March 8th, 2022

Robert M. Califf, M.D., MACC
Commissioner, Food and Drug Administration
10903 New Hampshire Avenue
Silver Spring, Maryland 20993

Re: FDA-2021-D-1214, Considerations for the Use of Real-World Data and Real-World Evidence To Support Regulatory Decision-Making for Drug and Biological Products

Dear Commissioner Califf:

On behalf of the Cystic Fibrosis Foundation, we write to provide comments in response to the Food and Drug Administration (FDA) Draft Guidance: Considerations for the Use of Real-World Data and Real-World Evidence to Support Regulatory Decision-Making for Drug and Biological Products. We appreciate the opportunity to share our thoughts on this document and commend the Agency for its efforts to clarify the responsibilities of industry sponsors that intend to use real-world data and real-world evidence to support the approval of new indications and satisfaction of post-marketing requirements for existing drugs.

Background on Cystic Fibrosis and the CF Foundation
The Cystic Fibrosis Foundation is a national organization actively engaged in the research and development of new therapies for cystic fibrosis – a rare genetic disease that affects over 30,000 people in the United States. The CF Foundation is dedicated to improving the quality of life and standard of care for individuals with CF and has been engaged in virtually every element of the research and development process, from preclinical discovery to identification of new therapeutics to conducting clinical trials as well as post-market surveillance and quality improvement studies.

To aid these efforts, the CF Foundation maintains a patient registry to collect information on the health status of people with cystic fibrosis who receive care at CF Foundation-accredited care centers. The CF Foundation patient registry is a unique and rich source of real-word data containing information dating back to 1986. This data is leveraged for many purposes, including developing CF care guidelines, guiding quality improvement initiatives at care centers, and optimizing standards of care in an age of disease-modifying CF drugs. Patient registry data is also used to support phase IV post-marketing requirements.

Regulatory Considerations for Non-Interventional (Observational) Studies: Real-World Data Access

Providing FDA with direct access to third-party patient-level data
We ask the FDA to clarify that third party organizations that hold patient-level data will not be obligated to provide data to sponsors without patient consent under the proposed guidance. The CF Foundation has agreements with industry sponsors to provide aggregate data, analyzed by the Foundation, for the purpose of

meeting post-marketing requirements. The proposed guidance states that "sponsors should have agreements in place with [third parties] to ensure that all relevant patient-level data can be provided to FDA and that source data necessary to verify the RWD are made available for inspection as applicable." We agree that the real-world data utilized over the course of non-interventional studies, as well as the programming codes and algorithms used to analyze them, should be well-documented and accessible to the FDA. However, providing those patient-level data to industry sponsors as intermediaries without patient consent would constitute a significant violation of patient privacy. Given the importance of this issue, we urge the FDA to clarify that third parties can provide the FDA direct access to the relevant patient-level data for regulatory purposes without involving industry sponsors in these situations.

Duration of data and analytic code preservation

We further ask the FDA to address the duration that third parties must preserve real-world data and associated programming codes and algorithms used for an industry sponsor's study. We recognize the importance of preserving data and analytic codes to allow FDA to replicate the study analysis. A limit, such as ten years, may be sufficient for FDA's purposes and help third-party data holders more easily comply with this requirement.

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Once again, we commend the FDA for its continued dedication to advancing the use of real-world data and real-world evidence to support regulatory decision-making for drugs and biological products. For people with CF and other rare diseases, real-world data and real-world evidence represent promising new avenues for addressing inherent challenges in rare disease drug development and approval. We welcome an ongoing dialogue with the FDA as the Agency continues to evolve its thinking on this matter.

Sincerely,

Mary Dwight

Senior Vice President
Chief Policy and Advocacy Officer