# Review "CDASH Mapping" for NCI Standard Forms

NCI CDISC Harmonization Working Group Meeting
12 August 2020



#### CDASH Mapping on NCI Standard Forms

Screening

Off Treatment

Off Study

• *RECIST 1.1* 

### Topics

Project Plan / Goals

#### CDASH Off Treatment and Off Study Reasons - Integration Consistency

Theradex is using CDE 6355981 for the reasons a patient goes off treatment and off study. Looks like
it is one of the standard CDEs used by a number of organizations. It is a critical element of an SDTM
submission.

(	Long Name	Preferred Question Text =	Owned By ÷	Used By Context ÷	Registration Status	Workflow Status	Public ID ÷	Version =
(	<u>Disposition Event</u> <u>Dictionary-</u> <u>Derived/Standardized Term</u>	What was the subject's status?	NCI Standards	AMC, COG, NRDS, Theradex	Qualified	RELEASED	6355981	1.0

CDEs that appear to be used across all our networks

	Long Name	Preferred Question Text ÷	Owned By ÷	Used By Context ÷	Registration Status	Workflow Status	Public ID ÷	Version ÷
	<u>Disposition Event Dictionary-</u> <u>Derived/Standardized Term</u>	What was the subject's status?	NCI Standards	AMC, COG, NRDS, Theradex	Qualified	RELEASED	6355981	1.0
0 9	Off Treatment Reason Category	Off Treatment Reason	NCIP	ABTC, AECC, Alliance, CITN, CTEP, LCC, NCIP, SWOG	Qualified	RELEASED	2956831	1.0

#### CDASH Off Treatment and Off Study Reasons - Integration Consistency

- Theradex Web Reporting system (WRS) is used by both the ETCTN and NCTN
- Did mapping into WRS via DMU
  - The previous simpler list of reasons has greatly expanded due to CDISC CT
  - The values highlighted in violet below are new, and we are mapping many of them to "Other".
  - May need to update our list of values in WRS
  - AMC, COG and Theradex are using this CDE, other members of the NCTN are missing.
  - Need confirmation from NCI to expand the list of reasons.

rrearment, the reason the
patient has discontinued
treatment is provided. In DMU,
values will be mapped to one of
the following:

- Treatment completed per protocol criteria
- Disease progression, relapse during active treatment

A Verbatim reason for off-treatment

if "Other" selected.

Picklist Mappings for Off Treatment Reason
Web Reporting Value

Complete	Treatment completed per protocol criteria
Adverse Event	Adverse Event/Side Effects/Complications
Death	Death on study during active treatment
Recurrent Disease	No mapped value

Failure To Meet Continuation Criteria No mapped value

No mapped value

Your Value

Failure to Meet Randomization Criteria No mapped value

Lack of Efficacy No mapped value

Non-Compliance With Non-Study Device No mapped value

Non-Compliance With Study Device No mapped value

Non-Compliance With Study Drug No mapped value

Physician Decision No mapped value

Pregnancy No mapped value

Progressive Disease Disease Disease progression, relapse during active treatment

Protocol Deviation No mapped value
Protocol Violation No mapped value

Protocol-Specified Withdrawal Criterion No treatment, per protocol criteria

Randomized By Mistake No mapped value

Randomized By Mistake With Study
Treatment

No mapped value

Recovery No mapped value
Trial Site Terminated by Sponsor No mapped value

Study Terminated By Sponsor No mapped value
Technical Problem No mapped value

Study Participant Withdrawal by Parent or Guardian

Patient withdrawal/refusar after beginning protocol therapy

Withdrawal by Participant
Other

Patient withdrawal/refusal after beginning protocol therapy
Other

**\*** 

Off Treatment Other Reason

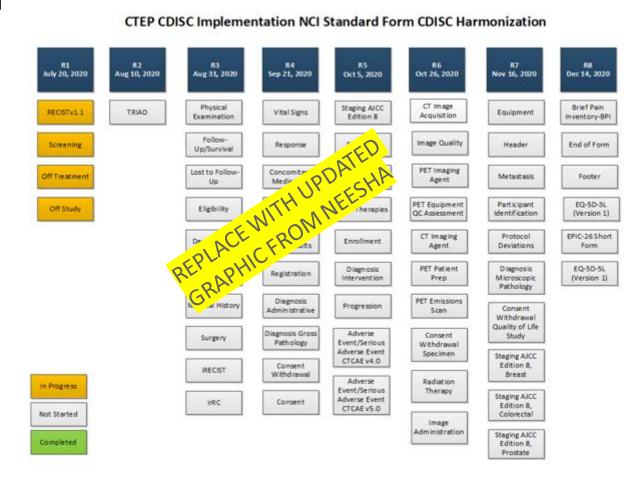
#### DMU Complete Data Submission Requirements (Draft)

24 September 2019

DATA ITEMS Field Required? Dictionary Mapping Required?	on
	Adverse Event/Side Effects/Complications Death on study during active treatment Patient withdrawal/refusal after beginning protocol therapy Patient withdrawal/refusal prior to beginning a protocol therapy Alternative therapy Patient off-treatment for other complicating disease Lost to follow-up Cytogenetic resistance Disease progression before active treatment No treatment, per protocol criteria Other

#### Progress on CDASH Mapping of NCI Standard Forms

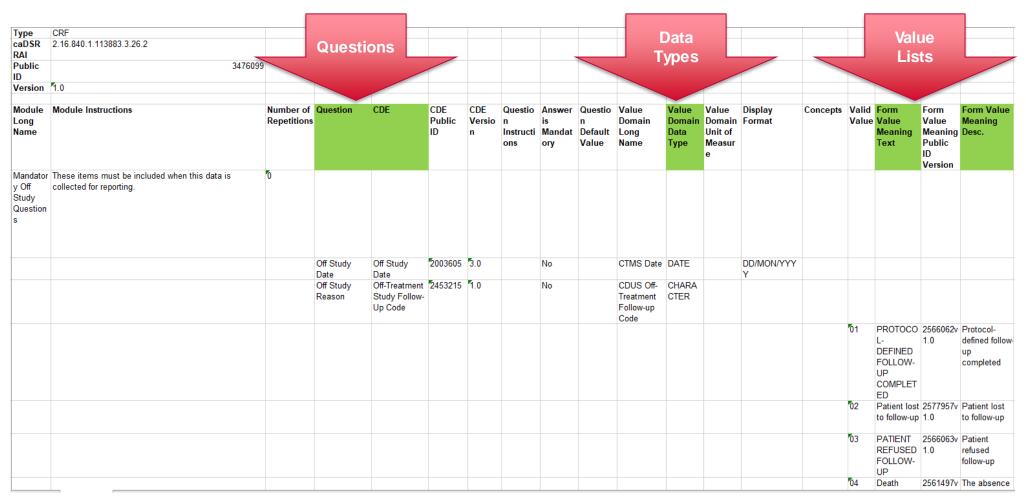
- CDASH Mapping Completed (curation in caDSR in progress):
  - RECIST V1.1
  - Screening
  - Off Treatment
  - Off study
- CDASH Mapping In Progress
  - TRIAD
    - mostly these forms are used for Image QC, but any data point(s) that might be used in clinical study analysis will be mapped to CDASH



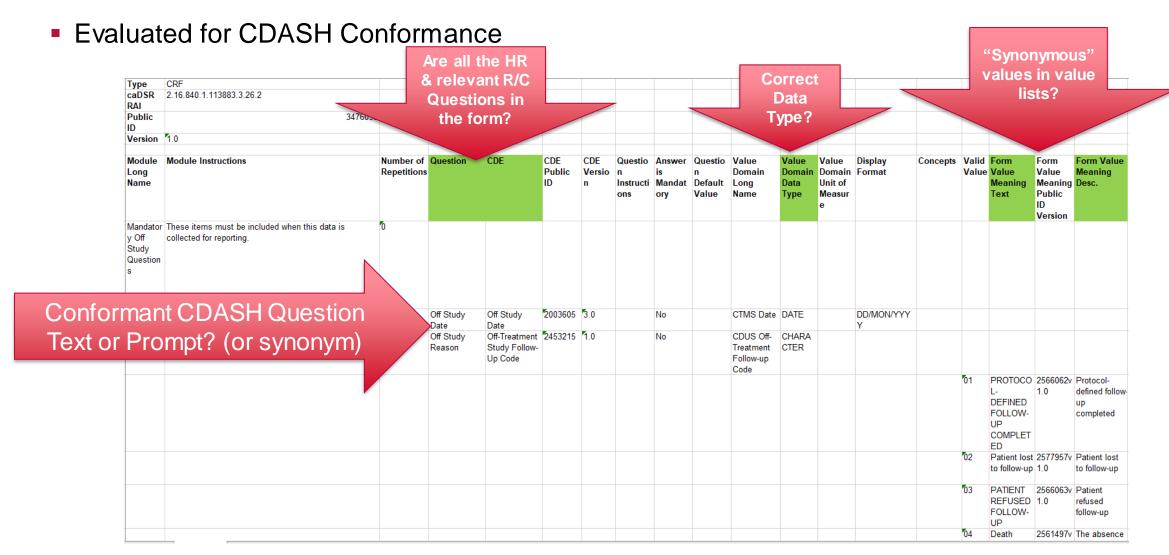
Approach

#### Approach to CDASH Mapping of NCI Standard Forms

Working with an Excel file export of CDEs, Reviewed

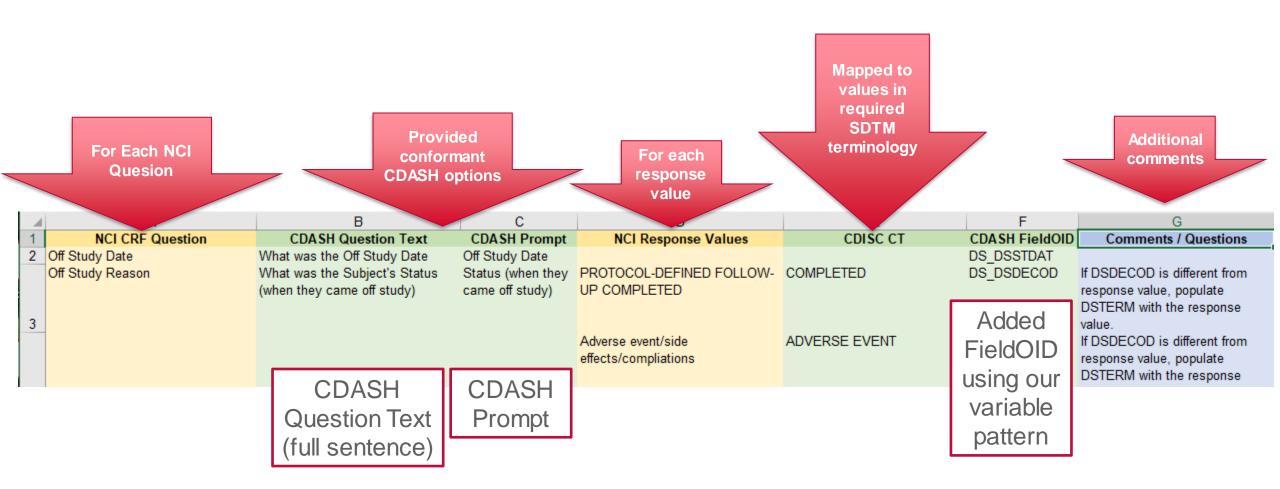


#### Approach to CDASH Mapping of NCI Standard Forms



#### Approach to CDASH Mapping of NCI Standard Forms

Created a second tab in the Workbook to show the CDASH mapping



Content: Off Treatment

#### Standard Form Mapped to CDASH: Off Treatment

4	Α	В	С	D	E	F	G
1	NCI CRF Question	CDASH Question Text	CDASH Prompt	NCI Response Values	CDISC CT	CDASH FieldOID	Comments / Questions
3	Off Intervention Date Off Treatment Reason	What was the Off Treatment D What was the Subject's Statu (when they came off treatment	s Status (when they	Treatment completed per protocol	COMPLETED	DS_DSSTDAT DS_DSDECOD	
4				Disease progression, relapse during active treatment	PROGRESSIVE DISEASE		CDISC terminology splits out relapse and progressive disease into two terms.
5				Disease progression, relapse during active treatment	DISEASE RELAPSE		CDISC terminology splits out relapse and progressive disease into two terms.
6				Adverse event/side effects/compliations	ADVERSE EVENT		
7	F	-airly		DEATH ON STUDY Patient withdrawal/refusal after	DEATH WITHDRAWAL BY SUBJECT		
8	9	straightforward		beginning protocol therapy			
9	r	mapping		Patient withdrawal/refusal prior to beginning a protocol therapy	WITHDRAWAL BY SUBJECT		
10	_			Alternative Therapy	OTHER		Option: Extend the CT
11				PATIENT OFF-TREATMENT FOR OTHER COMPLICATING DISEASE	OTHER		Option: Extend the CT
12				Lost to Follow-up	LOST TO FOLLOW-UP		
13				Cytogenetic resistance	OTHER		Option: Extend the CT
				Disease progression before active	PROGRESSIVE DISEASE		
14 15				treatment	OTHER		Ontion: Extend the CT
16				No treatment, per protocol criteria Other	OTHER OTHER		Option: Extend the CT
17	Off Treatment, Other Specify	If Other, Specify	Other, Specify	Culci	on Ex	DS_DSTERM	If DSDECOD is different from response value, populate DSTERM with response value.

Content: Off Study

### Standard Form Mapped to CDASH: Off Study

	Α	В		С	D	Е	F	G
1	NCI CRF Question	CDASH Question	n Text	CDASH Prompt	NCI Response Values	CDISC CT	CDASH FieldOID	Comments / Questions
2	Off Study Date Off Study Reason	What was the Off Stu What was the Subjec (when they came off s	t's Status	Off Study Date	PROTOCOL-DEFINED FOLLOW- UP COMPLETED	COMPLETED	DS_DSSTDAT DS_DSDECOD	If DSDECOD is different from response value, populate DSTERM with the response
3	_		_		Adverse event/side effects/compliations	ADVERSE EVENT		value.  If DSDECOD is different from response value, populate DSTERM with the response
5	9	Fairly straightforward napping			Death PATIENT REFUSED FOLLOW-UP	DEATH NON-COMPLIANCE WITH STUDY SCHEDULE		value.  If DSDECOD is different from response value, populate DSTERM with the response
6	-				Patient lost to follow-up	LOST TO FOLLOW-UP		value. If DSDECOD is different from response value, populate DSTERM with the response
7 8	Off Study Other, Specify	If Other, Specify	(	Other, Specify	Other	OTHER	DS_DSTERM	value.  If DSDECOD is different from response value, populate DSTERM with the response value.

Content: Screening

#### Standard Form Mapped to CDASH: Screening

Mapping depends on how used in study

- 4	Α	В	С	D	E	F		G
1	NCI CRF Question	CDASH Question Text	CDASH Prompt	NCI Response Values	CDISC CT	CDASH Fie	eldOID	Comments / Questions
2	Does the participant meet all screening criteria?	Were all entry criteria met?	Met Criteria	Yes, No	Y, N	DV_DVYN		Use to determine if the participant was enrolled in error. If yes, this will be a Protocol Deviation record.
3 4	If not, which screening criteria not met? Checklist Version Date Screen Completion Date	What was the description of the inclusion criterion the subject did not meet or the exclusion criterion the subject met?  What was the [protocol milestone/disposition event/other	Exception Criterion Description	None	Would use study-specific list of IE criteria	DV_DVTERM SUPPDV_QVAL_IE\	VRSDAT	If the person was enrolled in error, the specific Criterion (or multiple criteria) would be the protocol deviations. DVDECOD could standardize these with a value of "ENROLLED, NOT ELIGIBLE", DVCAT could be used to indicate these Protocol Deviations are related to IE criteria.
5		event name] date?  What was the Screening Completion Date?	[Protocol Milestone/Disposition Event/Other Event Name] Date Screening Completion Date			DS_DSSTDAT	First the	nree questions be Protocol

would be Protocol
Deviation (DV) records
if these questions are
asked after the person
has started on the
study.

Content: RECIST v1.1

### Standard Form Mapped to CDASH: RECIST V1.1 (1 of 3)

4	Α	В	С	D	Е	F	G
1	NCI CRF Question	CDASH Question Text	CDASH Prompt	NCI Response Values	CDISC C	CT CDASH FieldOID	Comments / Questions
2	Are there any target lesions?	Are there any target lesions	Any Target Lesions	Yes, No	Y, N	TU_TUORRES_TIND	This is an extension to the Tumor or Lesion Identification Test Code codelist (C96784) because normally the Test Code used would be TUMIDENT with a collected value of TARGET
3		Are there any non-target lesions	Any Non-Target Lesions	Yes, No	Y, N	TU_TUORRES_NTIND	"Non-target indicator" - NTIND is a standard value from C96784.
4		What is the Lesion Identifier	Lesion Identifier			TU_TULNKID	
	Method of assessment	What was the assessment method		Caliper, Chest x-ray, Color photography including ruler, CT, Cytology, Endoscopy, Histology, Laparoscopy, MRI, PET, PET/CT, Physical by Taylor and Parkers and Par	METHOD	TU_TUMETHOD	Defences entered by METHOD and "
5				Physical exam, Tumor marker, Ultrasound			Reference extensible METHOD codelist (C85492) to ensure the use of mappable values
	Assessment date	What was the assessment date	Assessment Date	Oitiasouliu		TU TUDAT	(003432) to ensure the use of mappable values
		Is the tumor measureable?		Measureable, Non-measurable	Y. N	TU_TUORRES_MEASIND	
7							"Measurable Indicator" - MEASIND is a standard value from C96784 for an Indicator question that uses Y/N terminology
8	New lesions	Are there new lesions	New Lesions	Yes, No	Y, N	RS_RSORRES_NEWLIND	"New" indicates that this is part of disease response assessment
9	Location of tumor	What is the tumor location	Tumor Location	Uses coded values		TU_TULOC	CDISC requires de-code. Reference extensible LOC codelist (C74456)
	Location of tumor	What is the tumor location	Tumor Location	Uses SNOMED	LOC	TU_TULOC	CDISC requires de-code. Reference extensible LOC codelist (C74456)
		What is the tumor location	Tumor Location	Uses decoded value list	LOC	TU_TULOC	CDISC requires de-code. Reference extensible LOC codelist (C74456)
	Long axis	What is the longest diameter measurement	Longest Diameter			TR_TRORRES_LDIAM	Uses "Longest Diameter" LDIAM Test - standard value from C96779
	Short axis	What is the short axis measurement	Short Axis	RECIST V1.	1 was a	TR_TRORRES_LPERP	Uses "Longest Perpendicular; Short Axis Diameter" LPERP Test - standard value from
13	Sum of diameters	What is the sum of diameters	Sum of Diameters	little more		TR_TRORRES_SUMDIAM	C96779 Uses Sum of Diameters (SUMDIAM) - standard value from C96779
14				challenging 1	fora		value IIOIII C30//3
				handful of qu	uestions.		I

#### Standard Form Mapped to CDASH: RECIST V1.1 (2 of 3)

Some questions structured differently from SDTWCDASH assumptions

	Α	В	С	D	E	F	G
1	NCI CRF Question	CDASH Question Text	CDASH Prompt	NCI Response Values	CDISC CT	CDASH FieldOID	Comments / Questions
15		What is the Target Response	Target Response	CR, NE, Not Done, PD, PR, SD	ONCRSR (C96785)	RS_RSORRES_TRGRESP	Described as Target Lesion Response RECIST Type. CDASH / SDTM would split out the "NOT DONE" value into a separate variable=RSSTAT
	Target lesions	What is the Target Response	Target Response	CR, NE, Not all evaluated, Not done, PD, PR, SD	ONCRSR (C96785)	RS_RSORRES_TRGRESP	Described as Target Lesions Response RECIS Overall Status. CDASH / SDTM would split out the "NOT DONE" value into a separate variable=RSSTAT
17		What is the non-target response	Non-Target Response	CR, NE, Non-CR/non-PD, Not done, PD	ONCRSR (C96785)	RS_RSORRES_NTRGRESP	Described as Non-Target Lesion Response RECIST Type. CDASH / SDTM would split or the "NOT DONE" value into a separate variable=RSSTAT
	Non-target lesions	What is the non-target response	Non-Target Response	CR, NE, Non-CR/non-PD, Not all evaluated, Not done, PD, Unequivocal PD	ONCRSR (C96785)	RS_RSORRES_NTRGRESP	Described as Non-Target Lesion Response RECIST Overall Status. CDASH / SDTM woul split out the "NOT DONE" value into a separate variable=RSSTAT
	Time point	What is the planned timepoint?	[displayed planned timeponit]	Long list of values including hourly, weekly, monthly, Cycle-based, relation to treatment, etc.		RS_RSTPT	Recommend usingTPT for all of these as the do not cleanly correlate to other CDISC timing concepts like VISIT or EPOCH.
	Tumor identification method	What was the tumor identification method	Tumor Identification Method	•	METHOD	TU_TUMETHOD	NCI form uses Free Text field
	-	N/A (operational question)	N/A (operational question)		N/A (operational question)	N/A (operational question)	
							Lymph Node Present Indicator - This one need clarification on what they are asking about the Lymph Node - Is this asking about the present of pathological lymph nodes? If so, recommen using TRTESTCD=LNSTATE, TRTEST=Lymph Node State, TRORRES=Pathological, Non-pathological
21							23 June: Based on Mary's response (to the right) I would consider this to be an "operational" question (not clinical data).

### Standard Form Mapped to CDASH: RECIST V1.1 (3 of 3)

1	A	В	С	D	E	F	G
1	NCI CRF Question	CDASH Question Text	CDASH Prompt	NCI Response Values	CDISC CT	CDASH FieldOID	Comments / Questions
		What is the measureable lesion type	Measurable Lesion Type	Bone lesions, Brain lesions, Cystic lesions, Lesions with prior local treatment, Malignant lymph node, Tumor lesion	Sponsor defined	TR_TRCAT (where TRTESTCD=MEASIND and TRORRES=Y)	
22							Described as Baseline Neoplasm Measurable RECIST Type. CBIIT Confirmed this is related to the question above about "Measurable / Non-Measurable". Seems like a Category of the measureable neoplasm.
		What is the non-measureable lesion type	Non-Measurable Lesion Type	Abdominal masses, Abdominal organomegaly, Ascites, Bone lesions, Cystic lesions, Inflammatory breast tissue, Leptomeningeal disease, Lesions	Sponsor defined	TR_TRCAT (where TRTESTCD=MEASIND and TRORRES=N)	
23				with prior local treatment, Lymphangitic involvement of skin or lung, Malignant lymph node, Pleural or pericardial effusion, Tumor lesions			Described as Baseline Neoplasm Non- Measurable RECIST Type. CBIIT Confirmed this is related to the question above about "Measurable / Non-Measurable". Seems like a Category of the non-measureable neoplasm.
24	Overall response	What was the overall response	Overall Response	CR, NE, Non-CR/non-PD, PD, PR, SD	ONCRSR (C96785)	RS_RSORRES_OVRLRESP	Described as Overall Lesion Response RECIST Type
	· ·	What was the duration of the overall response	l Overal Response Duration			RS_RSDUR_OVRLRESP	CCG: Enter a numeric response which captures the maximum length of time over which response is maintained, measured from a date when criteria for complete or partial response are met until a date when recurrent or progressive disease is reported. QUESTION: Is
	Best overall response	What was the best overall response	Best Overall Response	CR, NE, PD, PR, SD, SD duration met otherwise NE, SD duration met		RS_RSORRRES_BESTRESP	the unit=DAYS?
26	D			otherwise PD		DO DODAT	ODUTO 5 LUI DE D
27	Date of imaging	What was the imaging date	Imaging Date			RS_RSDAT	CBIIT Confirmed this is a Disease Response date
	Comments					CO_COVAL_[FormOID]	dato



#### Summary

- We will continue to work through the standard forms, providing CDASH Mapping
- It would be GREAT to have your feedback on these and how they support your study builds

Questions?

# Send additional questions to the support email:

NCICDISCSupport.nih.gov