About REDDIE



Real-world evidence for decisions in diabetes.

Randomised controlled trials (RCT) are the cornerstone of evidence-based medicine. However, the digitisation of real-world data (RWD) provides opportunities to demonstrate efficacy and safety of innovative technologies, including drugs, devices, diagnostics, and digital health.

These data are particularly relevant to long-term conditions such as diabetes mellitus, where drugs, lifestyle interventions, and digital technologies often work together.

Use of randomised controlled trials (RCT)

Collected data are limited in size

Recruiting of patients with specific characteristics



Use of real-world data (RWD)

Data referring to the general population

Better characterisation of people with conditions





- REDDIE will use data from four large national registries (Sweden, Denmark, Germany and England), including data from devices, wearables, and electronic health records.
- REDDIE will use this RWD to elucidate the gap between outcomes in RCTs and **RWD** studies
- Together with regulatory and Health technology assessment (HTA) authorities and patient organisations
- REDDIE will develop and validate state-of-the art modelling techniques using synthetic data to better assess outcomes of interventions using RWD

REDDIE Concept

Generate standards for RWD use for the evaluation of medicines and other interventions by regulatory authorities and HTA bodies.



Resulting in better care for people living with diabetes



THE PROCESS



Define a research question addressed in an RCT that needs to be extended with RWD



Identify homogeneous groups of people treated in the same way



Develop techniques to harmonise the available RWD and to generate synthetic data



Test the research question on the RWD or synthetic data, which constitute a much bigger cohort than the one available in RCTs



Get much faster answers to the research question



Obtain new standards for conductina "virtual trials" that can supplement and support RCTs



DATA COMPARISON

Randomised controlled trial (RCT) data

Obtained in tightly controlled settings

Descriptive of highly selected populations

Time- and resource-intensive

Subject to regulatory approval

Real-world data (RWD)

Gathered from a variety of sources (e.g., hospital data, medical devices)

Referring to wider, more inclusive populations

Expensive to gather and maintain, but less than RCTs

Their non-primary use can raise privacy concerns

Synthetic data

Artificially generated through algorithms

Resembling behaviours observed in real populations

Inexpensive to produce and store

Compliant with data protection regulations

Effective use of all three data types can improve the efficiency of clinical research.

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