# Navigating the Clinical Research Landscape: The Role of Regulatory Intelligence and LLMs

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# Agenda

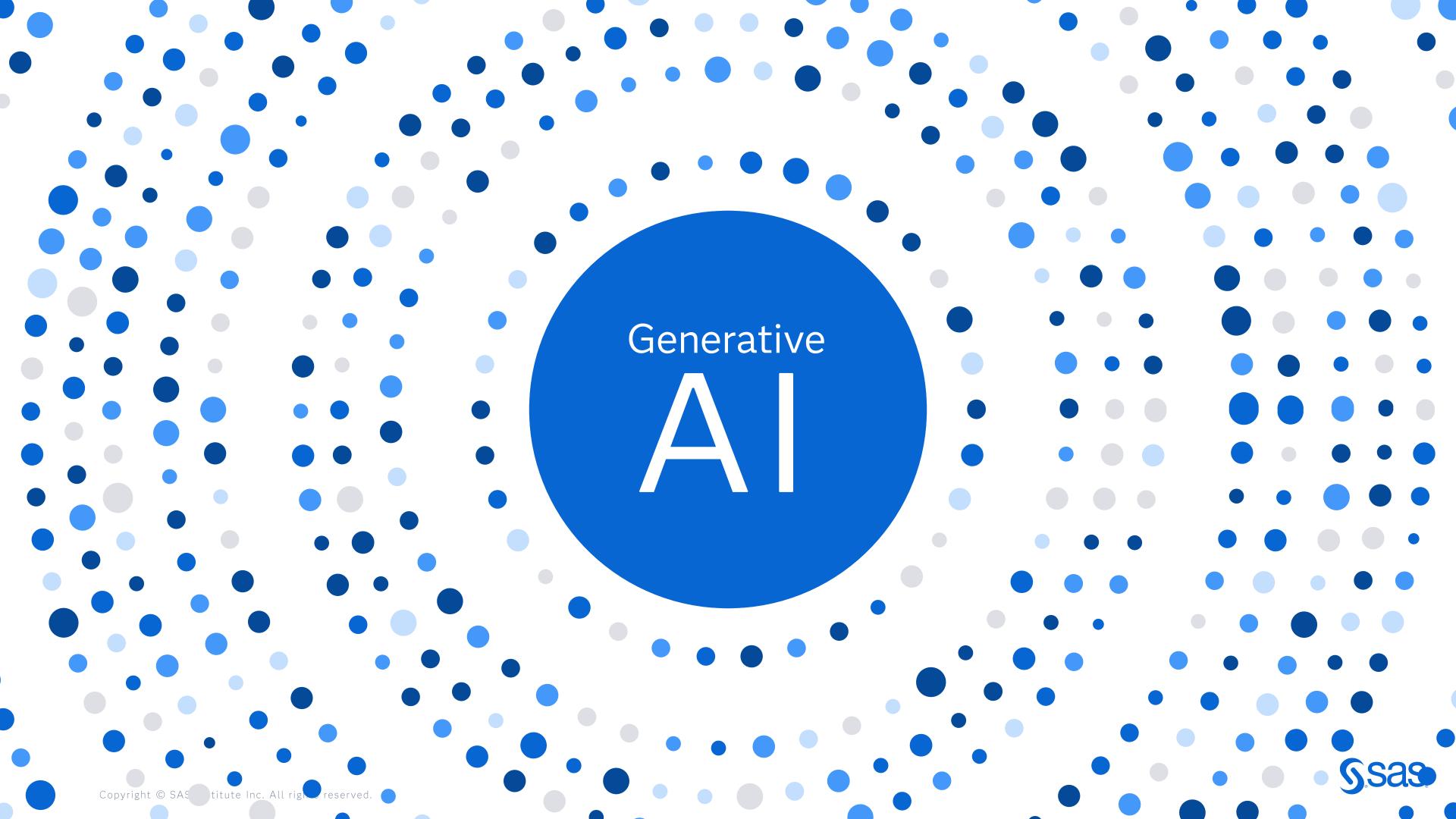
- Introduction
- CDISC information retrieval use case
  - Regulatory information use case

Summary



# Introduction





# Creating New Realities

## **GENERATES SOMETHING NEW LEARNS FROM DATA** Text Text Conversations Images Audio Videos & Images 000 Tables 3D Systems Generative Al 3D signals Graphs Prompt



# CDISC information retrieval



## The CDISC Case



### Importance and Challenges



## Complexity of the Standard

- The CDISC encompasses a set of guidelines and standards for the collection, exchange, reporting, and archiving of clinical research data.
- The breadth and complexity of these standards can be overwhelming, especially for organizations with fewer resources or less experience



### Challenges in Revisions

- The continuous evolution and updates of the standard make it difficult for companies to maintain compliance without constant external support.
- Reviewing data to ensure compliance can be a lengthy and error-prone process.

#### **Benefits**

#### Speed of standard adoption

- LLMs can assist in interpreting and applying CDISC standards, guiding organizations through the compliance process more quickly and efficiently.
- The ability of LLMs to process large amounts of text can significantly speed up the review of documentation and the identification of non-

#### **Reductions of Errors**

- Through automation and the precision of LLMs, it is possible to minimize human errors in the mapping and application of standards.
- Generative AI can suggest corrections and improvements based on a vast knowledge base, enhancing data quality.

#### **Democratization of Access**

• By making LLM-based tools accessible to a broad range of organizations, barriers to entry for CDISC compliance are reduced, allowing even entities with fewer resources to meet the required standards.

#### **Decision Support**

• By providing data-based analysis and recommendations, LLMs can assist researchers and professionals in making informed decisions regarding clinical data management, improving the effectiveness of studies



## **Accelerating CDISC Compliance**



## Empowering Compliance with Regulatory Assistant

#### **Advanced Technology Integration**

- Direct access to comprehensive CDISC documentation for SDTM, ADaM.
- Utilizes a Retrieval-Augmented Generation (RAG) system for enhanced information retrieval.
- Leverages Large Language Models (LLMs) to filter and synthesize pertinent information.

#### Strategic Advantages of Document Assistant

- Simplifies the process of adhering to CDISC standards, making the path to compliance more straightforward.
- Enhances the users' understanding of CDISC standards, supporting informed decision-making.
- Integrates vast amounts of data to provide comprehensive insights and recommendations, enhancing decision-making processes.

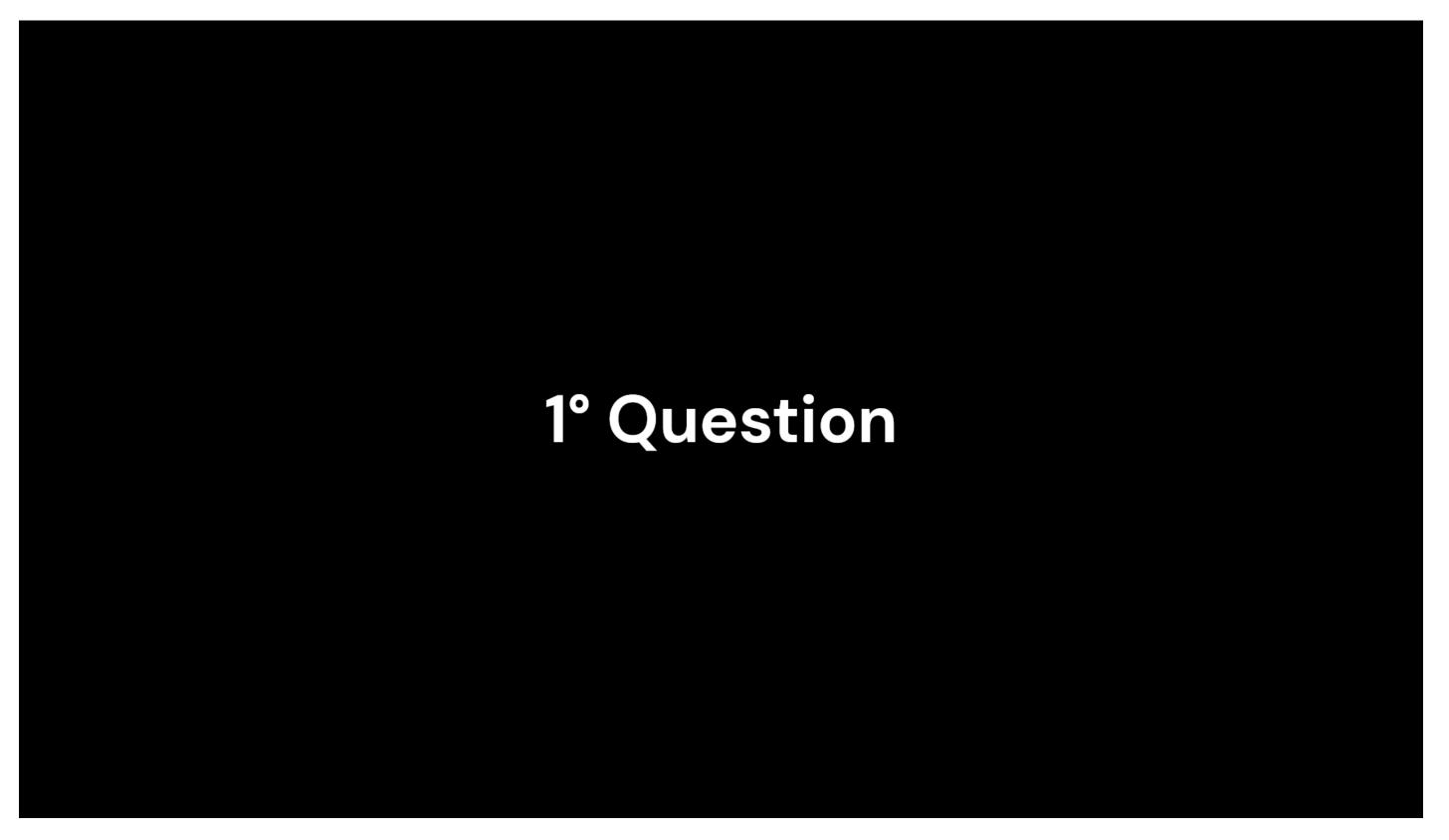
#### **Enhanced Data Quality and Compliance**

- Ensures that organizations can meet CDISC requirements with ease.
- Minimizes manual efforts in navigating and applying compliance guidelines.
- Empowers users to focus on research outcomes rather than compliance processes.



## 1° Use case: Documentation Q&A

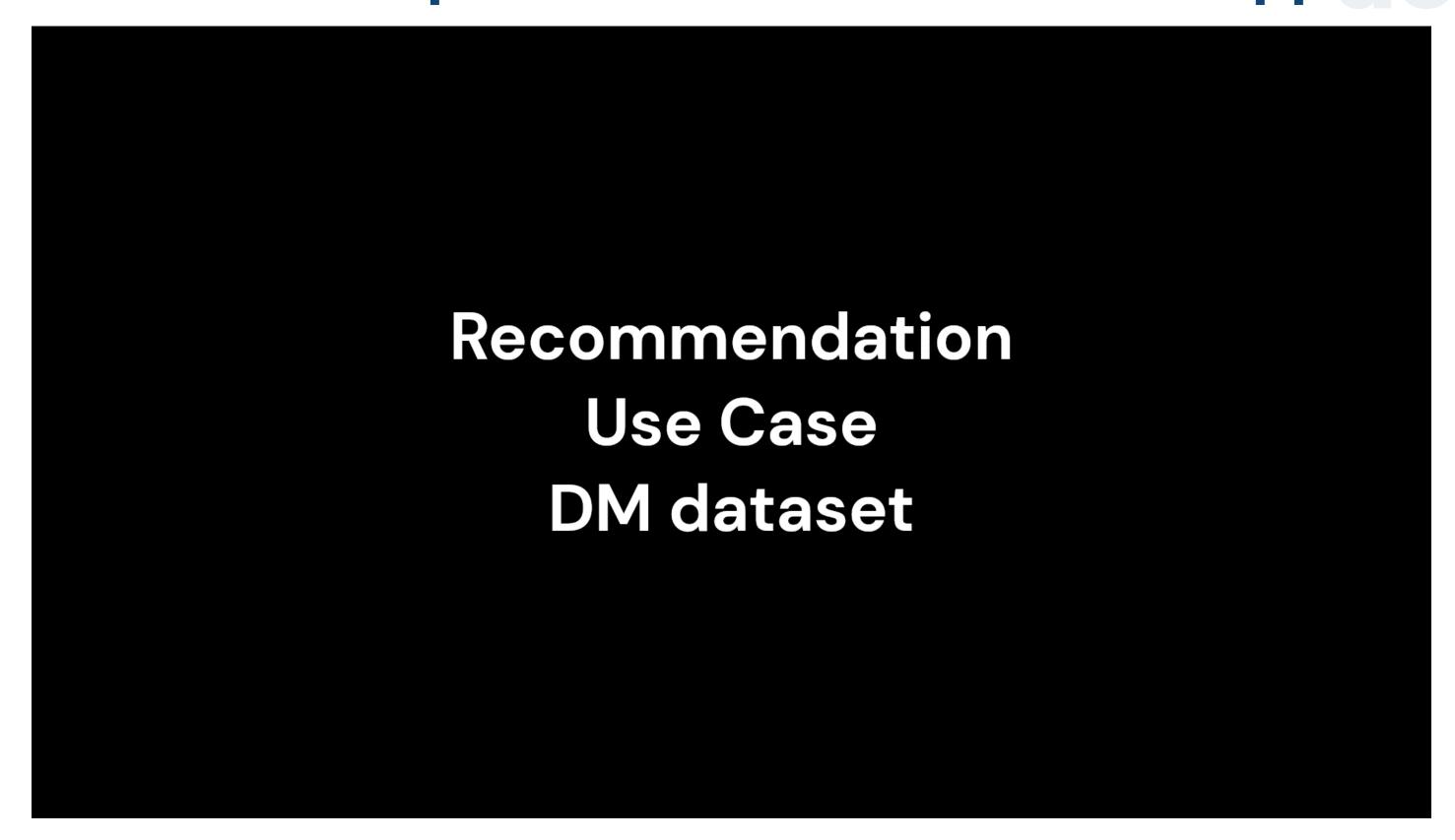






## 2° Use case: Compliance Recommendation App







# Regulatory information use case



# Our goal is the **structured extraction of information** for downstream analytical tasks.



## SMPCs in a nutshell

Health Products Regulatory Authority

#### **Summary of Product Characteristics**

#### 1 NAME OF THE MEDICINAL PRODUCT

Xymel Comp 37.5mg/325mg Film-Coated Tablets

#### 2 QUALITATIVE AND QUANTITATIVE COMPOSITION

Each film-coated tablet contains 37.5 mg tramadol hydrochloride and 325 mg paracetamol

Excipient with known effect

Each film-coated tablet contains 0.34 mg sodium.

For the full list of excipients, see section 6.1.

#### **3 PHARMACEUTICAL FORM**

Film-coated tablet

Light yellow, oblong, biconvex, film-coated tablet.

#### **4 CLINICAL PARTICULARS**

#### 4.1 Therapeutic indications

Tramadol/paracetamol is indicated for the symptomatic treatment of moderate to severe pain.

The use of tramadol/paracetamol should be restricted to patients whose moderate to severe pain is considered to require a combination of tramadol and paracetamol (see also section 5.1).

#### 4.2 Posology and method of administration

#### <u>Posology</u>

The use of tramadol/paracetamol should be restricted to patients whose moderate to severe pain is considered to require a combination of tramadol and paracetamol.

The dose should be adjusted to intensity of pain and the sensitivity of the individual patient. The lowest effective dose for analgesia should generally be selected. The total dose of 8 tablets (equivalent to 300 mg tramadol hydrochloride and 2,600 mg paracetamol) per day should not be exceeded. The dosing interval should not be less than six hours.

#### Adults and adolescents (12 years and older)

An initial dose of two tablets of tramadol/paracetamol is recommended. Additional doses can be taken as needed, not exceeding 8 tablets (equivalent to 300 mg tramadol and 2,600 mg paracetamol) per day.

The dosing interval should not be less than six hours.

Tramadol/paracetamol should under no circumstances be administered for longer than is strictly necessary (see also section 4.4). If repeated use or long term treatment with tramadol/paracetamol is required as a result of the nature and severity of the illness, then careful, regular monitoring should take place (with breaks in the treatment, where possible), to assess whether continuation of the treatment is necessary.

#### Paediatric population

The effective and safe use of tramadol/paracetamol has not been established in children below the age of 12 years. Treatment is therefore not recommended in this population.

#### Elderly

A dose adjustment is not usually necessary in patients up to 75 years without clinically manifest hepatic or renal insufficiency. In elderly patients over 75 years elimination may be prolonged. Therefore, if necessary the dosage interval is to be extended according to the patient's requirements.

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"A Summary of Product Characteristics, is a comprehensive document that provides detailed information about a medicinal product. [...] includes critical information such as:

- Composition and form
- Therapeutic indications
- Side effects
- [...] "

- written by ChatGPT (GPT4)



# **Extraction from Regulatory Documents**

**Health Products Regulatory Authority Summary of Product Characteristics** 1 NAME OF THE MEDICINAL PRODUCT Name Xymel Comp 37.5mg/325mg Film-Coated Tablets 2 QUALITATIVE AND QUANTITATIVE COMPOSITION Composition Each film-coated tablet contains 37.5 mg tramadol hydrochloride and 325 mg paracetamol Excipient with known effect Each film-coated tablet contains 0.34 mg sodium. For the full list of excipients, see section 6.1. **3 PHARMACEUTICAL FORM** Form Film-coated tablet Light yellow, oblong, biconvex, film-coated tablet. **4 CLINICAL PARTICULARS** 4.1 Therapeutic indications **Indications** Tramadol/paracetamol is indicated for the symptomatic treatment of moderate to severe pain. The use of tramadol/paracetamol should be restricted to patients whose moderate to severe pain is considered to require a combination of tramadol and paracetamol (see also section 5.1). 4.2 Posology and method of administration The use of tramadol/paracetamol should be restricted to patients whose moderate to severe pain is considered to require a combination of tramadol and paracetamol. The dose should be adjusted to intensity of pain and the sensitivity of the individual patient. The lowest effective dose for

analgesia should generally be selected. The total dose of 8 tablets (equivalent to 300 mg tramadol hydrochloride and 2,600 mg

paracetamol) per day should not be exceeded. The dosing interval should not be less than six hours.





# Why do we need to bring in an LLM for that?

NLP-veterans?

**VALID QUESTION** 



# Let's consider the following...

#### 4.8 Undesirable effects

#### Paracetamol

Adverse effects of paracetamol are rare, but hypersensitivity including skin rash may occur. There have been a few reports of blood dyscrasias including thrombocytopenia, leucopenia, pancytopenia, neutropenia and agranulocytosis, but these were not necessarily causally related to paracetamol. Acute pancreatitis after ingestion of above normal amounts.

#### Phenylephrine hydrochloride

High blood pressure with headache and vomiting, probably only in overdosage. Rarely palpitations. Also, rare reports of allergic reactions and occasionally urinary retention in males.

#### Reporting of suspected adverse reactions

Reporting suspected adverse reactions after authorisation of the medicinal product is important. It allows continued monitoring of the benefit/risk balance of the medicinal product. Healthcare professionals are asked to report any suspected adverse reactions via HPRA Pharmacovigilance, Earlsfort Terrace, IRL - Dublin 2; Tel: +353 1 6764971; Fax: +353 1 6762517. Website: <a href="www.hpra.ie">www.hpra.ie</a>; E-mail: <a href="medsafety@hpra.ie">medsafety@hpra.ie</a>

SMPC: Lemsip Decongestant & Flu Lemon Tablets



Yes, these are all the flags, not all the languages



## No standardization

There are too many ways to describe the same thing



## Contextual dependencies

What active ingredient? how rare?....



## This doesn't scale...

1/9 sections of 1/10 chapters in 1/24 languages (in the EU)





# Soo... NLP and text analytics are dead?

**NAIVE QUESTION** 





## The simplest: Cost

With 3500-8000 tokens per document **1k documents cost 105-240\$, for the input only**. Output is often 2-3x the price per token as the input\*.

# No, it's not

For some good reasons



## **Improving Accuracy**

Providing more focused "context" to an LLM, dramatically improves the output quality. This is especially true for "weaker" models.



## **Establishing Guardrails**

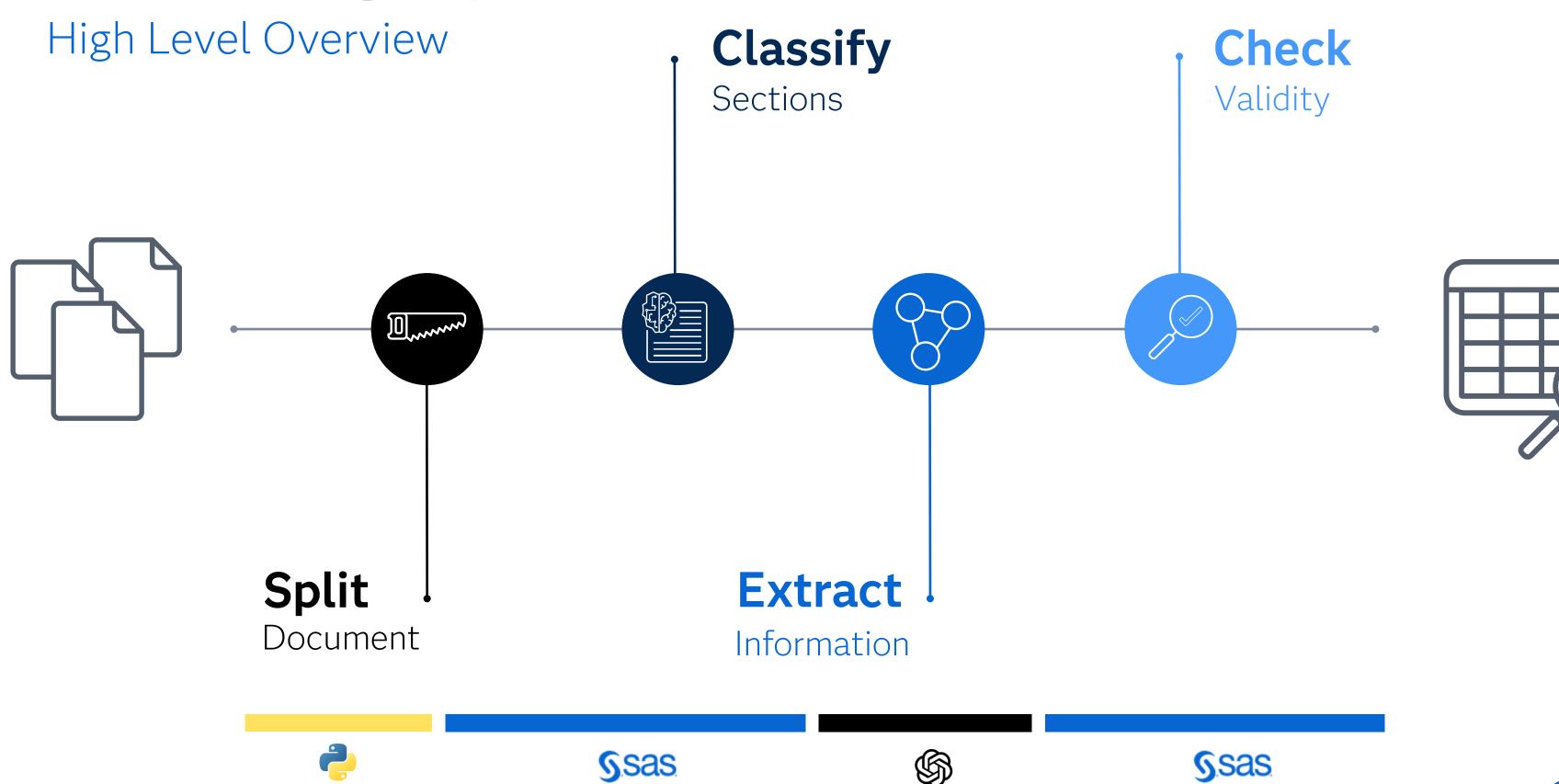
"Trust but verify" - If extractions impact downstream tasks, **LLMs** (and their fantasies) **shouldn't work unchecked.** 



# What we built

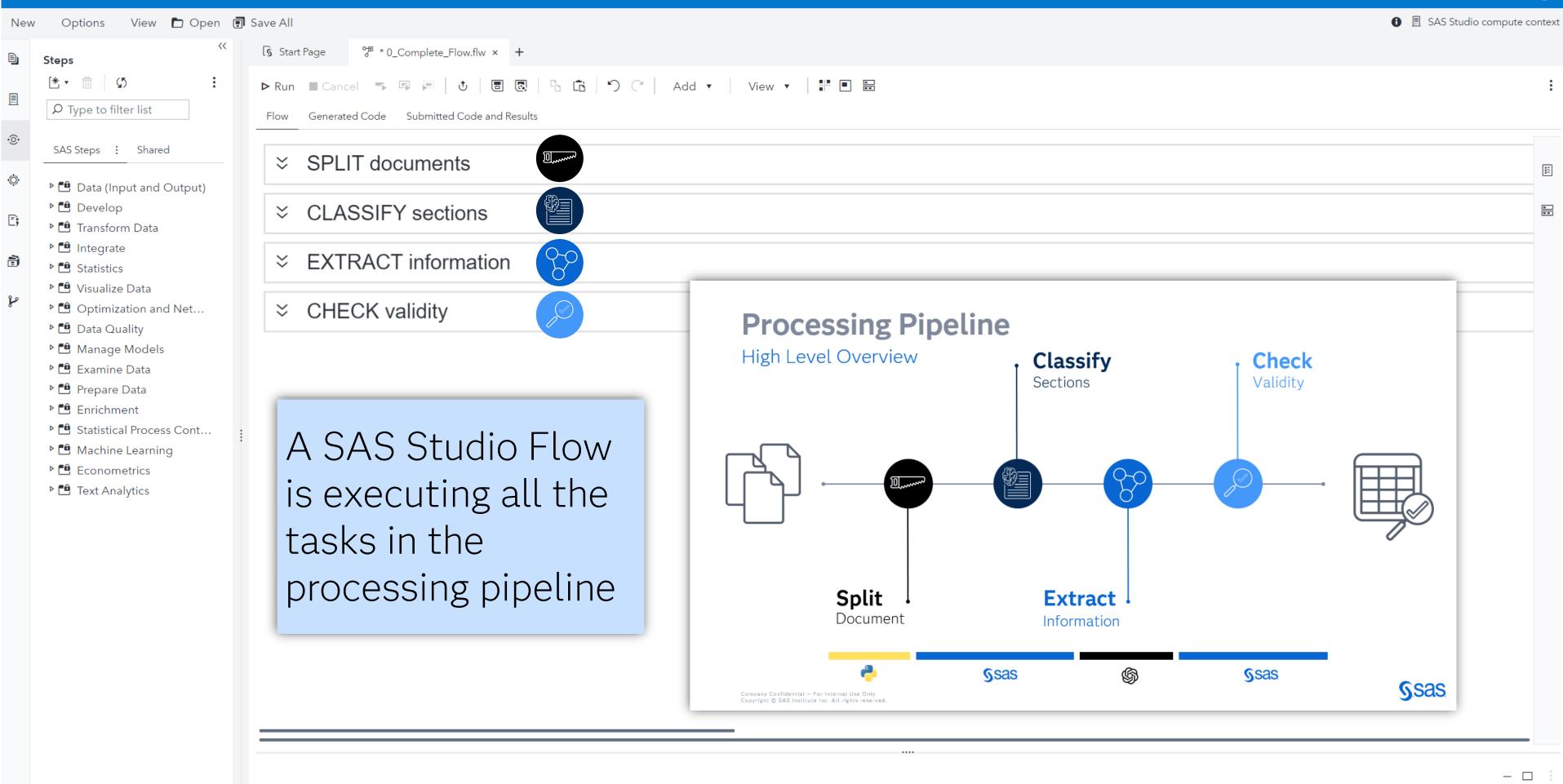


# **Processing Pipeline**

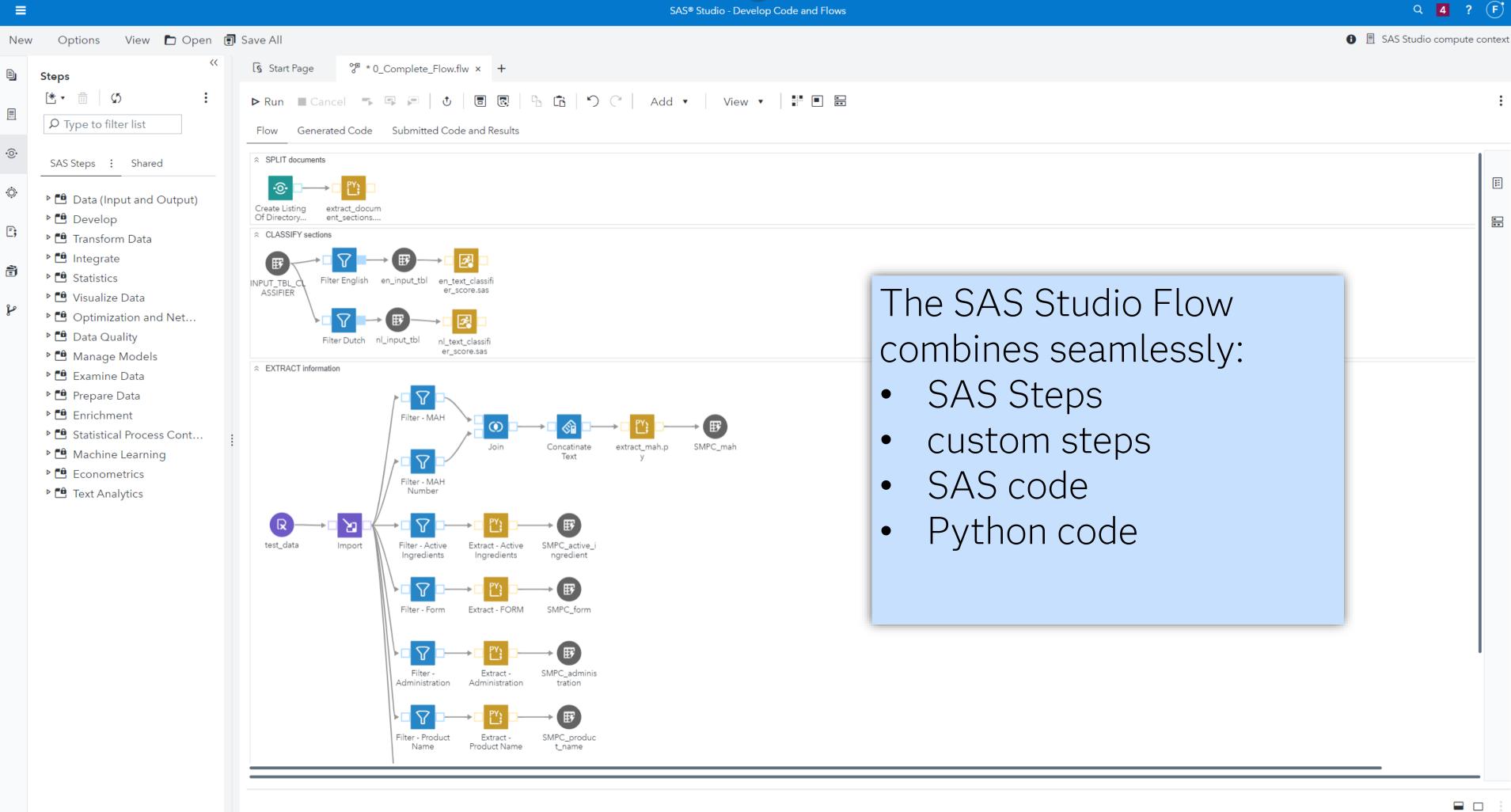


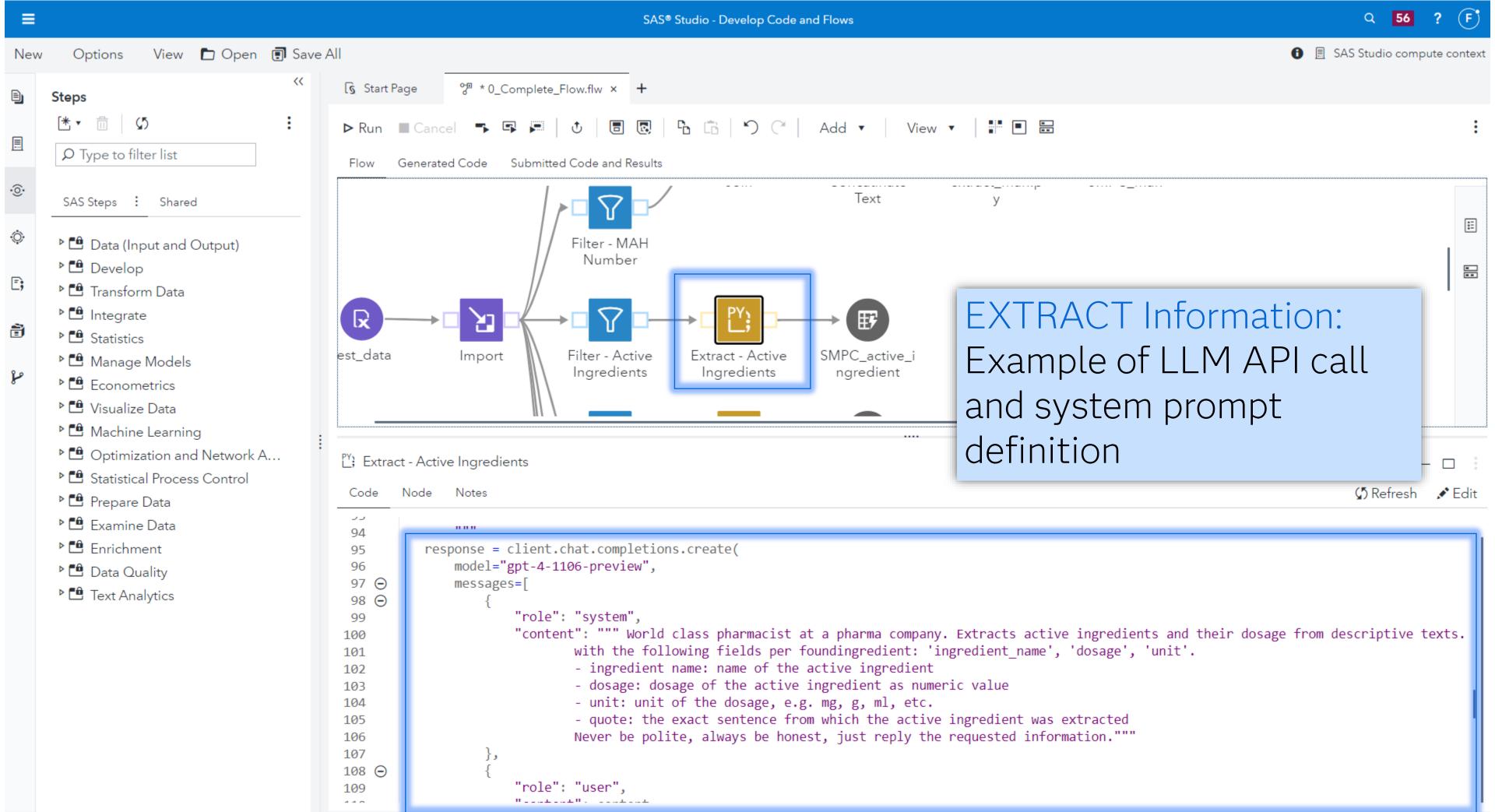


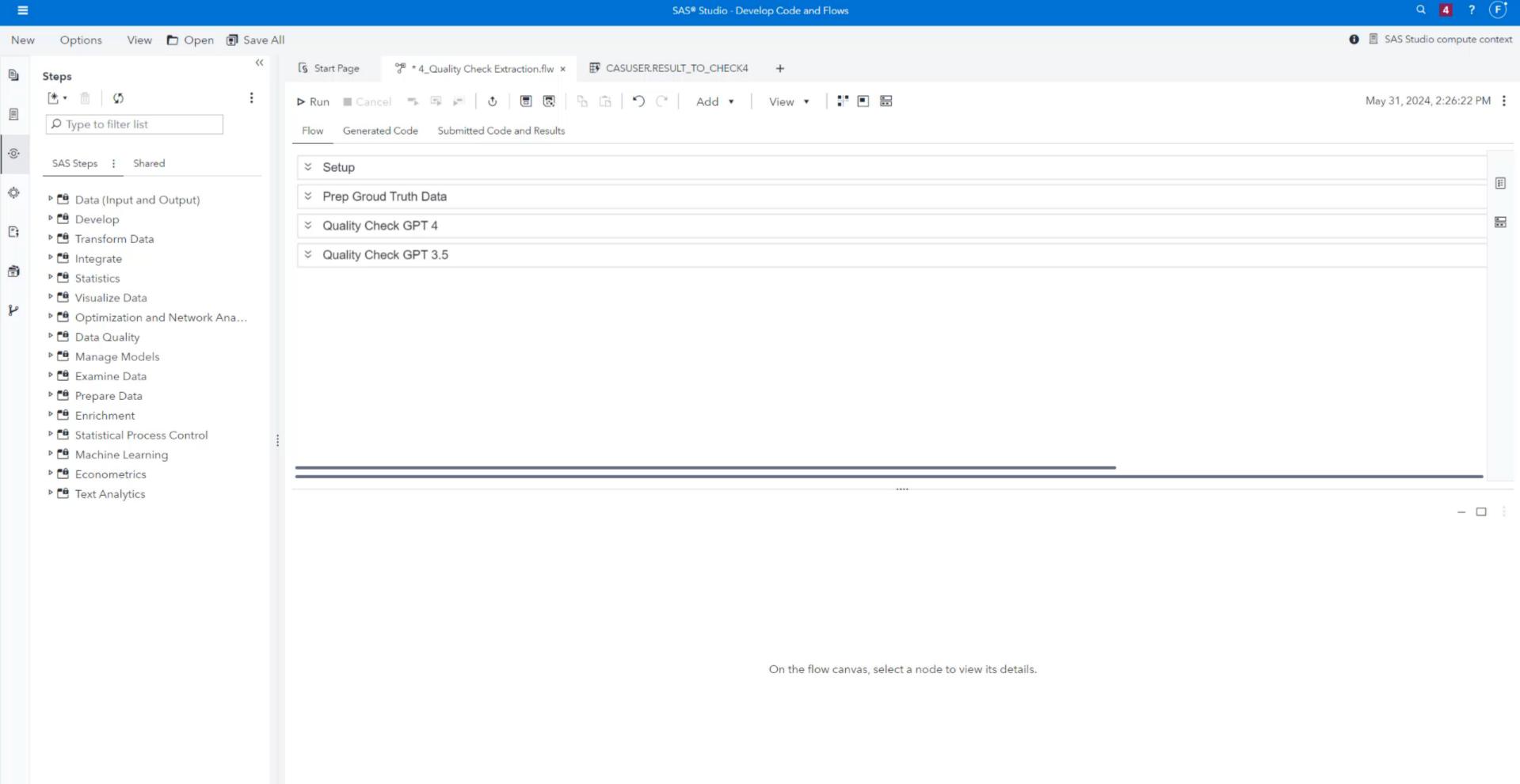




Q 4 ? (F)





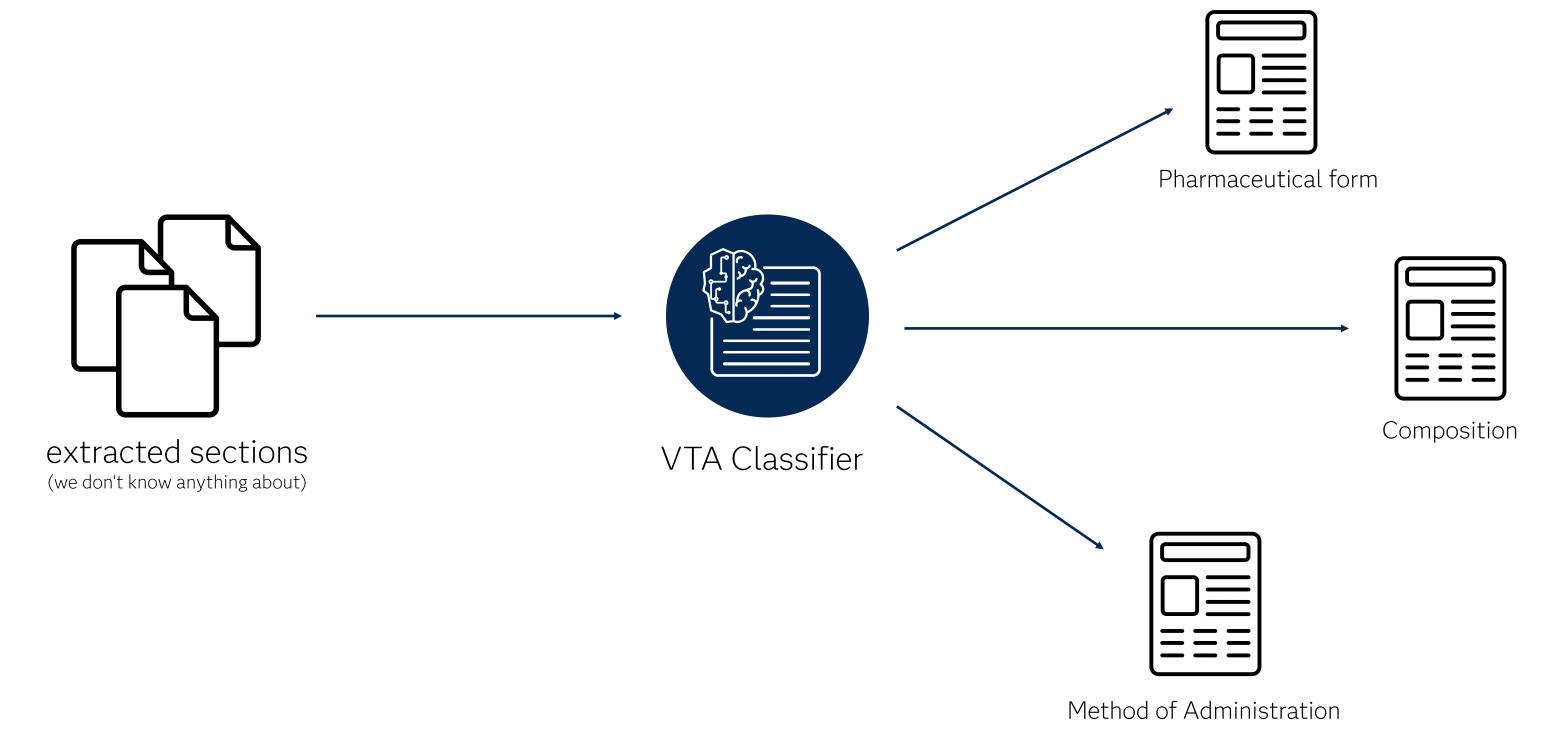


# "Pre- Filter" – What goes into the LLM



# Deciding what is relevant

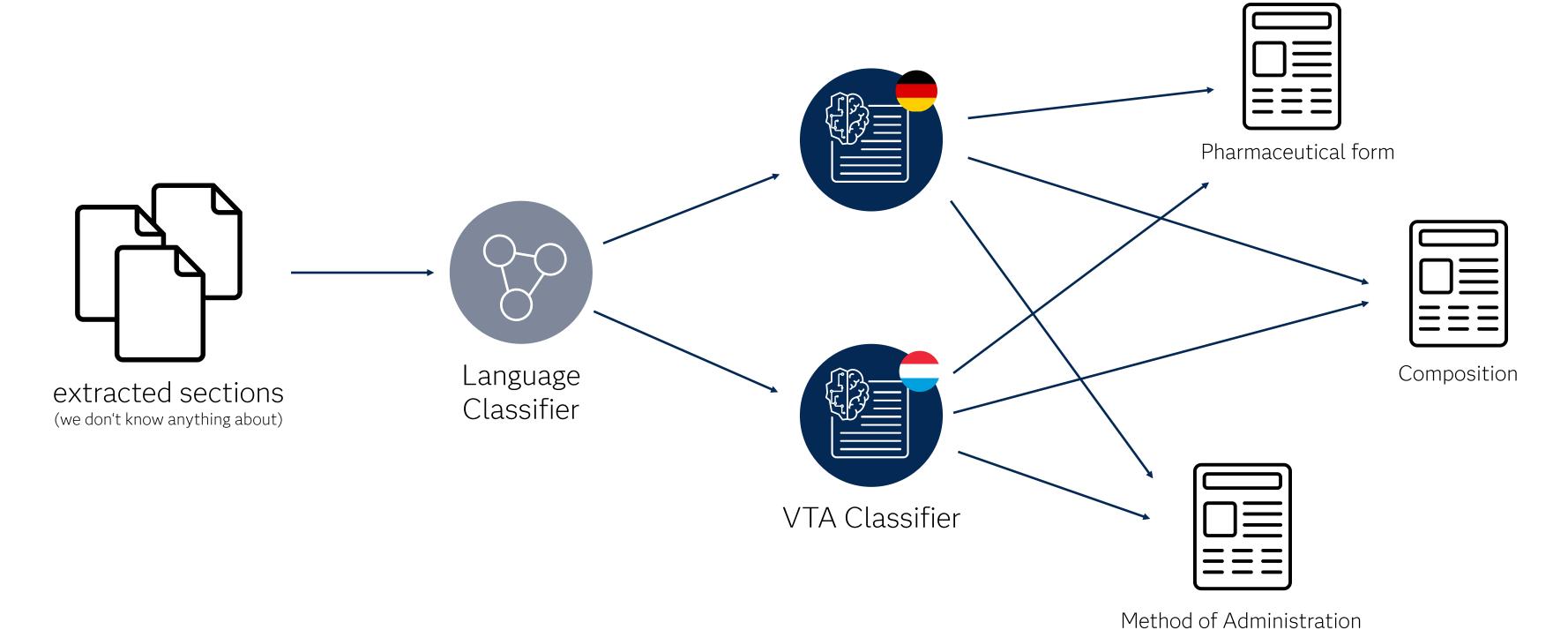
Classifying sections





# Deciding what is relevant

Classifying sections





# "Quality Checks" – output from the LLM



# **Trust but Verify**









## Applying sanity checking on extracted information

Obs	side_effects				
1	Increase in liver transaminases				
2	Changes of blood count such as thrombocytopenia and agranulocytosis				
3	Bronchospasm (asthma induced by analgesics)				
4	Hypersensitivity reactions like erythema including urticaria and anaphylactic shock				
5	Serious skin reactions				

Obs	rule
1	1:rule_1:(OR[NW],(AND[0.5],"increase@"),(AND[0.5],"liver transaminase@"))
2	2:rule_2:(OR[NW],(AND[0.5],"change@"),(AND[0.5],"blood count@"),(AND[0.5],"thrombocytopenia@"), (AND[0.5],"agranulocytosis@"))
3	3:rule_3:(OR[NW],(AND[0.5],"bronchospasm@"),(AND[0.5],"asthma@"),(AND[0.5],"induce@"), (AND[0.5],"analgesic@"))
4	4:rule_4:(OR[NW],(AND[0.5],"hypersensitivity reaction@"),(AND[0.5],"erythema@"),(AND[0.5],"include@"), (AND[0.5],"urticaria@"),(AND[0.5],"anaphylactic shock@"))

J.fule\_5.(OR[IVV],(AIVD[0.

:rule\_5:(OR[NW],(AND[0.5],"serious@"),(AND[0.5],"skin reaction@"))

Get extractions from LLM

Automatically generate rules for quality check

Obs	match	_category_	confidence
1	Increase in liver transaminases	rule_1	1
2	Changes of blood count such as thrombocytopenia and agranulocytosis	rule_2	1
3	bronchospasm (asthma induced by analgesics	rule_3	1
4	Hypersensitivity reactions like erythema including urticaria and anaphylactic shock	rule_4	1
5	serious skin reactions	rule_5	1

Score LITI rules, retrieve matches and calculate confidence score



## **Automate Low-Level NLP Tasks**







## Scaling with VTA

#### LLM extraction:

"Changes of blood count such as thrombocytopenia and agranulocytosis"

#### Text parsing

- 1) Tokenization
- 2) Lemmatization
- 3) Part-of-speech tagging and noun group extraction
- 4) Stop list

#### **Output:** Automated LITI rule creation

```
1:rule 1: (OR[NW], (AND[0.5], "change@")
, (AND[0.5], "blood count@")
, (AND[0.5], "thrombocytopenia@")
, (AND[0.5], "agranulocytosis@") )
```

ℰ <sub>#</sub> _Term_	♠ _Parent_	₽ <sub>#</sub> _Role_
blood count	blood count	nlpNounGroup
changes	change	N
<del>- of</del>	of	<del></del>
blood	blood	N
count	count	N
-such as	such as	PPOS
thrombocytopenia	thrombocytopenia	N
-and	and	<del>CONJ</del>
agranulocytosis	agranulocytosis	N



## Confidence Score









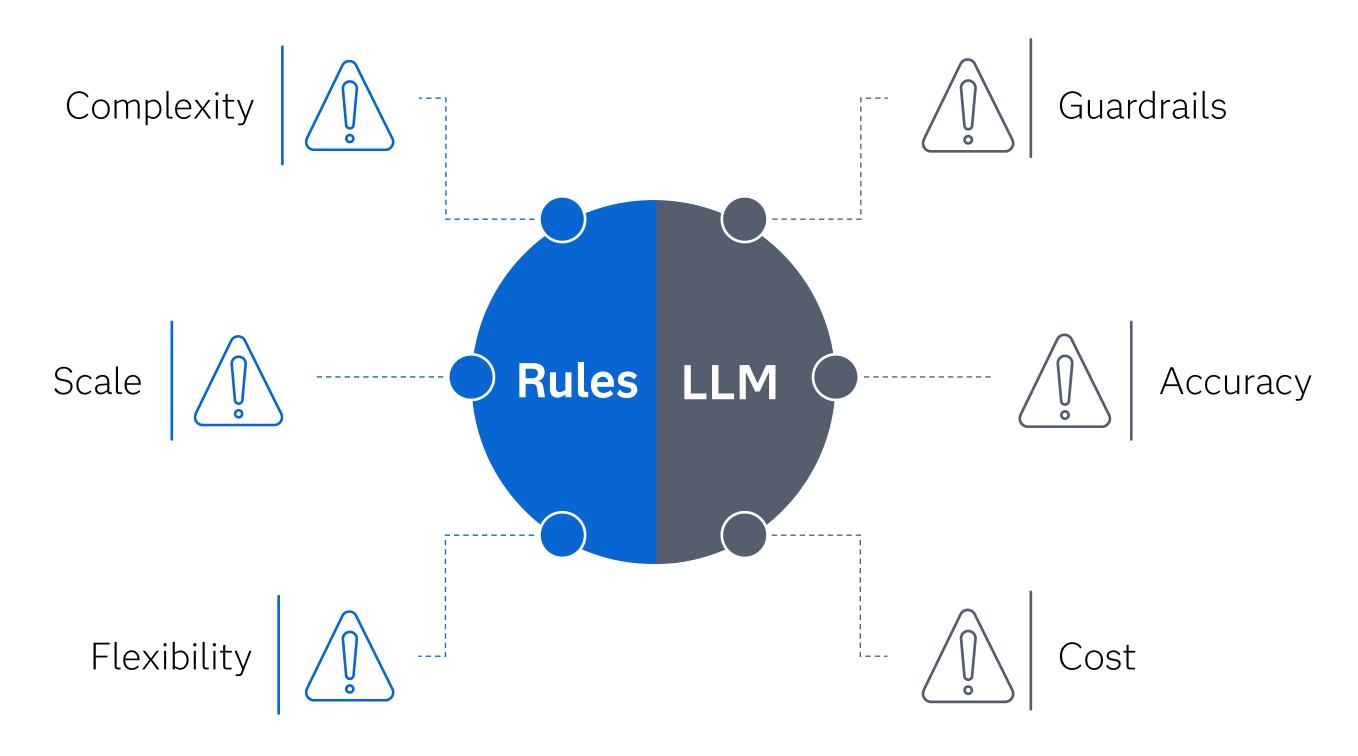
## An Example

#### Source

4.8 Undesirable effects	
Blood and lymphatic system disorders Very rare: Changes of blood count such as thrombocytopenia and agranulocytosis	
Possible extractions	Score
<ul> <li>Changes of blood count such as thrombocytopenia and agranulocytosis</li> <li>(OR[NW],(AND[0.5],"change@"),(AND[0.5],"blood count@"), (AND[0.5],"thrombocytopenia@"), (AND[0.5],"agranulocytosis@"))</li> </ul>	1
<ul> <li>Changes of blood count such as thrombocytopenia, leucopenia and agranulocytosis</li> <li>(OR[NW],(AND[0.5],"change@"),(AND[0.5],"blood count@"), (AND[0.5],"thrombocytopenia@"), (AND[0.5],"leucopenia@"),(AND[0.5],"agranulocytosis@"))</li> </ul>	0.80
c) Changes of blood count such as thrombocytopenia, leucopenia, pancytopenia and	
<ul> <li>agranulocytosis</li> <li>(OR[NW],(AND[0.5],"change@"),(AND[0.5],"blood count@"), (AND[0.5],"thrombocytopenia@"), (AND[0.5],"leucopenia@"),(AND[0.5],"pancytopenia@"), (AND[0.5],"agranulocytosis@"))</li> </ul>	0.66

# Combining the best of both worlds

NLP and LLMs – "better together"





# Summary







## Development of USDM through translation of human-readable protocols

Jasmine Kestemont (Innovion) Stijn Rogiers (argenx)

#### POC approach (Cont'd)

- 1) Usage of LITI rules for contextual information extraction
  - LITI includes concept rule types as well as fact rule types.
  - LITI is proprietary syntax from SAS.
  - LITI = Language Interpretation for Textual Information
- Usage of LLM (RAG-for-LLMs) for contextual information extraction RAG = Retrieval-Augmented Generation
- 3) PDF Table Extractor(s)
- 4) PDF Image Extractor(s)
- 5) Load from SAS tables into Excel and Word in an automated way

while retaining the link i.e. if the info in the SAS table changes, then you can just refresh the \*.xlsx or \*.docx file to see that new info reflected.

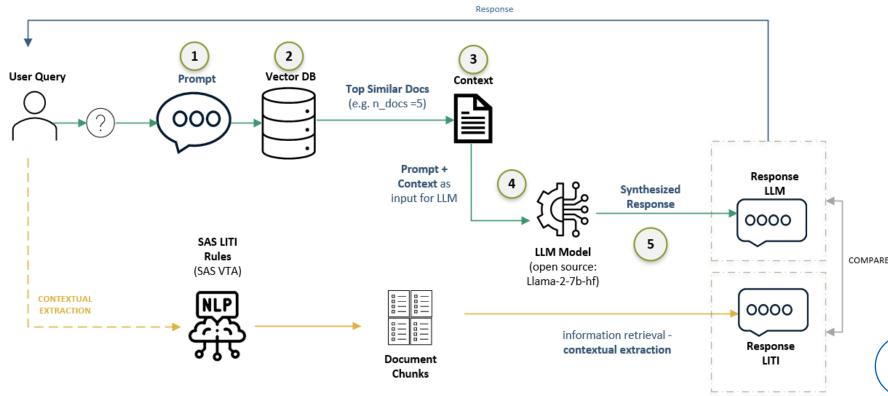


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## (1)

## SAS LITI (NLP) + LLM for contextual extraction





#### Evaluating Gen AI and Text Analytics for creating a USDM

Some initial results after pre processing, highlights the extractions of inclusion and exclusion criteria by LITI rules and LLMs.

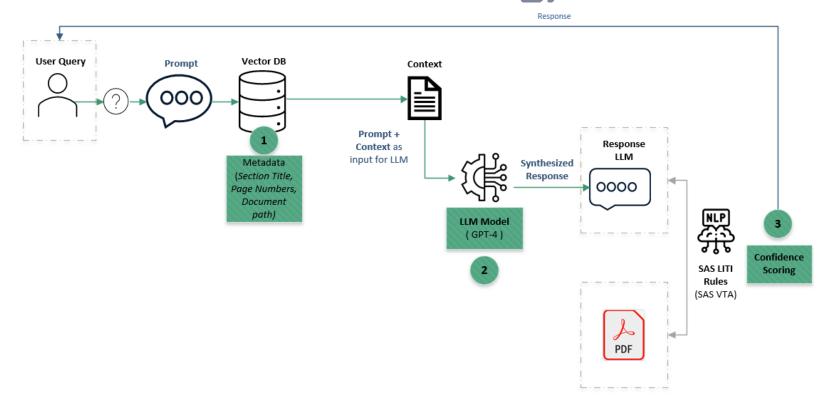
# Legend: perfect > 75 % hit rate between 60 % and 75 % hit rate < 60% hit rate

Select any image to see a larger version.

Mobile users: To view the images, select the "Full" version at the bottom of the page.

		INCLUSION CRITERIA			EXCLUSION CRITERIA		
Documents (clinical trial protocols)	document partitioning ( training / validation / test )	Number	Number Captured With LITI	Number Captured with LLM	Number	Number Captured With LITI	Number Captured with LLM
Protocol - 13 Feb 2020.pdf	TRAINING	15	15	12*	22	22	19
Protocol_22Jul2020.pdf	TEST	7	7	6	20	20	34*
EliLilly_NCT03421379_Diabetes.pdf		10	10	10	26	26	26
Roche_NCT04320615_COVID.pdf		7	7 1	10000000000000000000000000000000000000	12	12	12
CDISC_Pilot_Study.pdf		8	8	8	23	23	23

# 2 LLM (Open AI) + SAS LITI (NLP + Confidence Scoring)





# Comparison of 2 ways for information retrieval / contextual extraction

### LITI – rules (SAS VTA)

- It's "Regular Expressions on steroids".
- Knowledge (and effort) required to write linguistic rules with correct syntax.
- Some patterns are hard to come by (because they are complicated, non-standard, with a lot of variety in the language ...).
- You need some preliminary knowledge on the topic at hand and on what you want to catch!
- Rules are easily overfit (too specific) if n° of training docs is low.
- Library of LITI-rules can / should grow very big to guarantee a high hit rate.
- Results are "proven", non-debatable (there's a clear match in the text).
- Relatively light in terms of resource usage (and cost).
- page breaks and headers and footers are no gift.
- special and non-printable characters pose no problem.

## RAG – LLM (offline model)

- It's generative Al.
- Knowledge required to do proper prompt engineering (designing the user query). But much less effort required. It's just an API-call to a pre-trained model.
- If the context around a particular topic can vary widely from document to document, there is a clear advantage.
- It's generative AI, so some of the info returned can be made up (hallucination).
- Implementing offline models (internalization) and maintaining them is labor-intensive.
- Heavy and intensive in terms of resource usage (even for one or a few documents). Often, several GPUs are needed, and run-time is considerable.
- Scaling (expand the scope) is easier here.
- page breaks and headers and footers are no gift.
- special and non-printable characters pose no problem.





# Benefits of Leveraging Governance Layer

As an example, using Visual Text Analytics as a pre-filter into LLMs and post- quality checks





# Thank you

