

# **Implementing GeNomics In practicE II (IGNITE II): Pragmatic Clinical Trials**

**Pre-Application Informational  
Webinar**

# IGNITE Goals

- Conduct pragmatic clinical trials to measure the clinical utility and cost-effectiveness of genomic medicine interventions
- Assess approaches for real-world application of genomic medicine in diverse clinical settings
- Produce generalizable knowledge on the types of genomic medicine interventions requiring randomized clinical trials and effective methods for conducting them

# IGNITE II Components

- 4-6 multi-site Clinical Groups (CGs) and Enhanced Diversity Clinical Groups (EDCGs)
- Coordinating Center
- 2-4 pragmatic clinical trials of genomic medicine interventions

# Proposed Pragmatic Clinical Trial

## Protocols

### ■ Should:

- Be adaptable to wide range of settings, including resource-limited sites
- Propose an intervention with preliminary evidence of improved health outcomes and cost effectiveness
- Be able to be expanded network-wide
- Be relevant to racial/ethnic minority participants and resource-limited sites
- Address conditions of high public health impact
- Be feasible to enroll patients within 12 months of initiation of the trial
- Have the power to detect clinically meaningful differences within 12 months of randomization

Trials evaluating tumor sequencing will be considered non-responsive

Also, trials evaluating germline cancer susceptibility as a major component will be considered a low priority for NHGRI funding

**Applicants are strongly encouraged to contact NHGRI to discuss their proposed trial and patient population well in advance of the submission date**

# IGNITE II – CG RFA

- **Demonstrated ability to implement agreed upon genomic medicine protocols and potential ELSI research study**
- **Evidence of institutional support and success in participant recruitment and retention**
- **Genomic testing in a CLIA-certified environment**
- **Plan for integrating genomic results and harmonizing CDS into patients' EHRs**
- **Ability to enroll at least 3,000 patients**
- **At least 50% of patients should be recruited from diverse clinical settings**
- **At least 35% of patients from racial and ethnic minority populations**

# IGNITE II – EDCG RFA

- Demonstrated ability to implement agreed upon genomic medicine protocols and potential ELSI research study
- Evidence of institutional support and success in participant recruitment and retention
- Genomic testing in a CLIA-certified environment
- Plan for integrating genomic results and harmonizing CDS into patients' EHRs
- Ability to enroll at least 3,000 patients
- At least 50% of patients should be recruited from diverse clinical settings
- **At least 75% of patients from racial and ethnic minority populations**

# Patient Enrollment RFA-HG-17-008

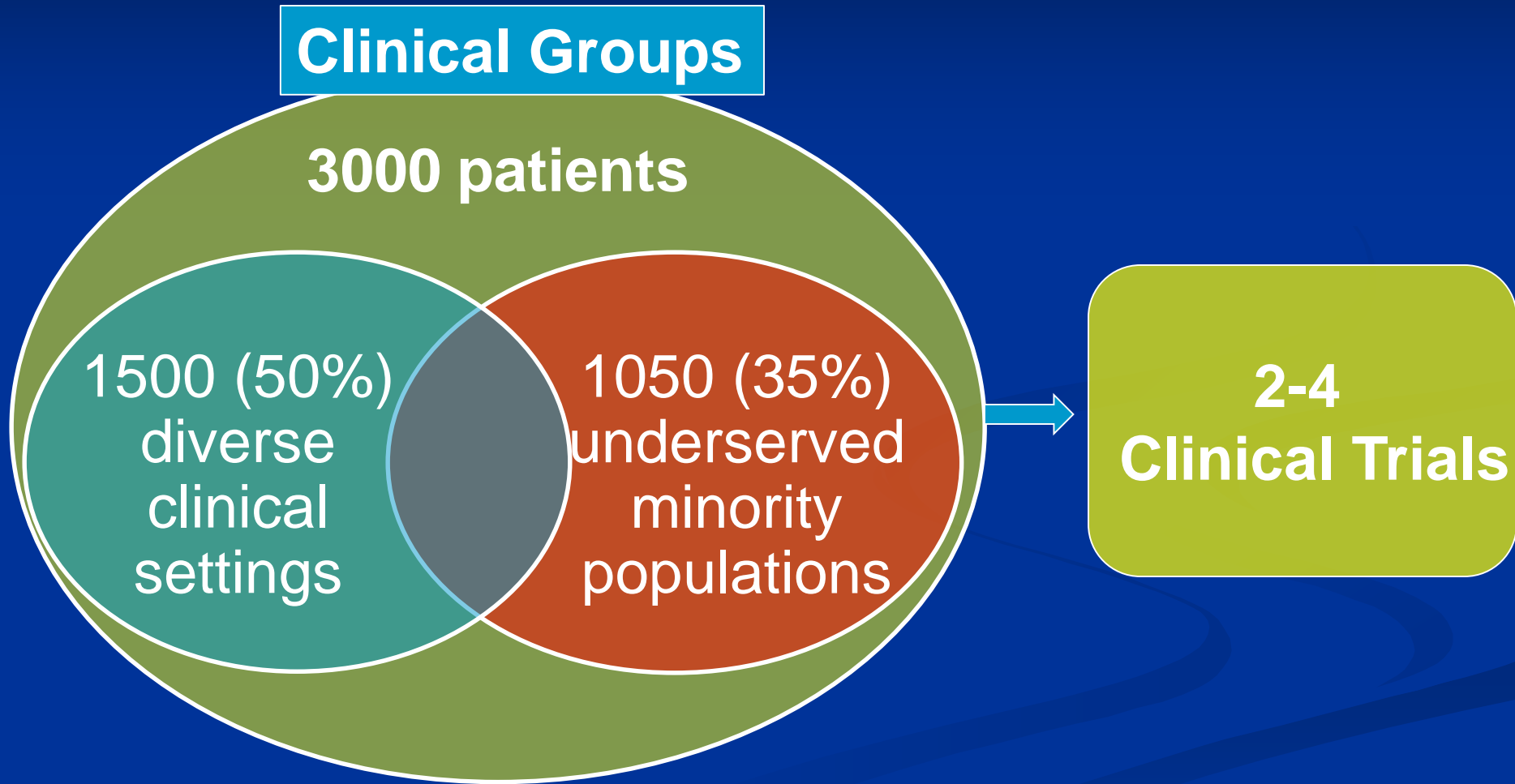
## Clinical Groups

3000 patients

1500 (50%)  
diverse  
clinical  
settings

1050 (35%)  
underserved  
minority  
populations

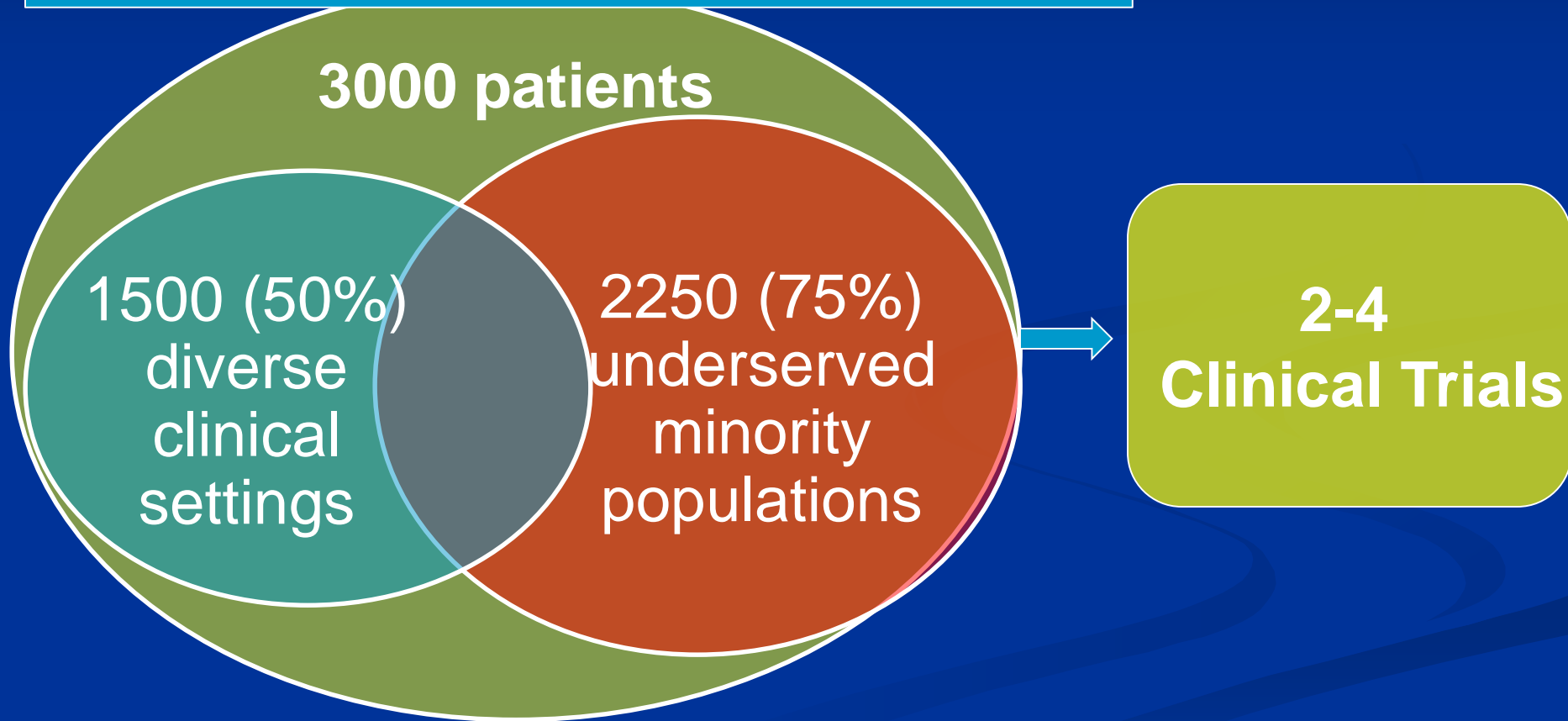
2-4  
Clinical Trials



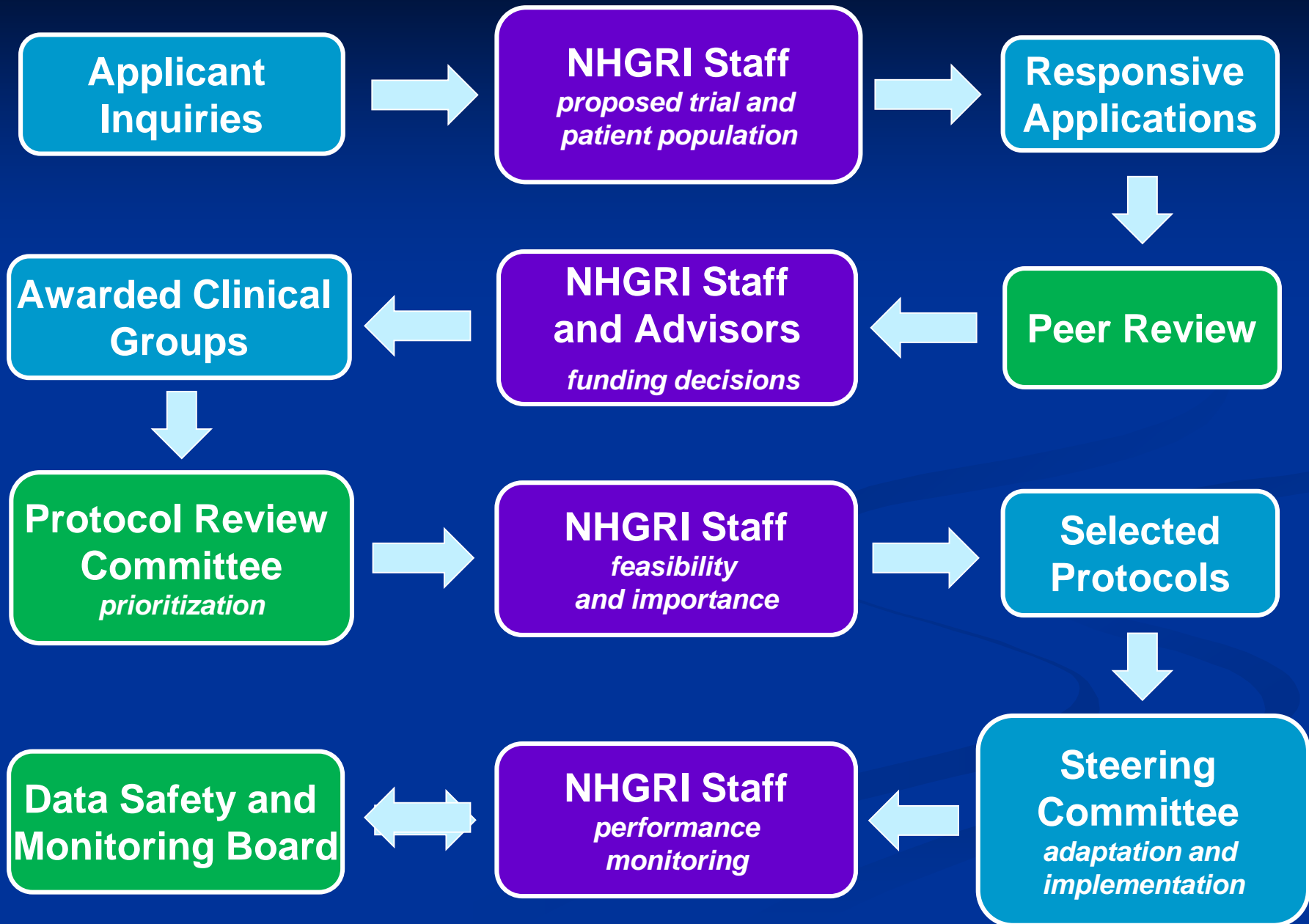


# Patient Enrollment RFA-HG-17-009

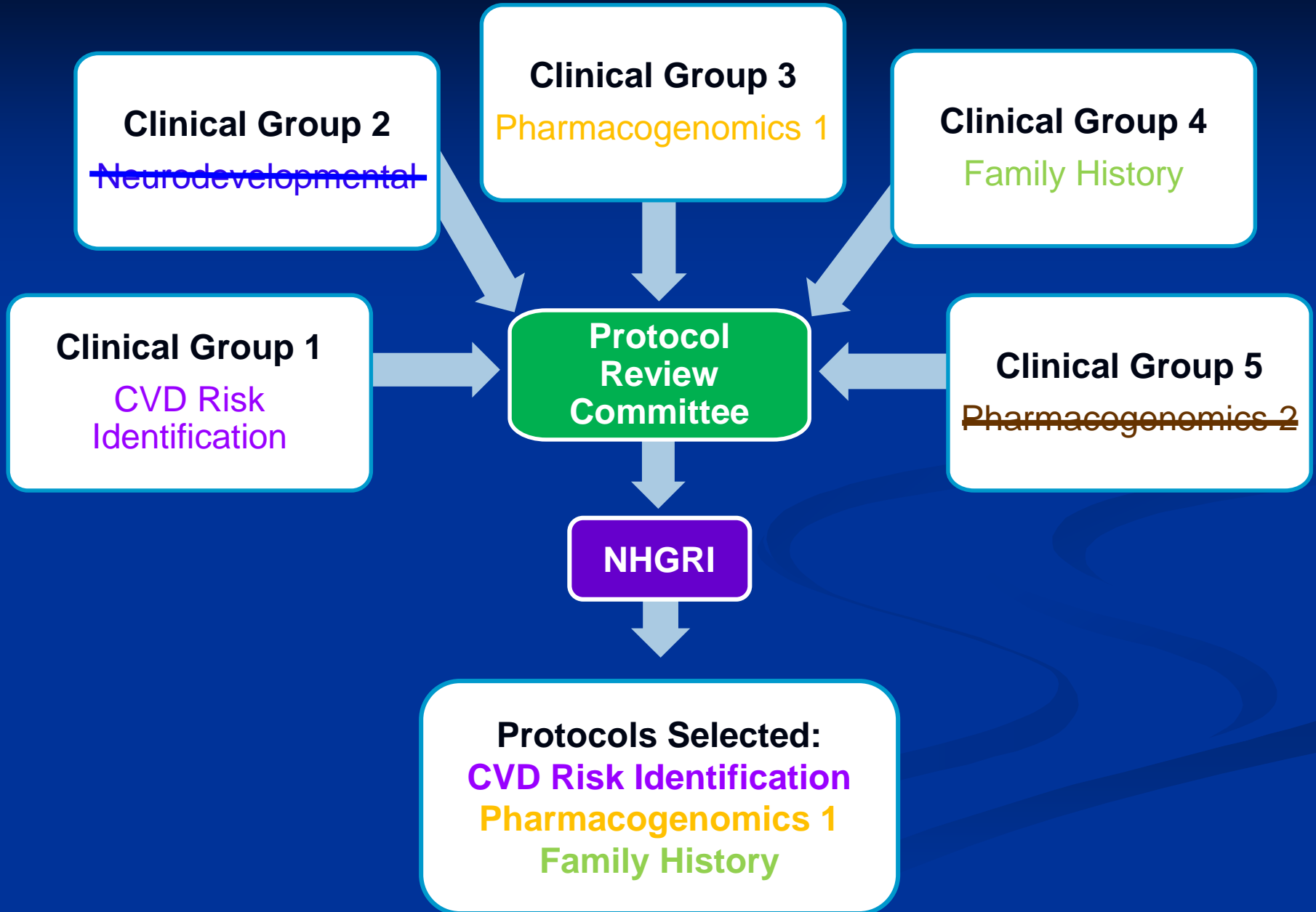
## Enhanced Diversity Clinical Groups



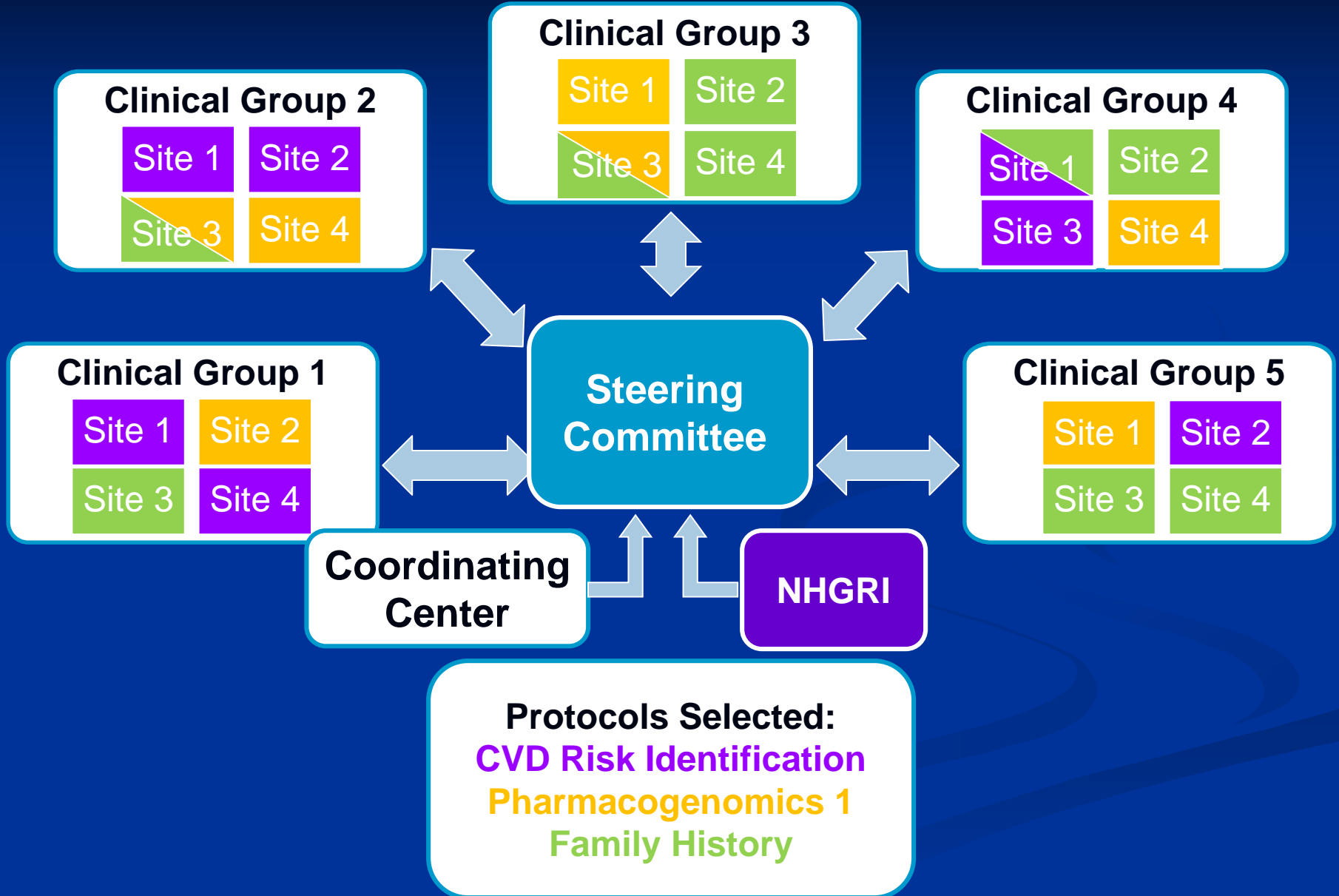
# Protocol Selection and Monitoring



# Protocol Prioritization



# Protocol Adaptation



# ELSI Research

- IGNITE II may include a single ELSI research study implemented across all funded IGNITE clinical groups
- The ELSI research study will be funded separately through a supplement
- The ELSI research study will be collaboratively developed by the CGs after award and should **not** be proposed in the current application
- Applicants should describe strengths of their research team, including experience conducting ELSI research
- The CC will facilitate the ELSI study

# Coordinating Center

- Participate in the planning and development of the network infrastructure and committee structure
- Participate in adaptation of protocols
- Develop manual of operations and reporting forms
- Receive and disseminate recruitment and other monitoring reports
- Receive data from CG sites for data analysis
- Lead network-wide protocol adaptation, execution, and analyses, development and statistical modeling, and final analysis of primary and secondary network-wide clinical trial outcomes in collaboration with the CGs
- Help in preparation and writing of reports and manuscripts for publication

# Open Competition

- IGNITE I grantees should describe their performance and collaboration in the IGNITE I Network as well as experience and capabilities in pragmatic clinical trials
- New applicants to IGNITE should describe experience and capabilities in working in multi-site research networks, genomic medicine implementation, and pragmatic clinical trials

# IGNITE II Timeline

- If you haven't already done so – Contact us to discuss your proposed trial and patient population
- October 3<sup>rd</sup> – Letter of Intent due date
- November 3<sup>rd</sup> – Application due date
- February/March 2018 – Scientific Merit Review
- May 2018 – Advisory Council Review
- Mid-to-late summer 2018 – IGNITE II grants funded



# Overview of Budget

# Questions

# Frequently Asked Questions

<https://www.genome.gov/27569241/>

# Questions about the Peer Review Process

# Additional Questions