Life Cycle of a CREST/RMN Manuscript

Nanette Santoro MD

Department of Ob/Gyn

University of Colorado School of Medicine

CREST/RMN Partnership

- ♦ Started in 2009
- Method for increasing productivity of CREST Scholar graduates and RMN manuscript output
- Secondary analyses of RMN generated data

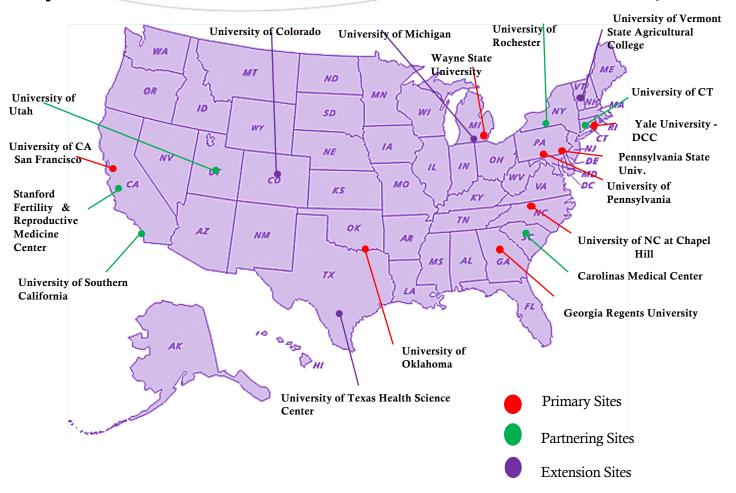
RMN Trials: Prior Funding Period

- ♦ PPCOS II: 1° findings published NEJM
 - Demonstrated increased effectiveness of letrozole over clomiphene in women with PCOS
- ♦ AMIGOS: 1° findings published NEJM
 - Demonstrated decreased effectiveness of letrozole compared to clomiphene and HMG for couples with UI
- ♦ PhOX: findings presented at ESHRE, Lisbon 2015
 - ♦ Advantages of decreased O₂ in cultured human embryos
- ♦ Varicocoelectomy trial: stopped 2/2 slow recruitment

All RMN Trials

- Captured a similar baseline dataset of survey questions and demographics
 - ♦ SF-36, FertiQOL: symptoms and mood
 - ♦ FSFI and IIEF: sexual function
 - Sleep habits: sleep
 - Basic medical, surgical, reproductive, medication histories
 - ♦ Basic demographics, race ethnicity, BMI, insurance status

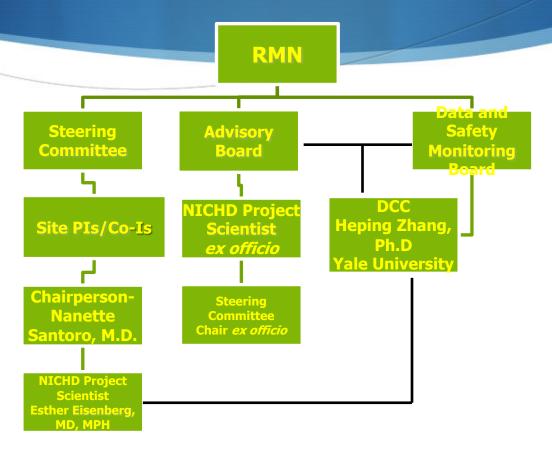
Reproductive Medicine Network Sites 2008-2019



Data Coordinating Center

- Administrative support
- Data management (CRFs, reports, site monitoring)
- Analytical support
- Website development and maintenance
- Protocol development
 - Development of CRFs and recruitment materials
 - Data entry and support
 - Drug acquisition and blinding
 - Quality control
 - Manuscript preparation

RMN Organization



Secondary analyses

- Planned secondary analyses for each survey instrument used
- ♦ Additional secondary analyses proposed in collaboration with CREST Scholars
- Analyses needing new measures done on stored serum, if scientific rationale exists and funding can be found (TSH)
- ♦ Analyses follow a specific plan and pattern

New CONFIRM Consortium

- Completely different grant mechanism
- ♦ Linked R01 grants
- More independent projects
- ♦ Less cross-study standardization

CONFIRM: 3 Main Trials

- ► NatPRO(Val Baker): Pregnancy outcomes in FET cycles with (natural) and without (programmed) a CL (N=788)
- ▶ PREGnant (Hugh Taylor): 60 day elagolix pre treatment of women with endometriosis undergoing IVF (N=816)
- ▶ FRIEND (Ayman Al-Hendy): Green tea extract in women with fibroids (N=36)
 - Endpoints: safety of epigallocatechin gallate (EGCG), active ingredient in green tea
 - Randomized to EGCG + CC, EGCG + LET and EGCG alone, women with and without fibroids

CONFIRM Progress

COVID

Current CREST Scholar Opportunities

- Remainder of RMN concepts
 - Ideas are getting scarce!
 - ACTorNot, ENDOmarkers, PsyFi
- Additional databases
 - SART, SWAN, WHI, others
- New databases
 - More and more data are being held centrally at NIH
 - Visibility of RMN & CREST makes collaboration attractive
- New sample analyses
 - Requires local funds

Start of a Concept Proposal

- ♦ You need an idea
 - Check for possible overlap with existing secondary analysis plans
- You need a partner
 - ▶ RMN PIs are available as collaborators

Prepare a Concept Proposal

- ♦ Format of a CS/AP
 - Rationale, hypothesis, outcomes
 - Approach to analysis: work with RMN and CREST partners (PI collaborator, Janet Sun, Nanette Santoro, Mary Sammel & Heping Zhang)
 - Primary and co-authors
 - ♦ 3-4 pages
 - Can help construct introduction of manuscript

CS/AP (Concept Sheet/Analysis Plan)

- Review for overlap and priority—Nicole Goetz is keeper of CSAPs
- **♦** If RMN:
 - Present to RMN SC (email) for final approval
- If CONFIRM:
 - Will present at CREST calls
 - → >50 approved CS/APs
 - → >30 published or accepted

Presentation of CS/AP

- ♦ Used to be done at RMN meetings, now will be done at CREST calls
 - ♦ Make sure your PI or a representative will be on the call
 - Make sure your key CREST analyst will be on the call (Janet, sometimes Mary)

 - Be prepared for discussion, suggestions, modifications

CREST Manuscript Process After CS/AP Approval

- Manuscript outline and assignments prepared by CREST Scholar with input from Santoro/PI/Writing Group (1st Conference Call)
- ♦ Analysis should be done per Analysis Plan from CS/AP
- Review results of analysis with WG (2nd conference call)
- ◆ Draft manuscript prepared by WG and circulated to all coauthors—should be fairly complete with all Tables, abstract, formatting done
- ♦ Mature manuscript circulated to all co authors, then submitted

Time Frame

- ◆ Approximately 2 proposals at a time can be analyzed by DCC (Janet Sun)
- ♦ Approximately 2-3 months per proposal

RMN-CREST Possibilities

- MOXI: Male Antioxidants and Fertility
- FIT-PLESE: Weight Loss Prior to Fertility
- Psy-Fi: Multiple Pregnancies in ART
- ♦ ACTorNOT: treatment options for PUL
- PrISICE: fresh vs cryopreserved embryo transfer
- Similar potential secondary analysis options
- ♦ Ability to pool across multiple studies: meta-analysis

Other Databases

- ♦ Study of Women's Health Across the Nation (SWAN; N=3302)
- ♦ Women's Health Initiative (WHI; N=27,347 to 100,000)
- **♦** KEEPS (N=738)
- ♦ FASTT (N=503)
- ♦ FORT-T (N=450)
- **♦** ISIS (N=1150)

Using Other Databases

- Discuss at CREST call or in person meeting; assess overall feasibility
- Assure there is no overlap
- Work with MS to develop 'answerable question'
- ♦ Apply for needed database (DASH/other)

Using DASH

- NICHD Data and Specimen Hub:
 - Log into DASH and create a password
 - Register as a SUBSITE under the University of Colorado
 - ♦ 2 years of access, with annual reporting requested
 - Data Use Agreement for 3 years