



North American
Spinal Cord Injury
— Consortium —



SCI Community Engagement in Research

SCOPE Monthly Meeting
December 13, 2022

Agenda

1. Introduction to NASCIC
2. Suite of Services
3. Project Collaboration - RWE
4. NASCIC Research Advocacy Course
5. Community Engagement & Collaborative Framework

Clinical Trial Shortcomings

500

A study by CTTI, \$100,000 investment in community engagement by Clinical Trial sponsors & CROs could produce gains of more than 500x the initial investment.¹

80

Nearly 80% of clinical trials fail to meet their enrollment timelines and up to 50% of research sites enroll one or no participants.²

50

Nearly half of all U.S. device trials do not meet their enrollment targets.⁴

62

“The cumulative impact of a patient engagement activity that avoids one protocol amendment and improves enrollment, adherence, and retention is an increase in net present value (NPV) of \$62M.”³

This underscores the importance of involving people with lived experience in the design of clinical studies as well as gaining their input and preferences throughout the total product lifecycle.

- 1) Bennett Levitan, Kenneth Getz, Eric L. Eisensten, Michelle Goldberg, Matthew Harker, Sharon Hesterlee, Bray Patrick-Lake, Jamie N. Roberts, Joseph DiMasi (2017). Assessing the Financial Value of patient Engagement: A Quantitative Approach from CTTI’s patient Groups and Clinical Trials Process
- 2) Yale Center for Clinical Investigation (YCCI)
- 3) ²Levitan B, Getz K, Eisenstein EL, Goldberg M, Harker M, Hesterlee S, Patrick-Lake B, Roberts JN, DiMasi J. Assessing the Financial Value of Patient Engagement: A Quantitative Approach from CTTI's Patient Groups and Clinical Trials Project. *Ther Innov Regul Sci.* 2018 Mar;52(2):220-229. doi: 10.1177/2168479017716715. Epub 2017 Jul 17. PMID: 29714515; PMCID: PMC5933599.
- 4) Patient Engagement Advisory Committee Executive Summary for Patient Engagement in Medical Device Clinical Trials Meeting. U.S. Food and Drug Administration. October 2017. Accessed February 11, 2021. <https://www.fda.gov/media/108162/download>

Engagement Movement

Strategy for Patient-Oriented Research



NIHR | National Institute for Health and Care Research



About NASCIC

Mission – To bring about unified achievements in research, care, cure, and policy by supporting collaborative efforts across the spinal cord injury community.

To achieve this mission, NASCIC will **identify gaps**, **communicate resources**, and be a **conduit for collaboration** between the community of people living with SCI and the many stakeholders.



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Timeline

2016

Call to action for the voice of lived experience

2017

Grassroots effort by the community

2018

Official launch of NASCIC

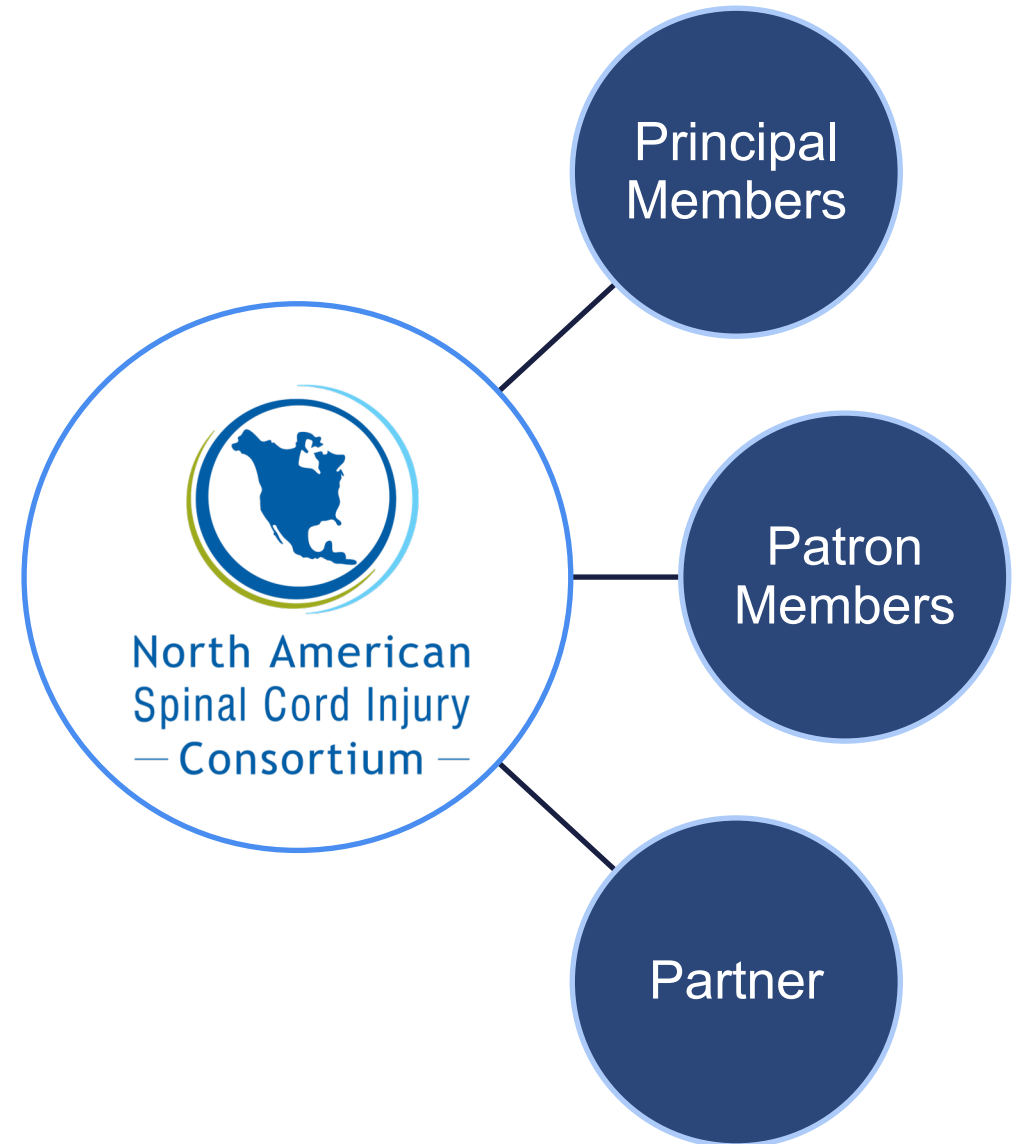
2019

Building infrastructure, Project Review, needs assessment

2020-2022

Engagement Projects & placement, Capacity Building, SCI Research Advocacy Course....

<https://nasciconsortium.org/membership>



NASCIC Membership Reach

2022



289 ~~217~~
Individual
Members



118
Project Engagement
Advocates

Over 50 Community Based
Organizations and Model Centers
With a Reach
over 700,000

Membership - Canada



New Brunswick
Ontario
Quebec
Saskatchewan
Alberta
British Columbia

Other Countries:
Curacao
Costa Rica

Membership - US States



Alabama	Illinois	Missouri	Oregon
Arizona	Indiana	Montana	Pennsylvania
Arkansas	Iowa	New Hampshire	South Carolina
California	Kentucky	New Jersey	Tennessee
Colorado	Louisiana	New Mexico	Texas
Connecticut	Maine	North Carolina	Utah
Georgia	Massachusetts	North Dakota	Virginia
Florida	Maryland	New York	Washington
		Ohio	Washington D.C.
		Oklahoma	Wisconsin

Projects

- Comprehensive Inclusion of SCI in CDC Neurologic Registry Development
- Development of tool(s) to track participation and performance in Activity-Based Therapy after SCI/D
- Open Data Sharing in SCI Research - iCORD
- Information on Emerging Therapies

Cross Cutting Initiatives

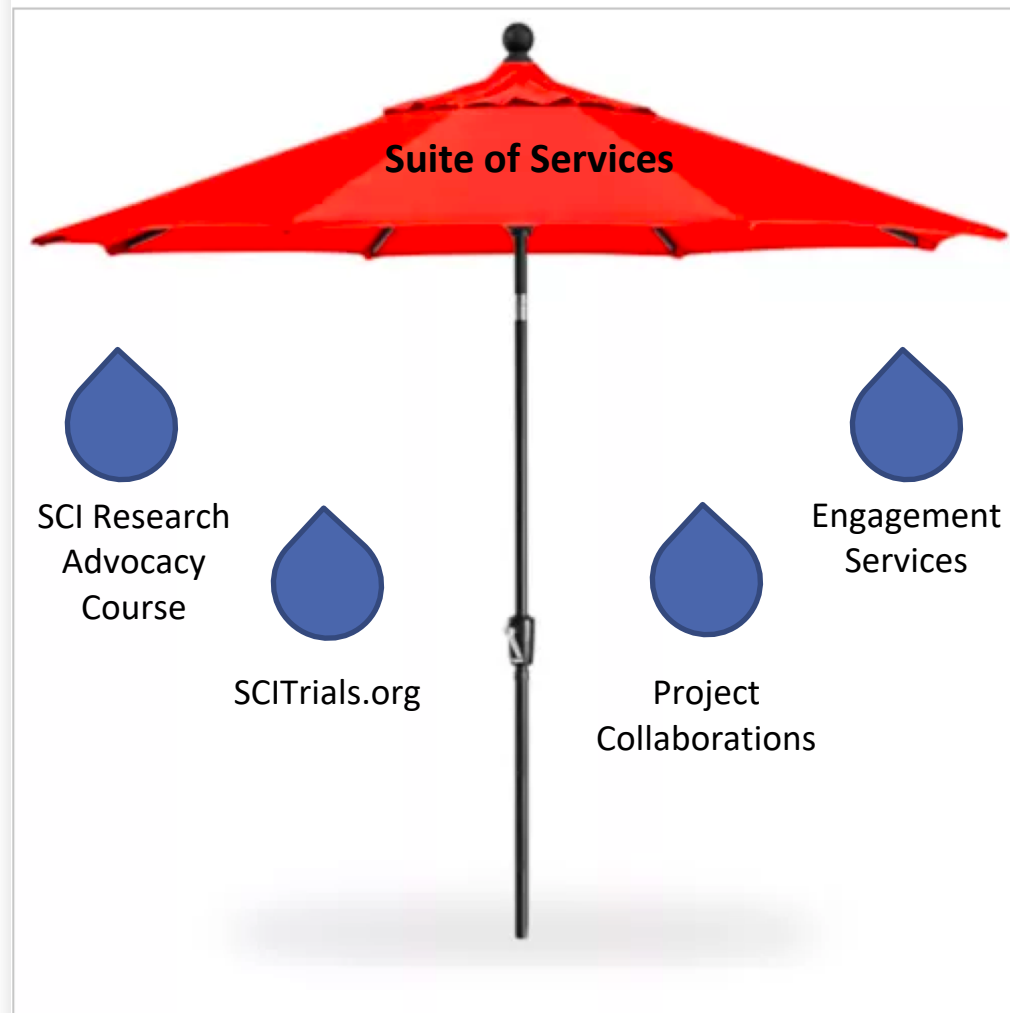
FDA Partnership
Research Advocacy
SCITRIALS.ORG Clinical Trial Finder



Community Engagement

With the support of the spinal cord injury (SCI) community, its members and the Craig H. Nielsen Foundation, NASCIC has the opportunity and responsibility to facilitate and implement community engagement across the SCI research process.

NASCIC offers a **suite of engagement services** designed to enhance profitability and reduce the in the development process by leveraging the expertise of individuals with lived experience at every stage.



Project Review Committee

- Consists of 10 active Members
- Monthly meetings
- Developed evaluation & tracking metrics of on-going projects
- Opportunities for new members each year
- Review external & internal proposals
- Interest in partnering for consumer engagement, letter of support, or research recruitment

Project Engagement Collaborations

Types of Engagements

- Consumer Advisory Boards
- Focus Group
- Community Surveys
- Advocacy Speaking
- Clinical Trial recruitment

Seeking input from people with SCI lived experience?

Contact NASCIC VP, Ian Burkhart
iburkhart@nasciconsortium.org

<https://nasciconsortium.org/projects/application/>



Engagement Projects

Full listing of all current projects is
available

<https://nasciconsortium.org/projects/>

Project

Open Data Sharing in SCI Research – iCORD

Upper Extremity Outcome Measures

Vagus Nerve Stimulation as an Immunomodulatory
Therapy for Acute SCI

Survey on Info about Emerging Therapies

Guidelines for Activity-based Therapy after SCI/D

Expanding Knowledge and Information Delivery around
Improving Upper Extremity Function after Cervical SCI

Consumer engagement with the development of a high
bandwidth brain interface

Neuromodulation Working Group for Bladder & Bowel

Survey on Information about Emerging Therapies

Purpose:

This project was intended to assess how people living with SCI access timely and reliable information about newer therapeutic interventions and clinical trials.

Timeline:

- Recruitment * & Kick-off Meeting: Oct 2019
- Survey finalization: November - December 2019
- IRB approval: January 2020
- Distribution: January-March 2020
- Data Analysis and manuscript preparation: May-August 2020

Publications & Distribution:

Pazzi C, Farrehi C, Capron M, Anderson K, Richardson B, Stillman M. An Assessment of Which Sociodemographic and Spinal Cord Injury-Specific Characteristics Influence Engagement With Experimental Therapies and Participation in Clinical Trials. *Top Spinal Cord Inj Rehabil*. 2021 Fall;27(4):28-39. doi: 10.46292/sci20-00070. Epub 2021 Nov 17. PMID: 34866886; PMCID: PMC8604506

Farrehi, C., Pazzi, C., Capron, M. *et al.* How individuals with spinal cord injury in the United States access and assess information about experimental therapies and clinical trials: results of a clinical survey. *Spinal Cord Ser Cases* 6, 103 (2020). <https://doi.org/10.1038/s41394-020-00354-6>

Lay language distribution through the NASCIC network

Project Lead: Dr. Michael Stillman, MD

Lived Experience:

Three members with lived experience served on the Advisory Board. Duties included:

- review the survey,
- assist with distribution for survey responses,
- review and assist with the interpretation of the results and
- actively assist in the composition of the final manuscript (if volunteer to do so).

Upper Extremity Outcome Measures

Purpose:

The overall goal of this project is to establish item pools that evaluate movement in the context of function, create standardized administration and scoring procedures, and conduct a preliminary evaluation of reliability. This was for Phase II of a larger five phase study.

Timeline:

- Recruitment & Kick-off Meeting: February 2020
- Advisory Board Group Meetings: February-April 2020
- Individual Advisory Meetings (2/ea): April-May 2020
- Completion of Phase II for the Calibration Study: June 2020

Publications & Distribution:

Poster at the International Spinal Cord Society 61st annual scientific meeting in Vancouver, Canada, September 2022

Anticipating a follow on proposal for the Phase III, IV & V

Lay language distribution through the NASCIC network

Project Lead: Olivia Biller, OT, PhD candidate

Lived Experience:

Four members with lived experience served on the Advisory Board. Duties included:

- assess upper extremity proposed tasks prior to meetings,
- join the active discussion of 5 group meetings
- partake in at least 2 individual meeting/interviews

Neuromodulation Working Group for Bladder & Bowel

Purpose:

The role of the Advisory Team will be to help identify and define the bladder and bowel goals of individuals with SCI, and provide a critical perspective for creating a road map that balances individuals' needs, concerns, preferences, and goals with available and emerging neuromodulation approaches to address them..

Timeline:

- Recruitment *& Kick-off Meeting: Oct 2017
- Advisory Meetings: January-May 2018
- Distribution: June-August 2018
- Data Analysis and manuscript preparation: September-December 2018

Publications & Distribution:

Bourbeau, D., Bolon, A., Creasey, G. *et al.* Needs, priorities, and attitudes of individuals with spinal cord injury toward nerve stimulation devices for bladder and bowel function: a survey. *Spinal Cord* 58, 1216–1226 (2020). <https://doi.org/10.1038/s41393-020-00545-w>

Clinical Media coverage in UroToday: <https://www.urotoday.com/beyond-the-abstracts/pelvic-health-reconstruction/neurogenic-bladder/125852-needs-priorities-and-attitudes-of-individuals-with-spinal-cord-injury-toward-nerve-stimulation-devices-for-bladder-and-bowel-function-a-survey-beyond-the-abstract.html>

Presentation at NYC NANS & NER in 2020

Lay language distribution through the NASCIC network

Project Lead: Dr. Dennis Bourbeau, PhD

Lived Experience:

Six members with lived experience served on the Advisory Board. Duties included:

- actively help design and review the survey,
- assist with distribution for survey responses,
- review and assist with the interpretation of the results and
- actively assist in the composition of the final manuscript (if volunteer to do so).

Project Engagement Database

Types of Engagements

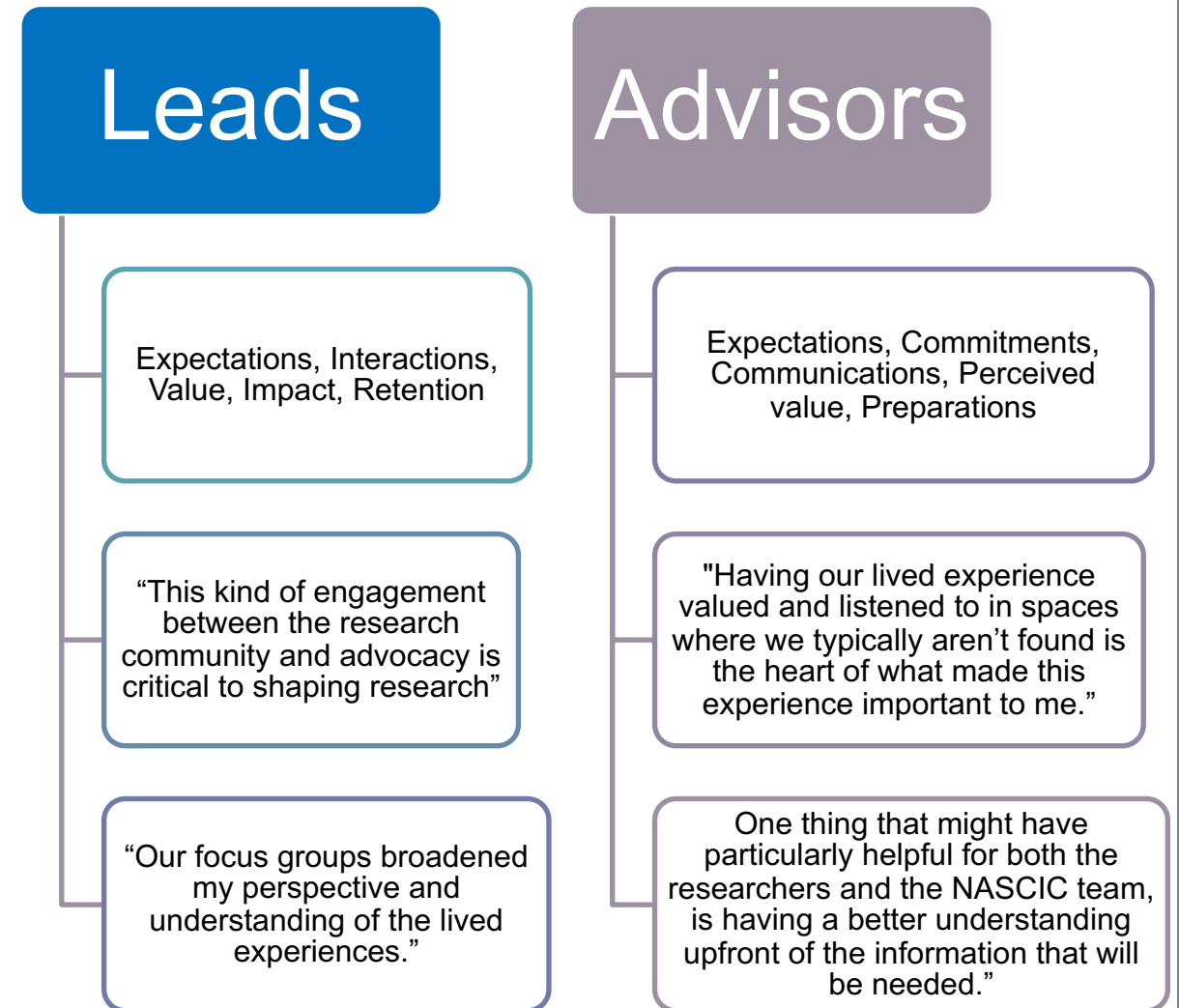
- Consumer Advisory Boards
- Focus Group
- Community Surveys
- Advocacy Speaking
- Clinical Trial recruitment

How to get involved?

- Benefit of membership
- Call for participants
- Enroll to get involved

<https://nasciconsortium.org/projects/>

Project Feedback





COURSE DEVELOPMENT



NASCIC

SCI RESEARCH
ADVOCACY COURSE

Project Goal

This project aims to help make SCI research more relevant and responsive to the needs of people living with SCI by greatly increasing the number of consumers who engage in the research process. To accomplish this outcome, the project will:

1. Engage individuals whose participation in research is hindered by lack of knowledge, such as the newly injured
2. Increase knowledge of the research process within the SCI community through resources and training
3. Organize and educate researchers and healthcare providers who are interested in consumer engagement across the spectrum of SCI research and care
4. Facilitate placement of individuals living with SCI as advisors on research projects

Objectives

BUILDING OF AN ONLINE SCI RESEARCH ADVOCACY COURSE



MATCHMAKING AND RECRUITMENT



LIVE INSTRUCTOR-LED PROGRAM

Online Course Modules

Introduction to research
advocacy

Understanding the
research process

Addressing historical
challenges for SCI
research

SCI biology,
the injury

SCI biology, secondary
complications & aging

Neuroprotection

Cell replacement

Regeneration

Neuroplasticity

Quality of Life research

SCI 101 for
Researchers

Getting involved & using
your skills

Working Group Members

Chair: Barry Munro,
NASCIC Treasurer

Name	Background
Barbara Archer	Living with SCI – Pennsylvania, USA
Dr. William Bailey	Research Analyst – University of Kentucky College of Medicine
Dr. Linda Bambrick	Program Director, Division of Neuroscience in Extramural Programs, National Institute of Neurological Disorders and Stroke (NINDS)
Jake Beckstrom	Manager - Cure Advocacy Network, Unite 2 Fight Paralysis Living with SCI
Kim Beer	Director, Public Policy – Christopher & Dana Reeve Foundation
Dr. Stephanie Dubow	Medical Director, Neuroscience Medical Affairs, AbbVie Inc.
Claudia Garofalo	Living with SCI – Louisiana, USA
Dr. John Gensel	Associate Professor, Spinal Cord and Brain Injury Research Center, University of Kentucky
Edward Graver	Living with SCI – Michigan, USA
Lora Hornung	Parent of SCI consumer – Kentucky, USA
Tara Jeji	Assistant Program Director, DP Clinical Inc. Living with SCI
Jerrod Kerr	Living with SCI – Florida, USA
Dr. John (Kip) Kramer	Assistant Professor, School of Kinesiology, University of British Columbia
Dr. Ena Miller	Neurologist - San Pedro Sula, Honduras
Angele Parente	Living with SCI – Ontario, Canada
Dr. Kimberly Pfleeger	Scientific Director, Neuroscience Development, AbbVie Inc.
Dr. Gail Rosseau	Clinical Professor of Neurosurgery, George Washington University School of Medicine and Health Sciences
Molly Schneider	Living with SCI – Ohio, USA
Susan Schaeffer	President & CEO, The Patients' Academy for Research Advocacy
Dr. Andrew Stewart	Post-Doctoral Fellow, University of Kentucky College of Medicine
Jeff Welden	Living with SCI – New York, USA
David Worley	Living with SCI – Texas, USA



Course Production

Community Engagement Working Group

NASCIC formed a working group to advise and review the SCI Research Advocacy Course. The working group is comprised of 23 individuals who represent different areas of the SCI community in North America, including:

- Consumers
- Caregivers
- SCI Researchers
- Physicians
- Industry representatives

Course Consultant

Susan Schaeffer, President & CEO -
The Patient's Academy for Research
Advocacy

Susan has been contracted to work alongside NASCIC staff and the Community Engagement Working Group to develop the content of the SCI Research Advocacy Course.



Production Consultant

Incite Marketing Group has been contracted to assist with the production of the course module videos and a communications and marketing strategy once the course is available to the public.





Pre-Register Now

Your Name Your Email

PRE-REGISTER NOW

Importance of

NASCIC is in the process of developing a course for individuals with SCI and caregivers to effectively partner with the SCI community.

at individuals with SCI are better able

The goal of the course is to empower people with lived experience to serve as advisors at every stage and type of research. In this way we aim to have a meaningful impact on research, care, and policy by including the perspective of people with lived experience to help the research community conduct the most relevant, beneficial, and informed work possible.

Pre-Register for the Course

<https://nasciconsortium.org/nascic-sci-research-advocacy-course/>



SCI COMMUNITY ENGAGEMENT IN PFDD & PATIENT DEVICE PREFERENCES



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CDER

Center for Drug
Evaluation & Research

Office of Program &
Strategic Analysis

<https://www.fda.gov/about-fda/center-drug-evaluation-and-research-cder/office-program-and-strategic-analysis-opsa>

Est. 2012

CBER

Center for
Biologics
Evaluation &
Research

Hybrid of CDER &
CDRH on a
programmatic level

CDRH

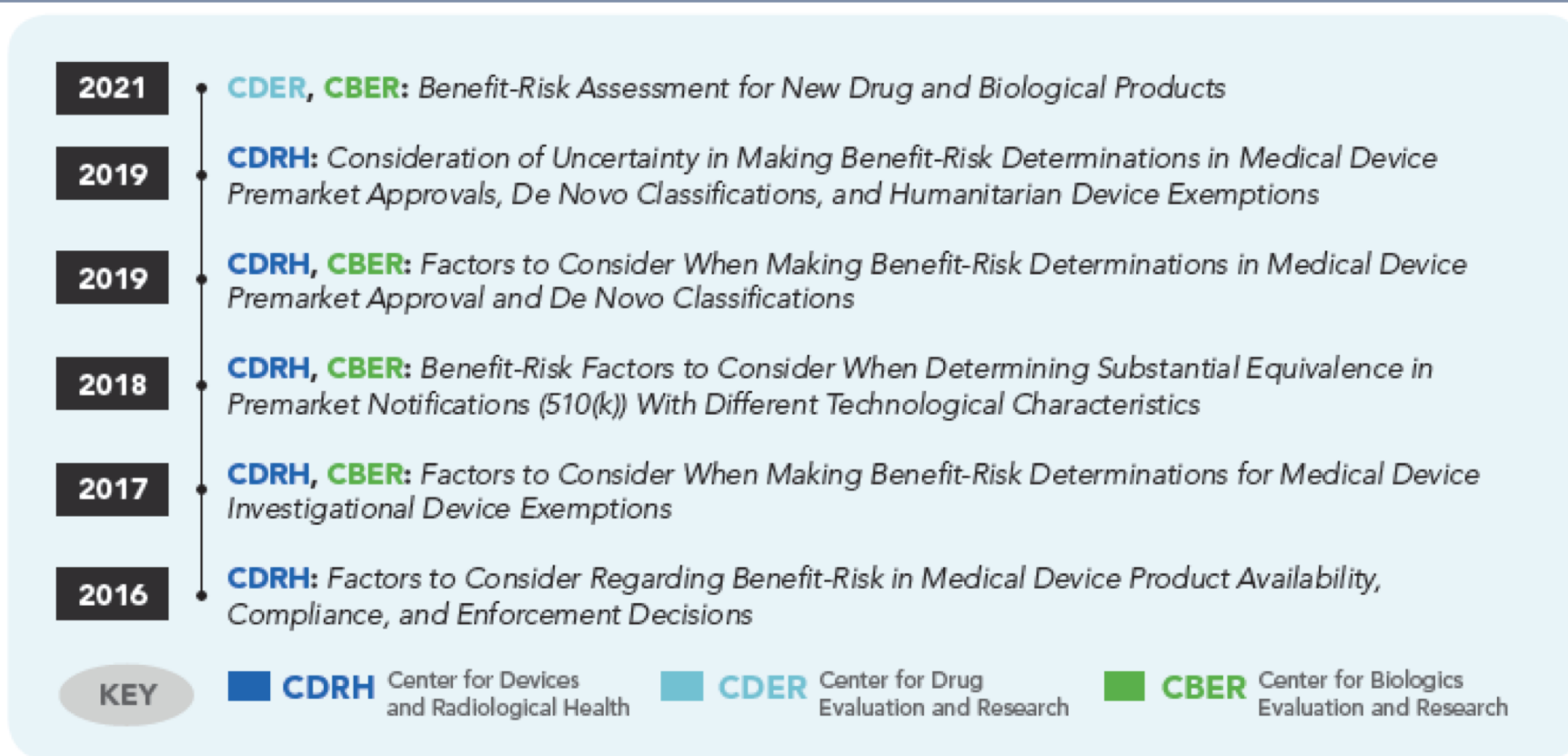
Center for Devices &
Radiological Health

Office of Strategic
Partnerships & Technology
Innovation

<https://www.fda.gov/about-fda/cdrh-offices/office-strategic-partnerships-and-technology-innovation>

Est. 2013

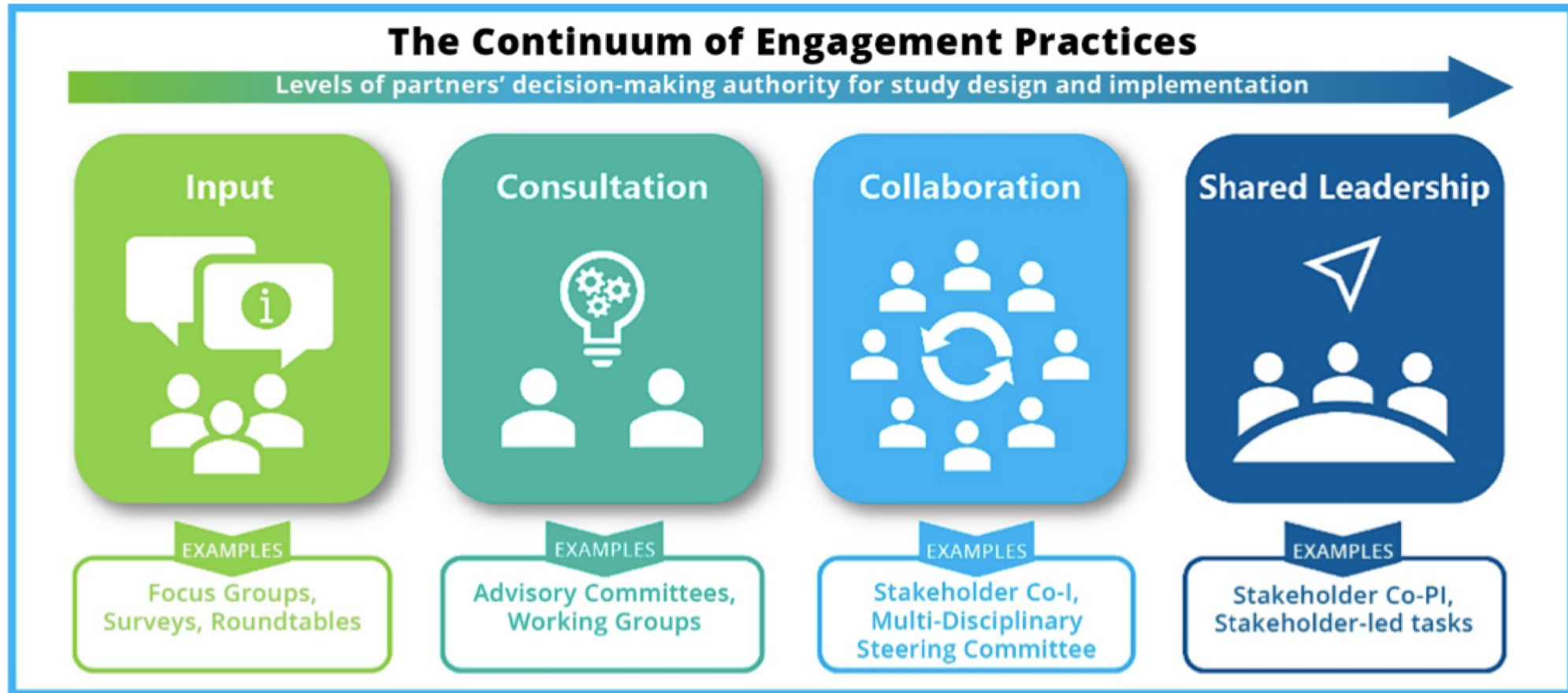
FDA Guidance History



2022: Patient-Focused Drug Development: Methods to Identify What Is Important to Patients
Guidance for Industry, Food and Drug Administration Staff, and Other Stakeholders

<https://www.fda.gov/regulatory-information/search-fda-guidance-documents/patient-focused-drug-development-methods-identify-what-important-patients>

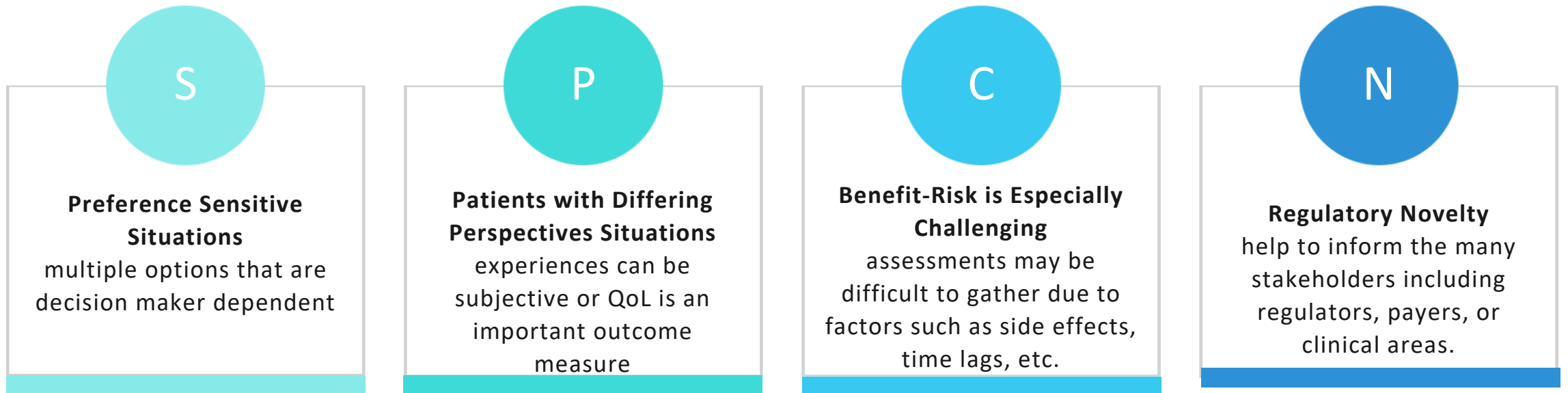
Engagement Continuum



Source: PCORI Budgeting for Engagement. Adapted from Hanley et al. (2004) Involving the public in NHS, public health and social care research. Carmen et al. (2013) Patient and family engagement: A framework for understanding the elements and developing interventions and policies. *Health Affairs*, 32(2), 223-231. Arnstein, S.R. (1969) A ladder of citizen participation. *Journal of the American Planning Association*, 35, 216-24

INTEGRATING COMMUNITY PREFERENCES

CORE set of factors in the consideration of community preference study development



Framework Example

**Parent
Project
Muscular
Dystrophy**

Conducted 5 patient-focused benefit-risk studies

Published 2 whitepapers on patient engagement

Established a patient registry

Created patient-reported outcomes that reflect the needs of the community

Wrote draft guidance for Duchenne muscular dystrophy that the FDA later adopted.



End Result

Duchenne Muscular Dystrophy and Related Dystrophinopathies: Developing Drugs for Treatment Guidance for Industry

**U.S. Department of Health and Human Services
Food and Drug Administration
Center for Drug Evaluation and Research (CDER)
Center for Biologics Evaluation and Research (CBER)**

**February 2018
Clinical/Medical**

Framework Example

Parent Project Muscular Dystrophy

PPMD Preference Studies 2013 - 2021 Quantifying the patient voice



2013

5 studies completed, 1 ongoing, 1 early stage

1. Caregiver preferences for emerging treatments
2. Patient vs Caregiver preferences
 - Symptom priorities for treatments
 - Meaningful benefit in pulmonary outcomes
3. Research as an event – testing discreet choice (DCE)
4. Preferences for emerging Gene Therapies
5. Global study of treatment preferences and advocacy needs
6. Steroid patient experience study (ongoing)
7. Second preference study on Gene Therapies (DUK, est start May 2021)

2021

Research Collaborators

- Dr. John Bridges (The Ohio State)
- Nonie Crossnohere (JHSPH)
- Dr. Holly Peay (RTI International)

Funding and Partnership

- Pfizer
- Everylife Foundation
- Solid Biosciences
- Santhera Pharmaceuticals
- Mallinckrodt
- PTC Therapeutics

Methods

- Best-Worst case 1 and 2
- Discreet Choice
- Threshold technique
- Likert scales
- Qualitative – surveys, interviews, focus groups



Success Factors

Parent
Project
Muscular
Dystrophy

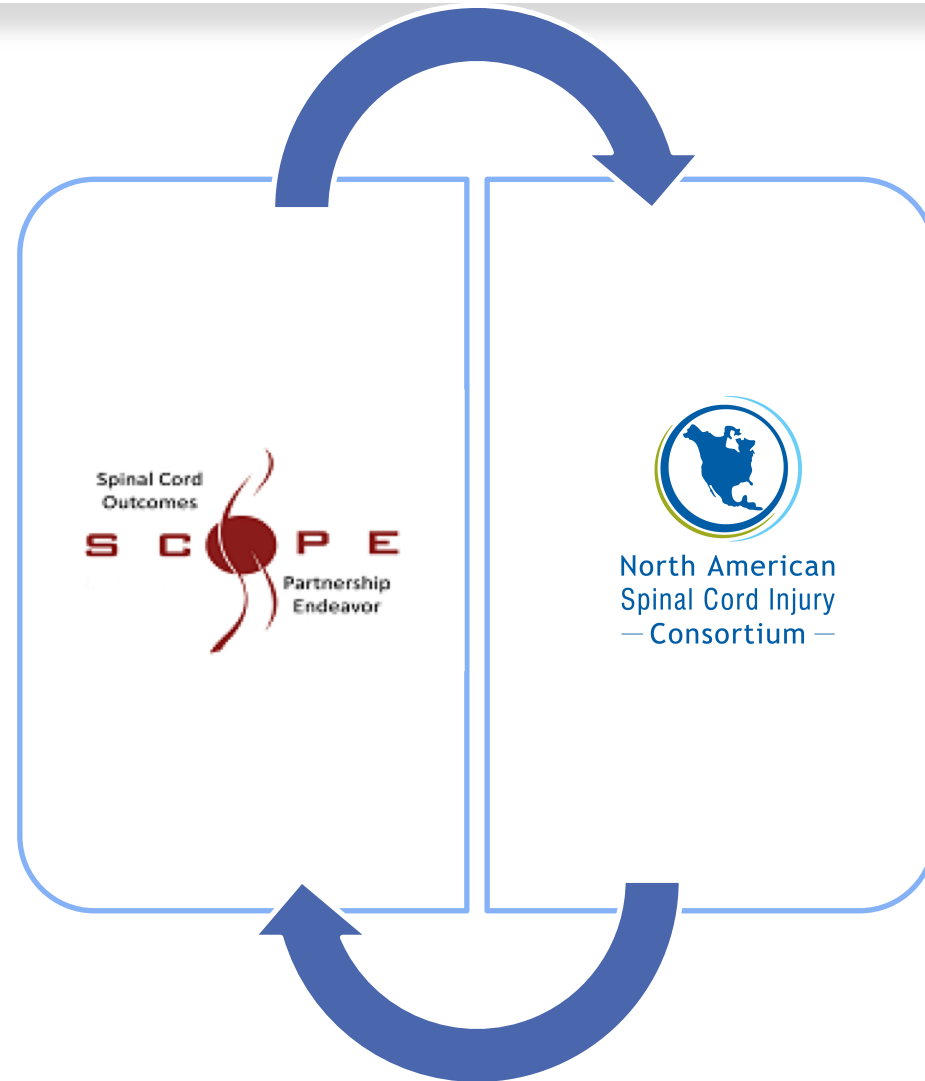


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Based on interview with Ryan Fischer, Chief Strategy Officer of PPMD and program lead

- Academic Collaborators who are patient preference experts/**social scientists** - this is key. It should not be disease specific researchers, i.e. MD or SCI researchers with an inherent bias.
- They approached preference studies first with hypotheticals with both lived experience and caregivers. They also studied worries/concerns specific to a treatment scenario or symptoms paired with experience. i.e. respiratory health/cough assist.
- Every study has a stakeholder advisory board: clinician, lived experience, caregiver, industry, researcher, project lead
- Mitigate response rate reporting assumptions. They approached this by sending a wide recruitment, and people respond to a link to receive the survey. This appeased publishers and the FDA. FDA also wanted to see opt out options when comparing treatment scenarios.
- Focus on methods with your collaborators.
- Assembled a **working group consisting of MD community representatives** (both LE & caregivers), research collaborators, funding and partners, consultant, plus a representative from FDA's Office of Strategic Programs, CDER and a member of Faster Cures leadership and policy team.

PFDD-PPI Project Collaboration



Thank You to our Supporters!



**Paralyzed Veterans
of America**



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Connect with Us! Happy Holidays



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