

**TAMING REAL WORLD DATA (RWD) WITH CDISC
STANDARDS: A PRACTICAL, STANDARDS-BASED
APPROACH FOR REGULATORY-READY EVIDENCE**

Presented by
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AGENDA

- Define Real World Data (RWD)
- Sources of RWD
- Importance of RWD
- Key challenges of RWD
- Applying CDISC to Real World Data
- Challenges in Implementing CDISC for Real World Data
- Sentinel and Open EHR- Managing and utilizing Electronic Health Record (EHR) data
- Key Steps in Mapping Real-World clinical data to CDISC models - Sentinel Initiative and open EHR-based RWD examples
- Conclusion



“**Real-world data** are data relating to patient health status and/or the delivery of health care routinely collected from a variety of sources.”



SOURCES OF REAL WORLD DATA

**Electronic Health Records
(EHRs)**

Health Claims

Patient Registries

**Mobile and Wearable
devices**

Billing Records

**Patient Reported
Outcomes**



Why RWD is Important ?



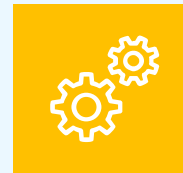
Helps evaluate treatment effectiveness.



Provides insights from real clinical practice.

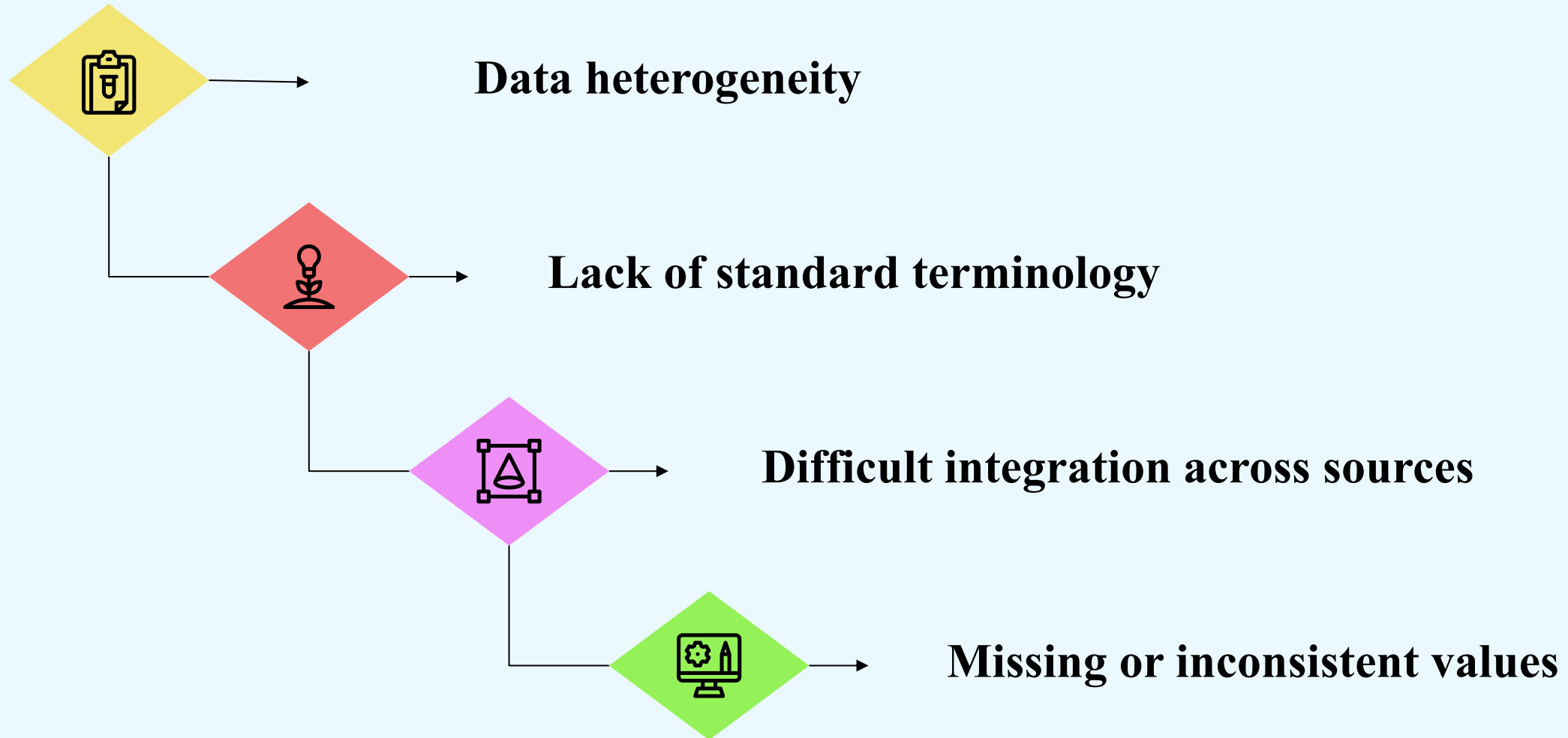


Supports regulatory decision making.



Real-world studies can be done more quickly and are more cost-effective.

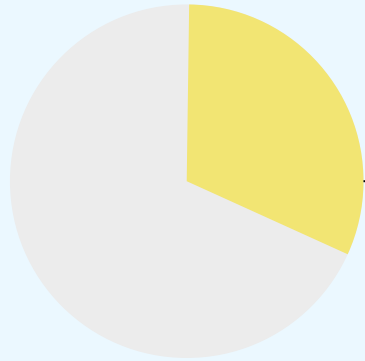
Key Challenges of Real-World Data



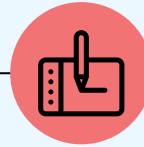
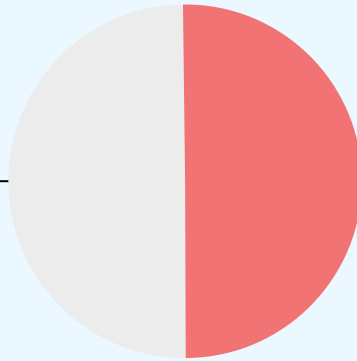


Applying CDISC to Real World Data (Standards-Based Workflow)

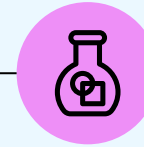
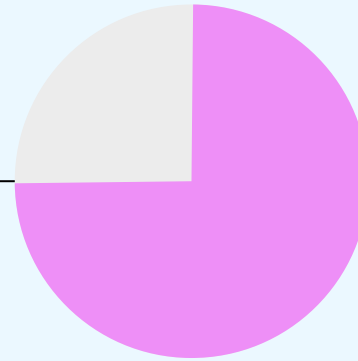
Data Ingestion



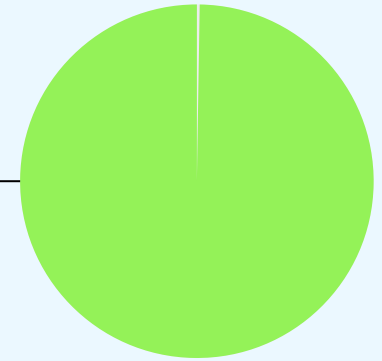
Data Standardization



Data Transformation



Analysis



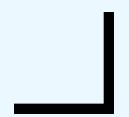
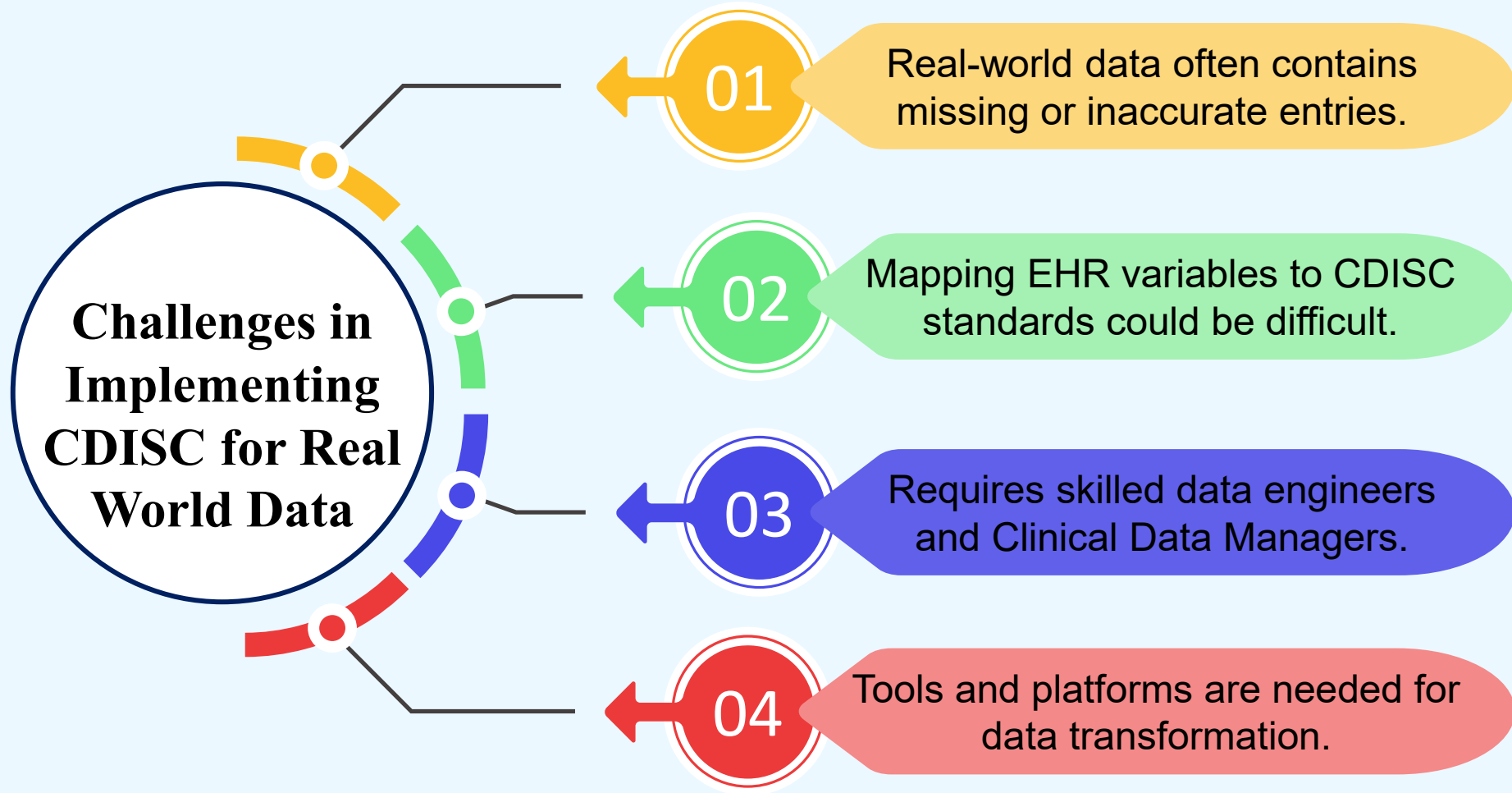
Collect RWD from multiple sources (Hospitals, Claims databases, Registries)

Apply CDISC terminology and variable mapping

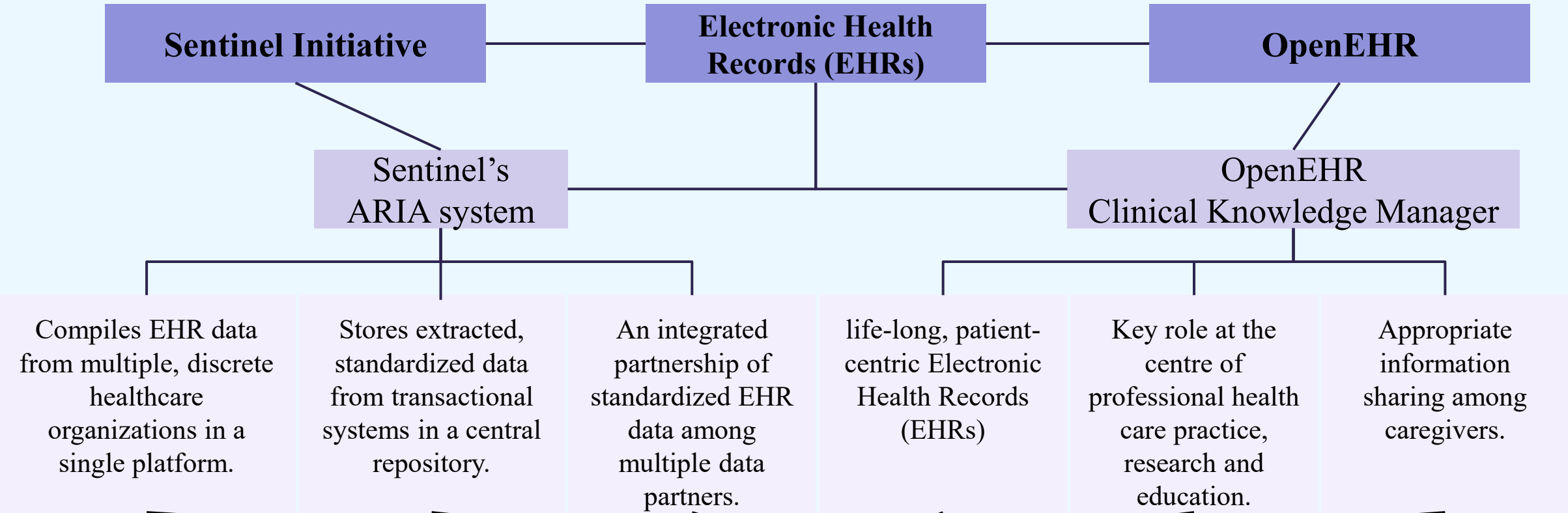
Convert into SDTM datasets (Identify class and domain, Determine list of variables to be included in the domain)

Use ADaM datasets for statistical analysis



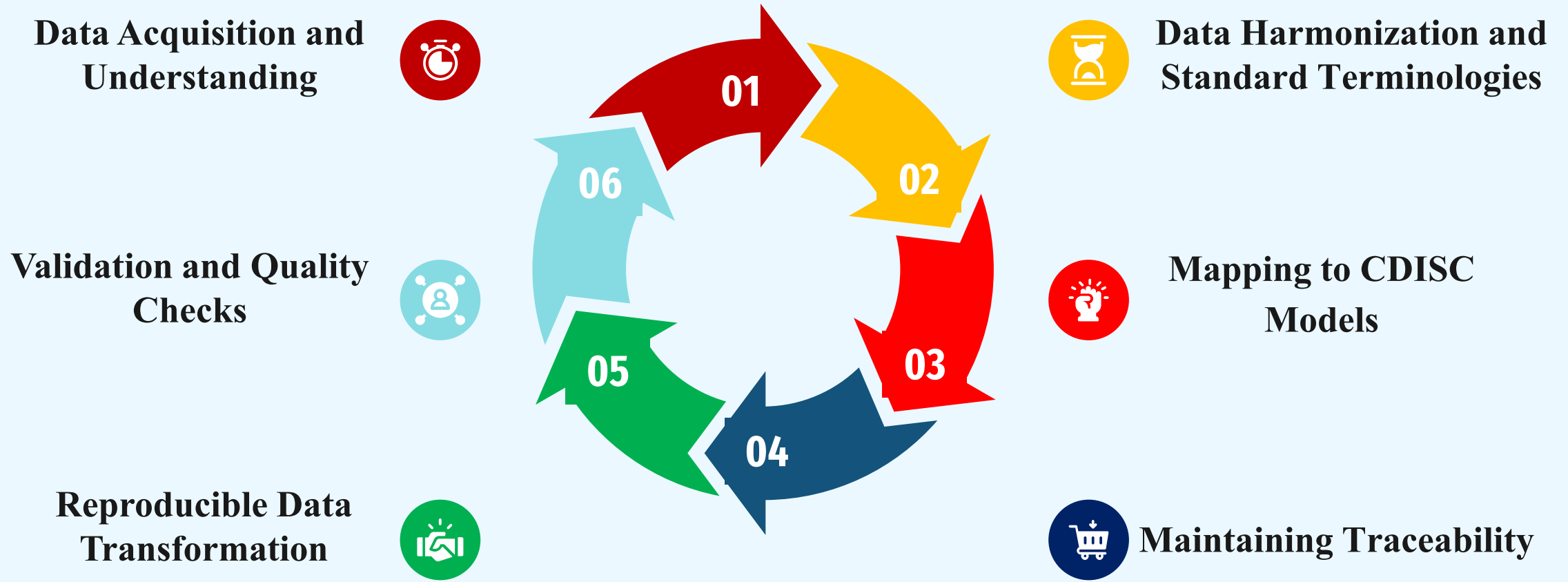


Sentinel and Open EHR - Managing and utilizing Electronic Health Record (EHR) data



openEHR focusing on standardized data structure and storage and Sentinel focusing on distributed analysis for safety surveillance.

Key Steps in Mapping Real-World clinical data to CDISC models - Sentinel Initiative and open EHR-based RWD examples



Data Acquisition and Understanding

1 Obtain publicly available datasets (e.g., Sentinel distributed database (ARIA System), open EHR datasets (Example: Lab Datasets))

1

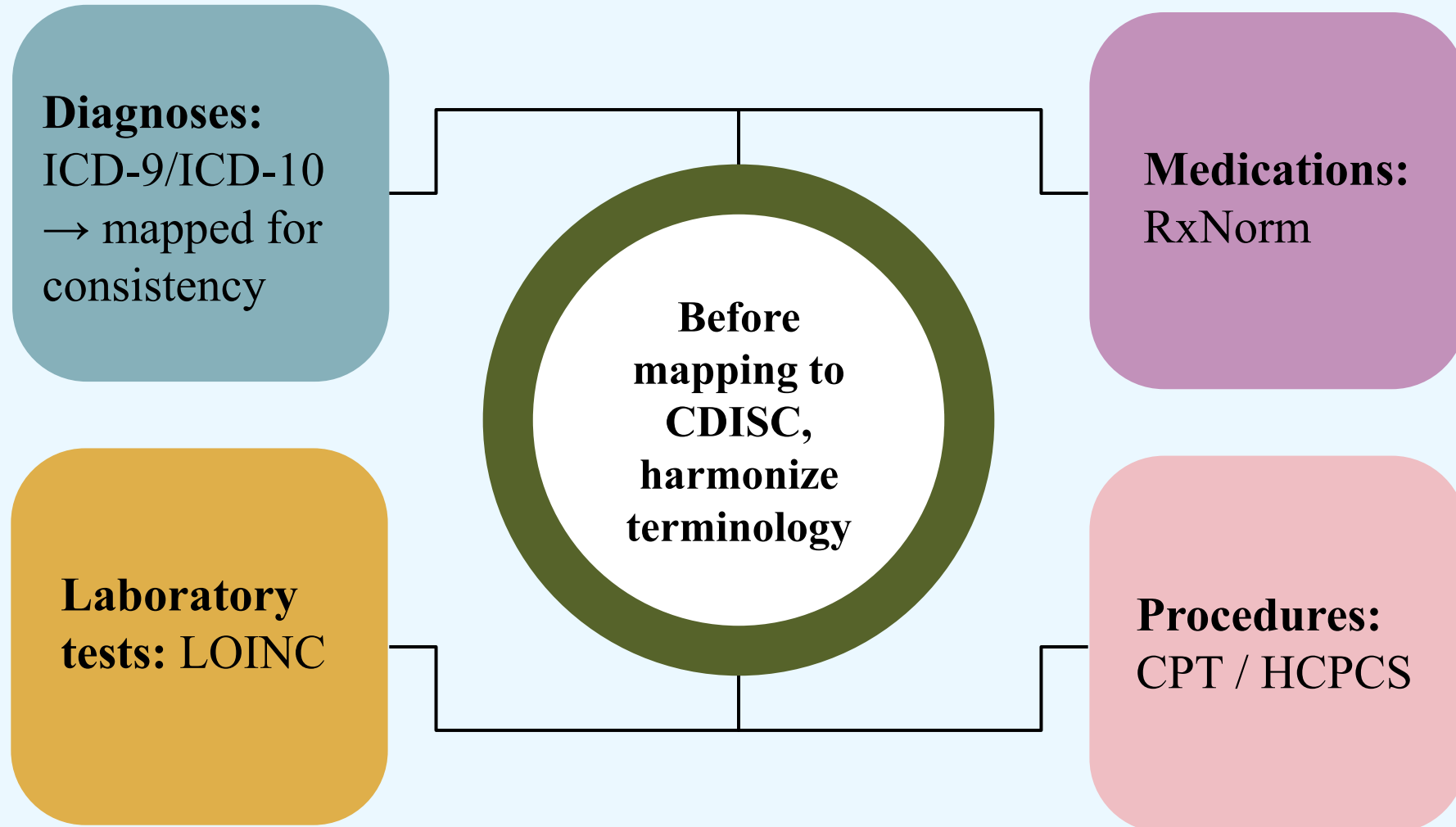
2 Review Data structure, Coding systems (ICD, CPT, LOINC, RxNorm, etc.), Metadata and data dictionaries.

2

3

3 Identify **source domains** such as Demographics, Diagnoses, Procedures, Medications, and Lab results.

Data Harmonization and Standard Terminologies



Mapping to CDISC Models

- ❖ Restructuring data into **domain-based datasets**
- ❖ Assigning **controlled terminology**
- ❖ Creating **unique subject identifiers**

Example Mapping:

Source (EHR/Sentinel) EHR Field	Example Value	CDISC SDTM Domain	CDISC Variable
Patient ID	12345	DM	USUBJID

EHR: Patient_ID = 12345

→ SDTM: USUBJID = "STUDY01-12345"

Example Mapping:

Source (EHR/Sentinel) EHR Field	Example Value	CDISC SDTM Domain	CDISC Variable
Test Name	Haemoglobin	LB	LBTEST
Result Value	13.5	LB	LBORRES
Unit	g/dL	LB	LBORRESU

EHR: Hb = 13.5 g/dL

→ SDTM: LBTEST = "HEMOGLOBIN"

LBORRES = "13.5"

LBORRESU = "g/dL"

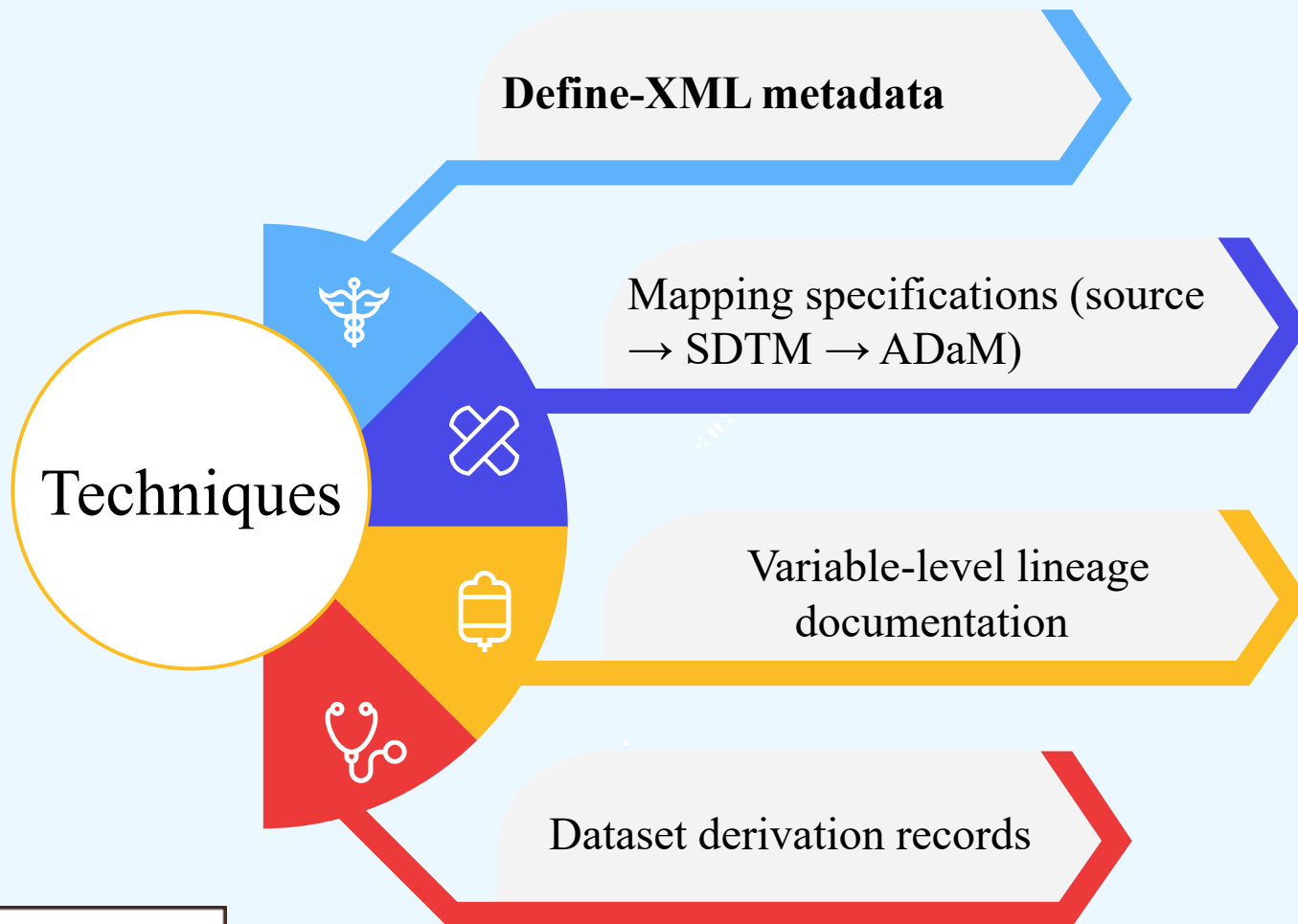
Source (EHR/Sentinel) EHR Field	Example Value	CDISC SDTM Domain	CDISC Variable
Diagnosis	Type 2 Diabetes	MH	MHTERM

EHR: Diagnosis = Type 2 Diabetes

→ SDTM: MHTERM = "TYPE 2 DIABETES MELLITUS"

Maintaining Traceability

Traceability ensures every analysis result can be traced back to the original source data.



Example traceability chain:

EHR encounter table

→ SDTM SV (Subject Visits)

→ ADaM ADSL (Subject-Level Analysis Dataset)

→ Statistical output (e.g., survival analysis)

Reproducible Data Transformation

Supporting Reproducibility



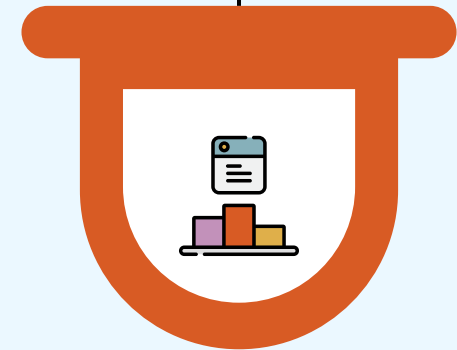
Use **version-controlled scripts**
(R, Python, SAS)



Maintain **data transformation pipelines**



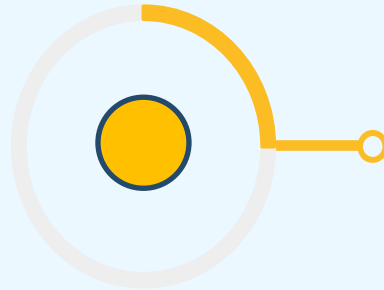
Store metadata and mapping rules



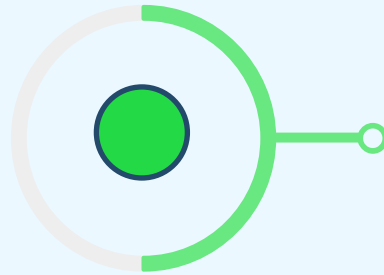
Document assumptions and derivations

Validation and Quality Checks

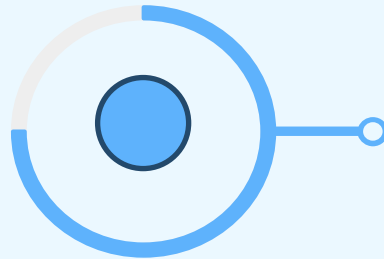
Quality control ensures compliance with CDISC and regulatory expectations.



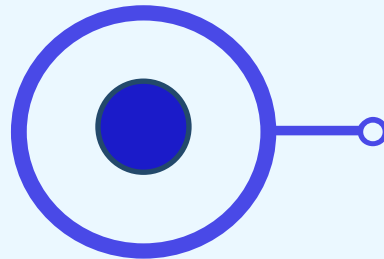
Domain structure validation



Controlled terminology checks



Cross-domain consistency



Conformance to SDTM/ADaM rules

CONCLUSION

RWD provide a valuable and rich data source beyond the confines of traditional epidemiological studies, clinical trials, and lab-based experiments, with lower cost in data collection compared to the latter. Therefore, **combining RWD with CDISC standards is essential for modern clinical research and regulatory decision-making.**



ANY QUESTIONS?

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