyze results]
    GNE --> I[Implement]
    AR --> I
    AR --> DD[Determine and decide]
    I --> IS[/Increased Safety/]
    DD --> IS
    DD --> ITE[/Increased Therapeutic Effectiveness/]
  
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SYSTEM INFLUENCERS, PRIVATE SECTOR DATA COLLECTION AND ANALYSIS

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graph TD
    1[1 Patient Groups] --> 3[3 Research Partnerships]
    2[2 Independent Health Coalitions] --> 3
    3 --> 4[4 Canadian Drug Policy Coalition]
    3 --> 5[5 Health Care Professionals Associations]
    3 --- MRN[Medical Research Network: Connections of Canada]
    5 --- MRN
  
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graph TD
    1[Patient Groups] --> 3[Research Partnerships]
    3 --> 4[Canadian Drug Policy Coalition]
    4 --> 5[Medical Research Networks Consortium of Canada]
    6[Health Care Professionals Associations]
    7[Industry Associations]
    8[IMJ Health Canada]
    9[Ingenio Incorporated]
    10[Pharmacy Benefit Managers]

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SYSTEM INFLUENCERS, PRIVATE SECTOR DATA COLLECTION AND ANALYSIS

1	Atlantic Region Advisory Committee		
2	Newfoundland Primary Committee	Prescription Drug	Newfoundland and Labrador Ministry of Health and Community Services
3	PEI Pharmacy Advisory Committee	PEI Drug Cost Assistance Programs	Private Education and Social Services
4	New Brunswick Family Management Committee	Novus Scotia Pharmaceuticals	Novus Scotia Ministry of Health
5	New Brunswick Product Selection Committee	New Brunswick Prescription Drug Program	New Brunswick Ministry of Health
6		Regie de l'Assurance Maladie du Québec	Ministère de la Santé et des Services Sociaux
7	Drug Quality and Therapeutics Committee	Ontario Drug Benefit Plan	Ontario Ministry of Health and Long-Term Care
8	Manitoba Drug Quality and Therapeutics Committee	Pharmacia	Manitoba Ministry of Health
9	Saskatchewan Pharmacy Committee	The Saskatchewan Drug Plan	Saskatchewan Ministry of Health
10	Drug Quality Assessment Committee		
11	Expert Committee on Drug Interaction and Therapeutics	Health Care Insurance Plan and Services	Alberta Ministry of Health and Wellness
12		Pharmacia	British Columbia Ministry of Health Services
13		Non-Insured Health Benefit Program	Northwest Territories Ministry of Health and Social Services
14	Yukon Working Group	Pharmacia	Yukon Ministry of Health and Social Services
15		Non-Insured Health Benefit Program	Nunavut Ministry of Health and Social Services

1	Canada's Research-Based Pharmaceutical Companies (RBCs)	Le Groupe de Recherche en Santé (GRS), Université de Montréal	Epidemiology, Coordinating and Research (SPORC) Centre	Initiative for Medication Research and Policy Analysis Research and Training
2	The Canadian Agency for Drugs and Technologies in Health	Population Health Research Unit, Dalhousie University	The Institute for Critical Evidence Synthesis (ICES)	Canadian Cancer Society
3	Canadian Institute of Health Information (CIHI)	Maritime Centre for Health Policy	The Institute for Health Economics	Canadian Collaborative Network and 16 Research Centres Based in Canada
4	Centre for Evaluation of Medicines (CEM)	Centre for Healthcare Innovation and Improvement (CHII)	Centre for Health Services and Policy Research, U of BC	
5	Interprovincial Institute	Human Capitalix Centre		

	Provenance and Terrestrial Databases	Pan Cancer Databases	International Databases
1	NCBI Bioinformatics NCBI NCBI Eligibility of Eligible Publications NCBI Research Health Research Data Repository	NCBI NCBI NCBI Prescription Clinical Data	NCBI NCBI NCBI Prescription Research
2	NCBI Prescription Drug Plan	NCBI NCBI Hospital Separation Database	NCBI NCBI NCBI Prescription Event Monitoring
3	NCBI Hospital Separation Database	NCBI NCBI Prescription Separation Data	NCBI NCBI NCBI Prescription Event Monitoring
4	NCBI Hospital Separation Database	NCBI NCBI Prescription Separation Data	NCBI NCBI NCBI Prescription Event Monitoring
5	NCBI Hospital Separation Database	NCBI NCBI Prescription Separation Data	NCBI NCBI NCBI Prescription Event Monitoring
6	NCBI Hospital Separation Database	NCBI NCBI Prescription Separation Data	NCBI NCBI NCBI Prescription Event Monitoring
7	NCBI Hospital Separation Database	NCBI NCBI Prescription Separation Data	NCBI NCBI NCBI Prescription Event Monitoring
8	NCBI Hospital Separation Database	NCBI NCBI Prescription Separation Data	NCBI NCBI NCBI Prescription Event Monitoring
9	NCBI Hospital Separation Database	NCBI NCBI Prescription Separation Data	NCBI NCBI NCBI Prescription Event Monitoring
10	NCBI Hospital Separation Database	NCBI NCBI Prescription Separation Data	NCBI NCBI NCBI Prescription Event Monitoring
11	NCBI Hospital Separation Database	NCBI NCBI Prescription Separation Data	NCBI NCBI NCBI Prescription Event Monitoring

The flowchart illustrates the spectrum of evidence for drug safety, organized into three main columns: Pre-market and Clinical Trials, Post-market Studies, and Product Utilization. The flow is indicated by arrows pointing from left to right.

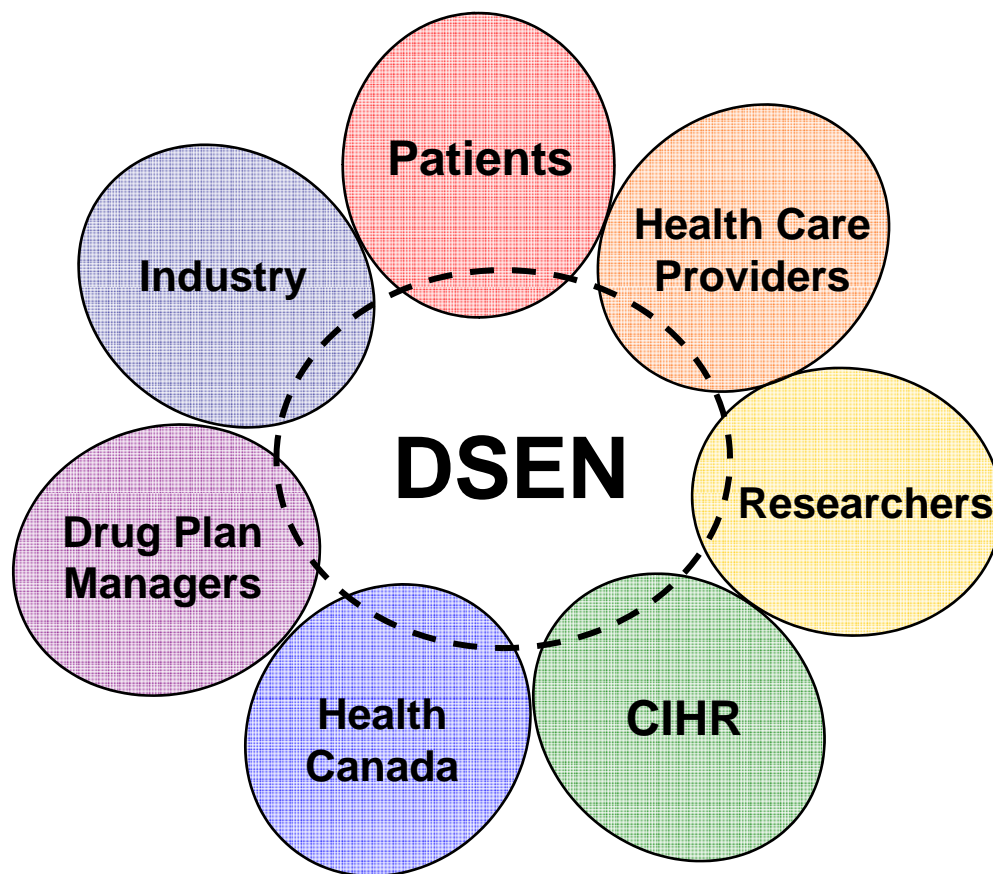
- Pre-market and Clinical Trials:**
 - Phase I study
 - Phase II study
 - Phase III study
 - Pre-market Planning
 - Pharmacovigilance Planning
- Post-market Studies:**
 - Sporadic Spontaneous Reporting
 - ACR reports assessment
 - PSUR evaluation
 - Signal detection
 - Case-control studies
 - ACR Evidence calculation
- Product Utilization:**
 - Survey
- Experimental and Observational Studies:**
 - EXPERIMENTAL:**
 - Consecutive, n of 1 Design
 - Pragmatic, Real-world RCT
 - OBSERVATIONAL:**
 - Descriptive (Exposure not controlled)
 - Retrospective Cohort study
 - Prospective Cohort study
 - Single Time Series, Single-Center, Single-Group
 - Multi-group, Case-control

DSEN – A Partnership Initiative

- Many players in Canada’s “drug safety and effectiveness system”
 - from many sectors - governments, academia, industry, health care providers, patients
- Many different roles
 - regulatory, reimbursement, data holders, knowledge generators, treatment providers, prescribers, users



Intersect of RWSE Interests



DSEN Federal Partners

- CIHR and Health Canada, leading establishment of the DSEN, working with other partners and stakeholders:
 - **HC** providing policy leadership and coordination among DSEN program partners and integrating DSEN research findings into its existing drug regulatory and drug plan management activities
 - **CIHR** responsible for implementing, facilitating and coordinating DSEN operations and funding research





Thank you!

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