

Study Designs and Endpoints (Outcomes)

In Protocols and on ClinicalTrials.gov

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Outline

- What is ClinicalTrials.gov (CTG)?
- Describe CTG design elements and how do they relate to protocols
 - Use 3 NIDDK studies as examples
- How are endpoints (outcomes) defined in protocols and CTG?
- How are results reported to CTG?
- Example of results reported for 1 NIDDK study



What is ClinicalTrials.gov?

- ClinicalTrials.gov (CTG) is a website and online database of clinical research studies.
- Its purpose is to provide information about these studies to the public, researchers, & health care professionals.
- Launched in 2000, required by federal laws
- Maintained by the NIH National Library of Medicine (NLM).
- Currently lists 544,024 studies with locations in 229 countries.
- https://clinicaltrials.gov/about-site/about-ctg



What are the benefits of ClinicalTrials.gov?

- Registration data can be used
 - to identify similar studies during protocol development,
 - to find studies for systematic reviews and meta-analyses,
 - to find study publications (automatically linked by NCT number).
- Results data can be used
 - for sample size estimates (means and SD),
 - for meta-analyses,
 - to supplement results reported in publications for studies with many secondary outcomes



Example of using CTG to plan a study

	Study Title	NCT Number	Status	Conditions	Interventions	Sponsor	Study Type
1	Glucokinase Activator in Mono genic Diabetes New	NCT06976658	Not yet recruiting	Diabetes MellitusMonogenic Diabetes	Drug: DorzagliatinDrug: matched placebo	Chinese University of Hong Kong	Interventional
2	Chronic Dorzagliatin on Insulin and Incretin Function in Interm ediate Hyperglycemia and Type 2 Diabetes	NCT06671340	Not yet recruiting	 Diabetes Mellitus Prediabetes / Type 2 Diabetes 	Drug: Dorzagliatin	Elaine Chow	Interventional
3	Cardiometabolic Benefit of Red ucing latrogenic Hyperinsuline mia Using Insulin Adjunctive Th erapy in Type 1 Diabetes	NCT06609356	Recruiting	Type 1 Diabetes Mell itus Glucokinase-Maturit y Onset Diabetes of t he Young (GCK-MOD Y)	 Procedure: Study Visit 1 Drug: Placebo Procedure: Study Visit 2 1 more 	Vanderbilt Universit y Medical Center	Interventional

https://www.clinicaltrials.gov/search?term=mody2 36 studies, 30 interventional, 22 completed, 6 with results Study descriptive data can be downloaded as a csv file (30 items)

Complete data: https://aact.ctti-clinicaltrials.org/ analyze using R or SAS



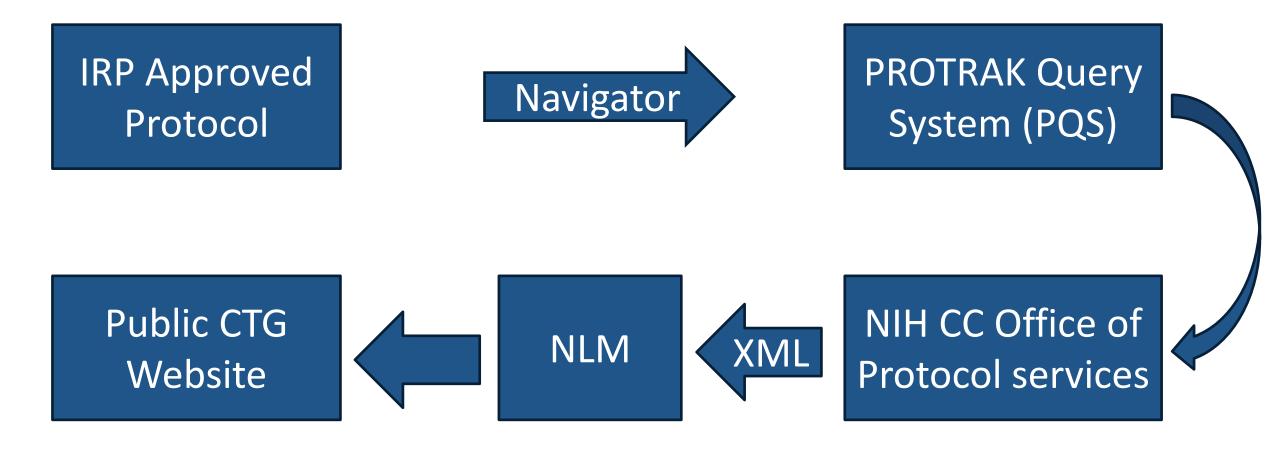


Which studies should be registered on CTG?

	Register	Report Results
All clinical trials (most medical journals)	X	
Clinical trials of drugs, biologics, & devices regulated by FDA, except phase 1	X	X
NIH funded clinical trials (2017 or later)	X	X
NIH IRP observational studies	X	

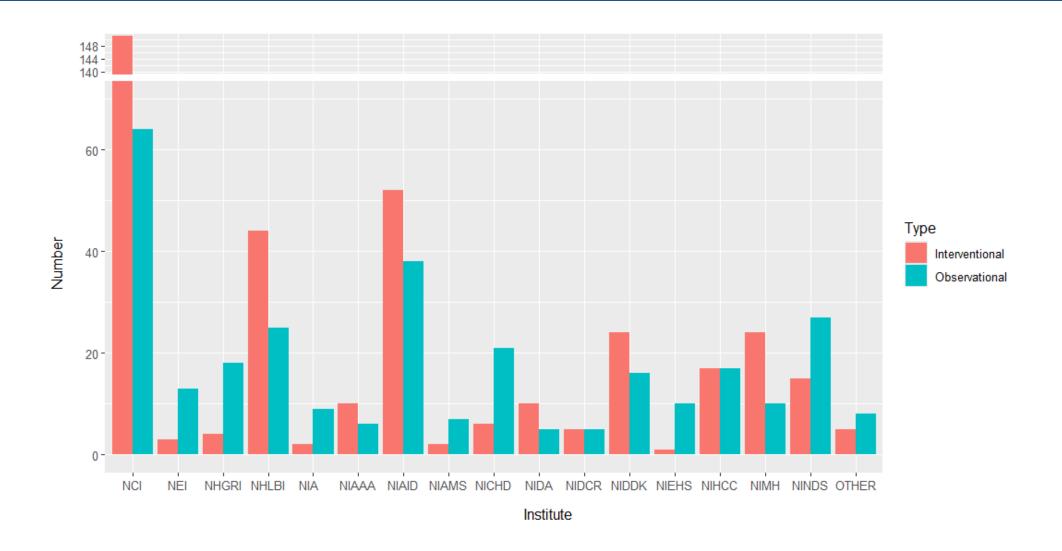


How are NIDDK IRP studies registered on CTG?



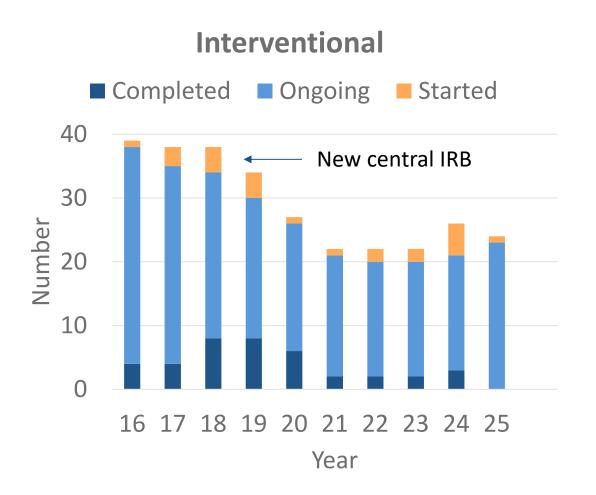


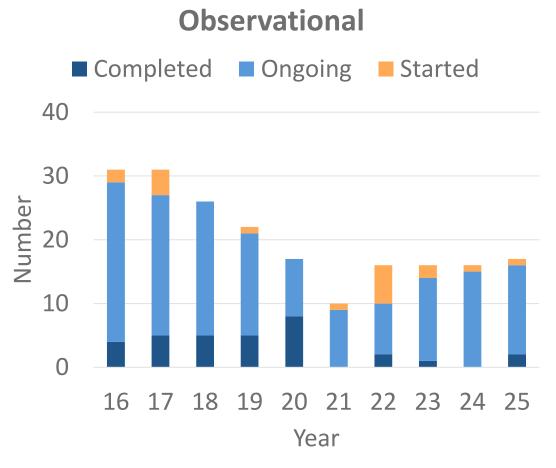
NIH IRP active studies as of 5/30/2025





NIDDK IRP active studies 2016 – 2025







What study information is included on CTG?

- Type of study investigational or observational
- Study name and description, disease or health problem
- Start and end dates, enrollment, study status (recruiting, etc.)
- Eligibility criteria and design (single arm, randomized)
- Interventions, arms or groups, and outcome measures
- Links to publications, with automatic links to PubMed if NCT number is in publication abstract



Interventional study model options

- Single: A group of participants receiving the same intervention
- <u>Parallel</u>: Pts assigned to 2+ groups (populations) or arms (interventions) for the duration of the study
- <u>Crossover</u>: Pts assigned to one intervention and then a second, usually in random order.
- <u>Factorial</u>: Pts assigned to 2+ interventions, each alone and in combination
- Sequential: Pts progress from 1 treatment to next if meet criteria.

Arms and interventions on CTG

Arm types

- Experimental
- Comparator
 - Active
 - Placebo
 - Sham (for procedures or devices)
- No Intervention
- Other

Intervention types

- Drug: Including placebo
- Device: Including sham
- Biological/Vaccine
- Procedure/Surgery
- Radiation
- Dietary supplement
- Other (includes diets)



Three NIDDK examples

- Processed Food and Energy Intake
 - Effect of Ultra Processed Versus Unprocessed Diets on Energy Intake, 18DK0044 (NCT03407053), 3/1/2018 – 2/26/2020
- Pegvisomant in Insulin Resistance
 - Study of Growth Hormone Inhibition Using Pegvisomant in Severe Insulin Resistance, 000765 (NCT05470504), 1/23/2023 1/31/2026
- Nicotinamide Riboside and Ketone Metabolism
 - Effect of Nicotinamide Riboside on Ketosis, Fat Oxidation & Metabolic Rate, 001690 (NCT06044935), 1/8/2024 – 1/31/2026



Processed Food and Energy Intake

Design, arms, and outcomes

- Randomized, 2 arm cross-over design
- Arm 1: Ultra-processed followed by unprocessed
- Arm 2: Unprocessed followed by ultraprocessed
- For reporting outcomes and AEs, the arms are the interventions
- Primary outcome: Ad libitum energy intake averaged over 14 days for each diet

Study schema







Pegvisomant in Insulin Resistance Schema

Design, arms, and outcomes

- Single arm trial
- Drug intervention
- Primary outcomes:
 - Change in glycerol rate of appearance (Ra) normalized to fat mass
 - Change in palmitate Ra normalized to fat mass

Study Schema

VISIT 1 (Day: -2 to 0)

3 Day Inpatient Visit Metabolic Testing Start pegvisomant by daily sc injection

Weekly Telephone Check-in (~ Days 7, 14, 21)

Review adverse events Review study drug compliance Day ~14 check liver function tests

VISIT 2 (~Day 28-31)

3 Day Inpatient Visit Metabolic Testing Review adverse events Review glucose logs

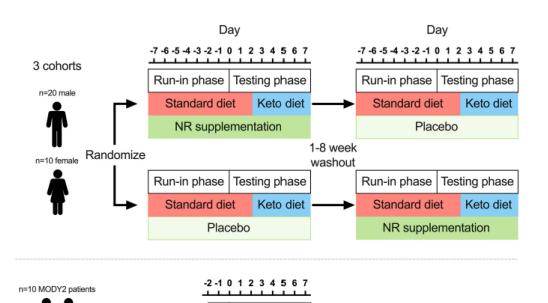


Nicotinamide Riboside and Ketone Metabolism

Designs, arms, and outcomes

- 3 cohorts (2 crossover design, 1 with a single group design)
- Interventions
 - standard diet, ketogenic diet
 - Nicotinamide Riboside (diet. supp.)
 - Placebo (dietary supplement)
- Primary outcomes
 - Change in sleeping energy expenditure between run-in and ketogenic diets
 - Difference in sleeping energy expend.
 between NR and placebo during keto diet

Study schema







How are outcome measures reported on CTG?

- Endpoints in protocols are called outcomes on CTG.
- The following is required for each outcome on CTG:
 - Specify as primary or secondary (tertiary are usually not included)
 - Each measurement is a separate outcome, for example, fasting LDL cholesterol, not lipid panel,
 - Time frame, for example, baseline and 6 weeks,
 - Questionnaire outcomes must include a description of scores,
 - Descriptions should not include hypotheses or analyses,
 - Outcome can be a summary measure, for example, correlation.

When do results have to be reported?

- Results for clinical trials must be reported within 1 year of the primary completion date.
- The primary completion date is the last date that data are collected from participants for all primary outcomes.
- It is not the date that measurements become available for analysis, for example, measurements by a central laboratory.
- Results must be reported within 1 year even if publications are still being drafted.



How are results submitted for IRP studies?

- When PQS is updated to say that the primary completion date has been reached, an email is sent to the PI and to NIDDK OCD.
- The PI is given access to the Protocol Registration and Results System (PRS) for the trial and the PI can enter results
- Biostatistics program staff can assist with entering results.
- As shown on the following slides, sometimes outcomes need to be revised to meet results reporting criteria.



Outcome title too long (aim not endpoint)

Original Outcome

- <u>Title</u>: To determine differences in ad libitum energy intake (kcals) during 2 weeks of eating an ultra-processed diet as compared to 2 weeks of an unprocessed diet matched for presented calories, macronutrient composition, sugar, fiber, and sodium.
- <u>Time Frame</u>: Ongoing
- <u>Description</u>:

NCT03407053

Revised Outcome

- <u>Title</u>: Ad Libitum Energy Intake
- <u>Time Frame</u>: 14 days
- <u>Description</u>: Ad libitum energy intake averaged over 14 days for each diet, measured in kilocalories (kcal) per day.
- Measure type: Mean (SE)
- <u>Units</u>: kcal/day



Outcome measure needs more detail

Original Outcome

- <u>Title</u>: Ability to tolerate drugs at the prescribed dose for the full course of therapy
- Time Frame: 6 months
- Description:

NCT03600714

Revised Outcome

- <u>Title</u>: Number of Participants Who Discontinue Medication
- Time Frame: 24 weeks
- <u>Description</u>: Discontinuation of the medication before 24 weeks by the clinical team or patient will be considered a failure to tolerate the medicine.
- Measure type: Count of participants
- Units: Participants



Example of gene expression data

Original Outcome

- <u>Title</u>: Changes in interferon stimulated genes during therapy with asunaprevir and daclatasvir
- <u>Time Frame</u>: 4 weeks on treatment
- Description:

NCT01888900

Revised Outcome

- <u>Title</u>: Changes in Interferon Stimulated Genes in the Liver
- Time Frame: Baseline and 2 or 4 weeks
- <u>Description</u>: Changes obtained by subtracting follow-up from baseline.
 Raw gene expression data were normalized using quantile normalization based on all the genes
- Measure type: Median (IQR)
- Units: Relative expression



Example of correlation data

Original Outcome (first registration)

- <u>Title</u>: To determine correlations between D2BP, as measured by [18F]fallypride and [11C]raclopride time-activity curves
- <u>Time Frame</u>: Ongoing
- Description:

NCT03648892

Revised Outcome (results)

- <u>Title</u>: Correlation Between Striatal D2
 Receptor Binding Potential (D2BP) as
 Measured by [18F]Fallypride and
 [11C]Raclopride Time-activity Curves
- <u>Time Frame</u>: Assessed at Days 2-5
- <u>Description</u>: Pearson's correlation coefficient is used with a possible range between -1 to 1.
- Measure type: Number (95% CI)
- Units: Correlation coefficient



Participant flow

Arm/Group Title	Metformin	Metformin and Liraglutide			
Period Title: Overall Study					
Started	13	11			
Completed	12	10			
Not Completed	1	1			
Reason Not Completed					
Withdrawal by Subject	1	0			
Poor compliance	0	1			

Therapeutic Targets in African-American Youth With Type 2 Diabetes, 17DK0013, NCT02960659



Baseline characteristics

Arm/Group Title	Metformin	Metformin and Liraglutide	Total			
Age, Continuous Mean (Standard Deviation) Unit of measure: Years						
Number Analyzed	13 participants	11 participants	24 participants			
	15.6 (2.1)	15.0 (2.1)	15.3 (2.1)			

Sex: Female, Male Measure Type: Count of Participants Unit of measure: Participants						
Number Analyzed	13 participants	11 participants	24 participants			
Female	8 61.5%	7 63.6%	15 62.5%			
Male	5 38.5%	4 36.4%	9 37.5%			



Outcome measures

Change in Absolute Gluconeogenesis From Baseline to 12 Weeks Type: Primary Time Frame: Baseline to 12 weeks					
Description	Gluconeogenesis is measured using stable isotope tracers and is reported as mg/kg lean body mass (LBM) per minute				
Time Frame	Baseline to 12 weeks				
Analysis Population Description					
Arm/Group Title	Metformin Metformin and Liraglutide				
Overall Number of Participants Analyzed	11	10			
Mean (Standard Deviation) Unit of Measure: mg/kg LBM/min	0.018 (0.34)	-0.050 (0.24)			





Adverse events

Other (Not Including Serious) Adverse Events —						
Frequency Threshold for Reporting Other Adverse Events	0%					
Arm/Group Title	Metfo	ormin	Metformin and Liraglutide			
	Affected / at Risk (%)	# Events	Affected / at Risk (%)	# Events		
Total	6/13 (46.15%)		7/11 (63.64%)			
Gastrointestinal disorders						
Abdominal pain *	1/13 (7.69%)	1	2/11 (18.18%)	2		
Diarrhea*	2/13 (15.38%)	3	2/11 (18.18%)	2		
Nausea*	1/13 (7.69%)	1	1/11 (9.09%)	1		
Vomiting*	0/13 (0.00%)	0	3/11 (27.27%)	4		





Summary

- CTG is a useful resource for study planning
- CTG formatting requirements provide a framework for specifying study design and outcomes
- Links
 - https://clinicaltrials.gov/policy/protocol-definitions
 - https://clinicaltrials.gov/policy/results-definitions

Questions?





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