Screening rounds

R1

Jan 01 2013- Jan 01 2020

Sept 20

Alzheimer disease OR Alzheimer's disease OR AD OR Parkinson disease OR Parkinson's disease OR PD OR ALS OR Amyotrophic lateral sclerosis OR Huntington disease OR Huntington's disease

R2

Sept 26-Jan 01 2013- Jan 01 2020

MS (Multiple Sclerosis) OR MS OR Migraine OR Headache OR Epilepsy OR TBI OR Traumatic Brain Injury OR Stroke

R3

Sept 28

1. 01/01/2011-12/31/2012

Alzheimer disease OR Alzheimer's disease OR AD OR Parkinson disease OR Parkinson's disease OR PD OR ALS OR Amyotrophic lateral sclerosis OR Huntington disease OR Huntington's disease OR

MS (Multiple Sclerosis) OR MS OR Migraine OR Headache

1. 01/01/2011-12/31/2012

Epilepsy OR TBI OR Traumatic Brain Injury OR Stroke

1. 01/02/2020-01/01/2021

Alzheimer disease OR Alzheimer's disease OR AD OR Parkinson disease OR Parkinson's disease OR PD OR ALS OR Amyotrophic lateral sclerosis OR Huntington disease OR Huntington's disease OR MS (Multiple Sclerosis) OR MS OR Migraine OR Headache

<https://clinicaltrials.gov/ct2/download_studies?cond=Alzheimer+disease+OR+Alzheimer%27s+disease+OR+AD+OR+Parkinson+disease+OR+Parkinson%27s+disease+OR+PD+OR+ALS+OR+Amyotrophic+lateral+sclerosis+OR+Huntington+disease+OR+Huntington%27s+disease+OR+MS+%28Multiple+Sclerosis%29+OR+MS+OR+Migraine+OR+Headache&term=&type=Intr&rslt=&age_v=&gndr=&intr=&titles=&outc=&spons=&lead=&id=&cntry=&state=&city=&dist=&locn=&phase=2&rsub=&strd_s=&strd_e=&prcd_s=01%2F02%2F2020&prcd_e=01%2F01%2F2021&sfpd_s=&sfpd_e=&rfpd_s=&rfpd_e=&lupd_s=&lupd_e=&sort=>

01/02/2020-01/01/2021

Epilepsy OR TBI OR Traumatic Brain Injury OR Stroke

<https://clinicaltrials.gov/ct2/download_studies?cond=Epilepsy+OR+TBI+OR+Traumatic+Brain+Injury+OR+Stroke&term=&type=Intr&rslt=&age_v=&gndr=&intr=&titles=&outc=&spons=&lead=&id=&cntry=&state=&city=&dist=&locn=&phase=2&rsub=&strd_s=&strd_e=&prcd_s=01%2F02%2F2020&prcd_e=01%2F01%2F2021&sfpd_s=&sfpd_e=&rfpd_s=&rfpd_e=&lupd_s=&lupd_e=&sort=>

degen additional including the ones that were excluded from R1 that were excluded but should be included from new rules

R4

Extra (got lost)

R5

MS expanded terms just added Multiple Sclerosis

R6

Trials with Limited data

R7

P2/3 trials that needed to be reincluded, MS trials that we found pubs for later, ones with no results

Add 1s in round 7 column and ones that need pubs from MS category and p3s that pass the P3 test

Lons answers about symptoms

|  |  |  |
| --- | --- | --- |
| **Indication:** | **Symptom** | **Used as a measure of disease modification? (yes/no)** |
| **AD** | Insomnia | No |
| Apathy | No |
| Agitation | No |
| Sleepiness | No |
| **Huntington’s** | Chorea | DK - possibly |
| **Stroke** | Fatigue | No |
| Walking deficits | No |
| **MS** | Chronic Visual Loss Related to Optic Neuritis | DK posibly |
| Processing speed | DK – doubt it |
| Pain | No |
| **PD** | Sleepiness | No |
| Apathy | No |
| **TBI** | Mood disorders | No |
| Affect Recognition | No |
| Sleepiness | No |
| **Migraine** | Dizziness | Not in itself |

**Surrogates-approved**

total number of gadolinium-enhanced lesions per patient recorded on T1-weighted MRI at monthly intervals for 6 months

TASKS TO DO

* To give out to double code
  + For Robyn
    - Matches checked
      * Phase checked and p2 positivity
    - P2vsP2/3 in included ones in our sample
      * But including p2/3 without data so include them all
      * check all phase ⅔ new ones dont know if they had a phase 2 part?
  + K
    - check migraine headache ones
  + K and M
    - For approved drugs, drugs@FDA documents used to
      * to check that we correctly matched P2 trials to P3 trials
      * bypass is correct
      * For preapproval-check if approved after the start of trial
      * Post-approval find the last version see if approved in the new indication
    - True Bypass further search
      * MEDLINE and EMBASE via OVID-only do once I define p2/3
* Later
  + Email authors where you didn’t find pubs
  + Email authors to see if they moved on to p3 in included trials excel
    - If don’t answer
    - Look at the publication
      * If they call it a phase 2----exclude (P2)
      * If they call it a phase 2/3--- include
      * Look for clues in intro, methods, and conclusion
      * If no phase is given if more than 300 patients—call a p2/3 if not P2
  + When data finalized
    - when data finalized see if other indications can go into SMD and pick outcome to put into it and make sure extracted that one if available
    - extract adas cog for ones without as the primary-make sure negatives are correct-SE was done correctly? Correct interval?
    - Fix consort
    - Make good forest plots
    - If anything movevd from exclude to include check approval and positivity
  + Figure out
    - severity
    - Funding- What to do about when it was not pharma but the drug was supplied by pharma
    - Make these non pharma---check this
* stroke recurrance vs recovery
* migraine vs headache
* check all of the interventions so they match the interventions in matching doc
* those that are terminated for futility-can we call non pos—check the few in R7 that could be safety or futility?
* JK
  + send him all the drugs/indications so he can approve all included trials- extended release compared to standard release- NCT00974974 and PEGylated Interferon Beta-1a-BIIB017
  + phase 1/2/3
  + I want to exclude p2/3 in primary going to change it
* Renata
  + Chi squared

SENT

* + headache is not used as prior evidence of migraine? “migraine headache”
    - need to know if migraine and headache can be connected because they are using this language
    - https://ichd-3.org/1-migraine/
  + Symptoms
    - MS-fatigue, walking, **Spasticity,** processing speed, Chronic Visual Loss Related to Optic Neuritis, flusymptoms, Cognitive Disorders, cognition, brain atrophy
    - Huntingtons- chorea, cognition optical neuritis
    - Stroke- verbal fluency
    - **Postictal Central Respiratory Dysfunction in Patients With Epilepsy**
    - When there were two primary analyses where one was positive and the other was not (inconsistent results), we used the following rules: check wth lon
      * Co-primaries: When they stated that all primaries had to be positive for the trial to be positive, we called inconsistent results nonpositive
      * Multiple primaries: In this case, each primary endpoint is tested at a significant level determined by the method for multiplicity adjustment or simply by the partition of the alpha levels. we called inconsistent results positive
      * In cases where there were 2 dose groups are both considered primary analysis groups, we called inconsistent results positive