

COSA – BC & OpenStudyBuilder Workshop @ EU Interchange 2023

Breakout 1– Setup BCs in OSB SoA

25 April 2023, Copenhagen



- Welcome & Introduction
- Short recap
- Show activity concept in database/Nicolas
- o Browse Activity Concepts in Library/Anja
- Try out on your own & discussions/all
- Apply Activity Concepts in Study Setup/Anja
- Try out on your own & discussions/all
- Demo of pulling activities to the Protocol/Anja
- SWOT & wrapping up/Katja



Welcome to break-out 1 – Setup BCs in OSB SoA

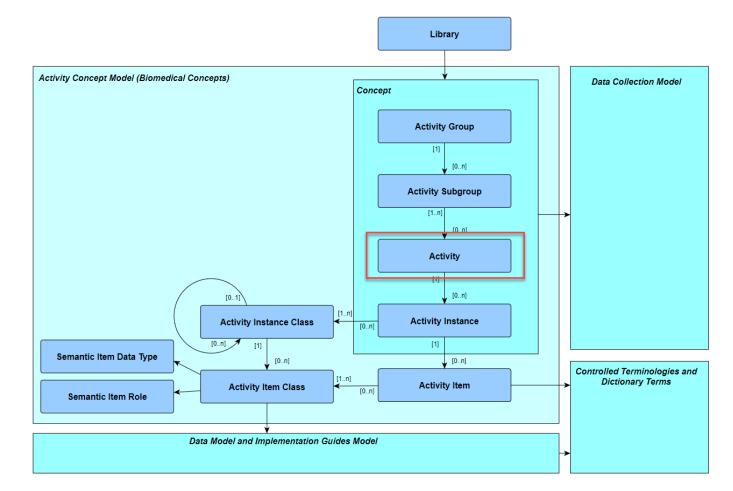
Who are we?

- Katja Glass, Open-Source Ambassador.
 Part time consultant & community manager
- Nicolas de Saint Jorre, Product Architect. Working at Novo Nordisk for 1 month – and several years as consultant within data management, EDC specialist, OSB and CDISC
- Anja Lundgreen, Principal Standards Specialist. Working at Novo Nordisk for 10+ years. Standards Governance and SDTM

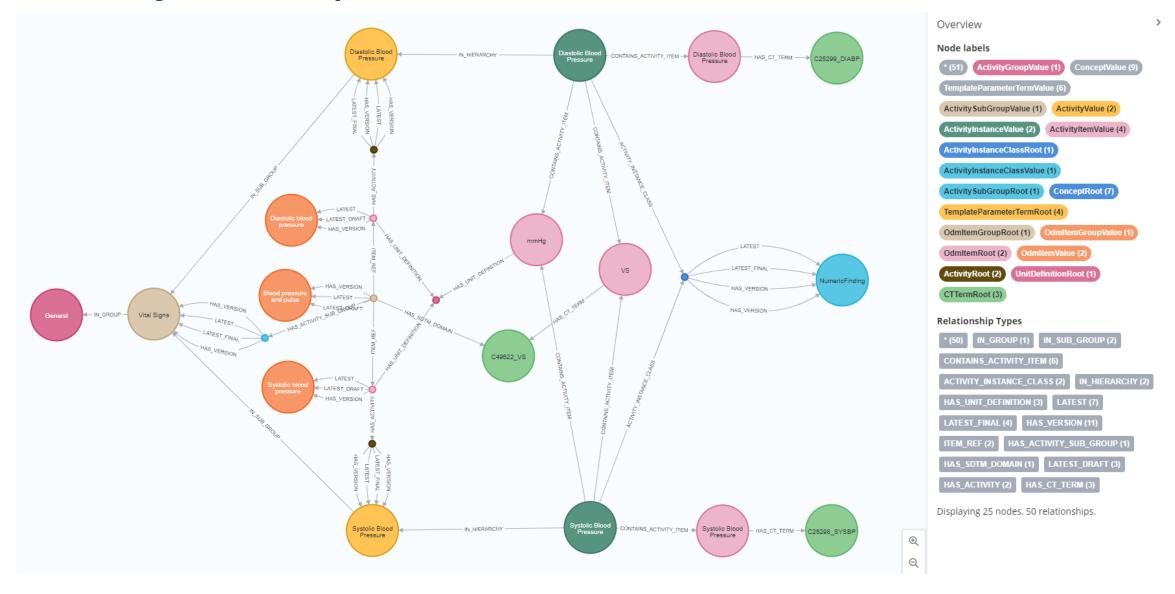
Goal for break-out

- Learn how to recognise and apply BC's (Activities) for a study in OSB
- Discuss SWOT (strengths, weaknesses, opportunities, threats) and next (collaboration) steps

Short recap: Biomedical concept in OpenStudyBuilder is **Activity** Concept



Activity Concept in the database



Activity Concept in the database

// Display VS ActivitySubGroup, Activity and ActivityInstance with SBP and DBP with CT and CRF metadata

```
MATCH (n2:ActivityGroupValue)<-[]-(n4:ActivitySubGroupValue)<-[]-(n6:ActivityValue)<-[]-(n8:ActivityInstanceValue)-[]->(n10:ActivityItemValue)
```

- MATCH (n8)-[]->(n12:ActivityInstanceClassRoot)-[]->(n14:ActivityInstanceClassValue)
- MATCH (n12)-[]->(n16:ActivityInstanceClassValue)
- WHERE n2.name = 'General' AND n4.name = 'Vital Signs' AND n6.name CONTAINS 'Blood Pressure'
 - OPTIONAL MATCH (n10)-[]->(n18:CTTermRoot)
 - OPTIONAL MATCH (n4)<--(n19:ActivitySubGroupRoot)<--(n20:OdmItemGroupRoot)-->(n21:OdmItemGroupValue)
 - OPTIONAL MATCH (n20)-->(n22:OdmItemRoot)-->(n23:OdmItemValue)
 - OPTIONAL MATCH (n22)-->(n24:ActivityRoot)
 - OPTIONAL MATCH (n22)-->(n25:UnitDefinitionRoot)<--(n10)</pre>
- RETURN n2,n4,n6,n8,n10,n12,n14,n16,n18,n19,n20,n21,n22,n23,n24,n25;

Browse Activity Concepts in Library



- Activity concept
- Groupings
- Template parameters

Demo & try out

Apply Activity Concepts in Study Setup

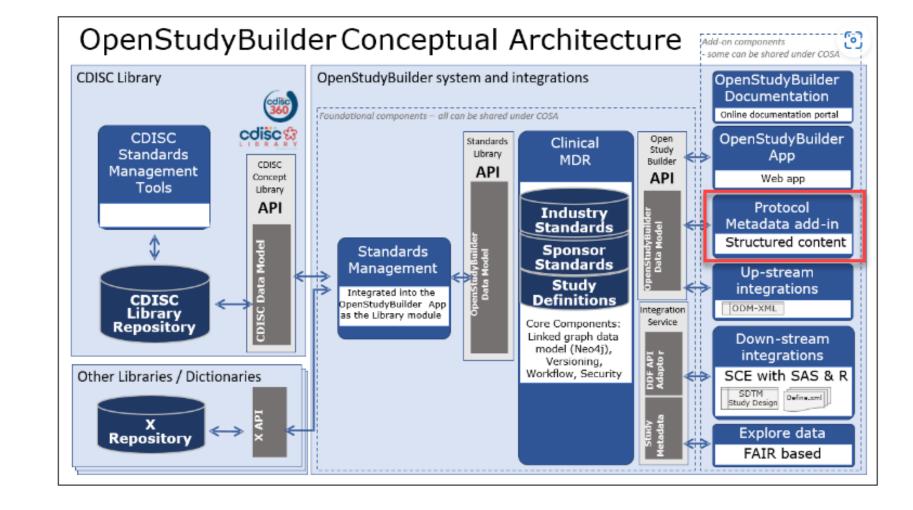


- Use in syntax templates
- Use in flowchart

Demo & try out

Demo display in Word add-in

Using the Novo Nordisk Word add-in



Demo

SWOT – Setup BCs in OSB SoA



Strengths	Weaknesses
BC's	BC's
Tools	Tools
Opportunition	Threats
Opportunities	Threats
BC's	BC's
Tools	Tools

Discussion & SWOT

Discussion Notes

- Standardization crashed with real world flexibility requests
 - User understanding of arbitrary concepts like "Epoch" / "Elements"
 - Difficult study design ideas
 - Non-interventional studies
- Objective Templates
 - Understanding of "terms", we think "model-wise", not end-user-wise
 - Easily go confusing, using wrong level
 - Workaround, select content -> derive level/type from this
 - Once template are available -> much less issues
- Protocol amendment
 - If metadata needs to change -> change in OSB
 - Milestones -> study lock (final protocol, amendment etc. -> currently just one lock)
- User collaboration
 - Commenting feature requested
 - Needs training, MW & different roles have different knowledge (currently MW & clinical operational lead)

Discussion Notes

- Hard to get an overview
 - How much am I done
 - Basic understanding issues
 - Very hard, culture change, being more standardized
 - Ideally have references / available stuff
- Why we need to standardize
 - Selling standards -> mind shift
 - Difficult to people who wants to invent new things
- Too complex
 - Reduce visibility (remove "studies" or things from screen)
 - Create own/reduces UI
 - All functionalities available through API
- Parallel editing
 - How to see/avoid concurrent conflicts

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SWOT – Applying BC's in digital data flows

Strengths

Usage for Analysis, SAP, ADAM

	 Reuse the same metadata Open source and being open (developer, user) Generic by design, changeable and adoptable Define concept once, reuse it everywhere One platform for different skillsets (no translation loss) Collaboration platform Knowledge sharing Open concepts, for newcomers, easier also for academia to collaborate Graph database: FAIR DDF API Adapter 	 Reuse metadata too much (complicated) Who would be the best to define a concept Divided by Therapeutic Areas Wording/concepts must be understood Need maturity on functionality Technical and function expensive Clarity on how/what to extend (documentation) Documentation / Training
	Opportunities	Threats
•	origin Metadata about metadata Moving away from sponsor systems, better interoperability Customization Innovation	 Never ending task to link to existing other things (UCUM, LOINC, more and more) Generic way of handling new dicts/standards / dynamic integration Adoption when "everything is ready" is too late Big walls - much information not accessible Adoption takes time Technical issues, bugs, performance could impact adoption Disclosure of metadata not acceptable by some companies Language adoption (English for tool & documentation)

Weaknesses

Novo Nordisk[®]

Thank you