Guiru (Rylie) Ding

Statistical Programmer II at PAREXEL

Summary

Skilled in phase I to phase IV clinical trials in therapeutic areas of CNS, Oncology, Respiratory, Insomnia and PK/PD.

Leading teams from different time zone on various studies to ensure in time deliverables with excellent quality.

Working in environment with controlled documents such as SOPs, ICH/FDA guidelines and study protocols; working closely with clinicians, statisticians, study team and publication managers to generate and QC outputs.

Excellent skills in SQL, SAS Macro Facility, SAS/GRAPH, SAS/STAT, TLGs.

Experienced in QC outputs of Tables, Listings and Figures to ensure accuracy and consistency with analysis plan.

Experienced in review clinical study protocols and SAPs to ensure accuracy, quality and programmable statistical methodologies.

Involved in CRF Reviews and STAT review to check for data integrity, missing values and out of range values.

Developed SAS Macros for generic coding and reusable modules.

Excellent interpersonal and communication skills with good team player attitude.

Work well within a team and independently with minimal supervision.

Skills & Expertise

Public Health
SAS
Stata
Statistics
Data Analysis
Literature Reviews
Health Policy
Quantitative Research
Program Evaluation

Epidemiology
Global Health
Economic Evaluation
Microsoft Office
Econometrics
Research
Qualitative Research
Biostatistics
Research Design
Data Collection
SPSS
Health Services Research
Statistical Modeling
International Health
Access
CDISC
Clinical Data Management
clinical trials
sdtm
Clinical Study Design
Oncology Clinical Research
Clinical Trials
SAS Programming

Experience

Statistical Programmer II at PAREXEL
June 2015 - Present (1 year 1 month)

Leading teams in India and South Africa with majorly focus on Phase 1 PK studies along with Phase II studies with tight deadlines. Communicating with clients and providing service requested including timelines and quality of deliverables.

Providing training to individuals on various programming aspects and helping in the senior review of all the deliverables (SDTM, ADaM, Data Mapping Specification, Define.xml package, TFLs, Reviewer's Guide, OpenCDISC report) to achieve the utmost quality in time.

Assigning resources for various studies and managing timelines to make sure timely deliverable. QC output and datasets to ensure the accuracy of summary tables, listings and graphs produced for final reports.

Responsible for creating the global macro templates to be used throughout the company as one standard to create SDTM/ADaM and Define.xml domain. Responsible for maintaining timely progress of the team in order to achieve project milestones.

Provide primary SAS support for Special Projects/Exploratory Analyses in all therapeutic areas including submissions, ad hoc analyses and post-hoc analysis for publications. Coordinate with Statisticians, Clinical Study Managers, Clinical Data Managers, Medical Writers and others to insure key targets are met.

Working closely with statisticians to support the analysis and assisting in the development and validation of the TLGs on both UNIX and Windows systems.

Review edit check specifications, create edit check programs and providing feedback to the Data Management.

Creating reusable Macros, testing and debugging existing macros for validation, analysis, report generation and data cleaning.

SAS Programmer at H2O Clinical

December 2013 - June 2015 (1 year 7 months)

Successfully handled multiple projects at the same time. Lead programmer for concurrent phase 2 and phase 3 clinical trials.

Responsible for maintaining timely progress of the team in order to achieve project milestones.

Wrote CDISC compliant specifications for SDTM+ and ADaM datasets and validated the same.

Worked closely with statisticians to support the analysis and assisted in the development and validation of the TLGs.

Created reusable Macros, tested and debugged existing macros for validation, analysis, report generation and data cleaning.

Generated tables and listings for demographics, efficacy, safety and lab results for multiple clinical studies are various phases.

Integrated data from different sources such as CRF data, EDC data and electronic laboratory data from different CROs

Creating CDISC formatted datasets (e.g. SDTM, ADaM) and CRF annotation, developing specifications and Define.xml in SAS and SQL environment

Advanced knowledge of SAS including macro language Output Delivery System (ODS). Assessed data integrity and validity of data using Edit Checks.

Consultant at Mosaic Group
May 2013 - February 2014 (10 months)

Research Assistant at JohnsHopkins Bloomberg School of Public Health
January 2013 - May 2013 (5 months)

Education

The Johns Hopkins University
Master of Health Science, Health Economics, 2012 - 2013
Activities and Societies: UAID International China AIDS program

Nankai University
Master of Economics, Regional Economics, 2010 - 2012
Grade: 3.88

Southwestern University of Finance and Economics
Bachelor of Arts (B.A.), Economics, 2006 - 2010
Grade: 3.75
Activities and Societies: Economics Championship

Interests

Public Health, Biostatistics, Health Systems & Financing, Health Insurance, HIV/AIDS

Languages

English (Full professional proficiency)
Chinese (Native or bilingual proficiency)

Publications

Income Elasticity of Vaccines Spending versus General Healthcare Spending
Health Economics May 22, 2015
Authors: Guiru (Rylie) Ding, Y. Natalia Alfonso, David Bishai

Using cross-country data on gross domestic product and national expenditure on vaccines, we estimate and compare the income elasticity of vaccine expenditure and general curative healthcare expenditure. This study provides the first evidence on the national income elasticity of vaccination spending. Both fixed and random effects models are applied to data from 84 countries from 2010 to 2011. The income elasticities for healthcare expenditure and vaccine expenditure are 0.844 and 0.336, respectively. Despite vaccines' high cost-effectiveness, the national propensity to spend income on vaccines as income increases lags behind general health care. The low income elasticity of vaccine spending means that relying on economic growth alone will provide an unacceptably slow trajectory to achieving high vaccine coverage levels.

Honors and Awards

China Medical Board Next Generation Fellowship

China Medical Board

August 2012

The CMB Next Generation Fellowships offer financial support for international master's degree study in the fields of Health Policy and Systems Sciences. The CMB Next Generation Fellowships offered US$65,000 for one full year of academic study at Johns Hopkins University.

Graduate Student Scholarship for Academic Excellence

Nankai University

May 2011

Annually award for top 1% Academic Excellence Students in Nankai University.

Outstanding research paper award of 2011 Institute of Quantitative and Technical Economics Annual Meeting

Institute of Quantitative and Technical Economics

September 2011

Courses

Master of Health Science, Health Economics

The Johns Hopkins University
Health Economics I&II&III
Biostatistics I&II&III&IV
Health Policy I&II
Managed Care And Health Insurance
Comparative Health Insurance
Mathematical Microeconomics
Stata Programming
Introduction to SAS statistical package
Principle of Epidemiology
Econometrics
Economic Evaluation I & II&III

Master of Economics, Regional Economics

Nankai University
Stochastic Process
Macroeconomics
Microeconomics
Behavioral Economics
Mathematical Economics
Applied Statistics Theory and Application
Economic Growth Theory
Comparative Studies on Political and Institutional Economics

Projects

Income Elasticity of Vaccines Spending vs. General Healthcare Spending in Developing and Developed Countries

January 2013 to Present

Members:Guiru (Rylie) Ding, Y. Natalia Alfonso, David Wang, David Bishai

- Managed a global vaccine expenditure database, collected data for related variables, and reconciled 2 years local currency data into current US dollars with statistical software (Excel and STATA)
- Conducted the econometric and statistical analysis to develop the best models, Wrote 2 sections of the paper
- Literature review

Economic Evaluation of a new national rotavirus vaccination program in India, 2011

January 2013 to Present

Members:Guiru (Rylie) Ding

- Conducted impact evaluation and cost-effectiveness analysis (CEA)(using Excel).
- Simulated DALYs averted and deaths averted and estimated vaccination costs.
- Wrote CEA manuscript and conducted literature review.

Mandatory Managed Care Plan for all Medicaid HIV/AIDS Patients

December 2012 to March 2013

Members:Guiru (Rylie) Ding

- Conducted literature review and researched States currently mandate managed care plan for HIV/AIDS patients.
- Developed a Public-Sector Decision Memo on Medicaid HIV/AIDS Patients.

Tobacco Control Program in Chinese urban cities.

December 2012 to Present

Members:Guiru (Rylie) Ding

- Conducted literature review and conducted a policy plan to reduce the smoking rate in Chinese main urban cities.
- Developed a Policy brief on tobacco control in urban China.

Volunteer Experience

AIDS China program coordinator at UAID

December 2012 - July 2013

Initiating and organizing the China Summer AIDS Trip for UAID participants

Stressbuster at Johns Hopkins Medical Institute

November 2012 - Present

Meet and team with other students committed to helping people be healthier

Program Coordinator at Nankai University

November 2010 - Present

- Assisted the program director with daily administration of the master students (over 300) in economics department
- Supervised main campus events, such as orientation, homecoming, regular and festival events

---

Guiru (Rylie) Ding

Statistical Programmer II at PAREXEL

Contact Guiru (Rylie) on LinkedIn