

PARASOL

*PROTEINURIA AND GFR
AS CLINICAL TRIAL ENDPOINTS
IN FOCAL SEGMENTAL
GLOMERULOSCLEROSIS*

October 2024
Scientific Workshop

BETHESDA, MARYLAND | OCTOBER 7-8, 2024
BETHESDA MARRIOTT, 5151 POOKS HILL RD, BETHESDA, MD
CONGRESSIONAL BALLROOM

Welcome to the scientific workshop for PARASOL, and thank you for participating in this important project.

Please note: This meeting will be recorded to facilitate planning and internal reference within the workgroup. The recording will not be shared publicly. By participating in the meeting, you consent to being recorded.

**Complimentary WIFI:
MarriottBonvoy_Conference
PW: Parasol2024**

Background

The FDA and NephCure, the International Society of Glomerular Disease (ISGD), the Kidney Health Initiative (KHI), and the National Kidney Foundation (NKF) have expressed a willingness to leverage their combined strengths for the joint development of the substantive actions of this workshop to facilitate the development of safe and effective treatments for focal segmental glomerulosclerosis (FSGS).

FSGS is an important cause of kidney failure for which there are no FDA-approved therapies. Because of the time course for disease progression, rarity, and heterogeneity of FSGS, endpoints such as kidney failure are generally not feasible in clinical trials of FSGS. In 2019, KHI, a public-private partnership between the American Society of Nephrology and the FDA, initiated a project to identify endpoints that could be used to establish the efficacy of treatments for FSGS. The workgroup concluded that the available data support the use of complete remission of proteinuria in patients with heavy proteinuria as a surrogate endpoint for progression to kidney failure in clinical trials of FSGS. In addition, the workgroup concluded that substantial treatment effects on proteinuria short of a complete remission may also predict the effect of a treatment on progression to kidney failure; however, further work is needed to determine how such an endpoint should be defined. Specifically, to support the use of proteinuria as a reasonably likely surrogate endpoint, a better understanding of the quantitative relationship between changes in proteinuria and progression to kidney failure is needed.

The aforementioned project focused on information available in the published literature. To advance the understanding and use of proteinuria and eGFR-based endpoints as surrogate endpoints for accelerated and traditional approval in FSGS, NephCure, ISGD, KHI and NKF are facilitating new analyses of existing data from randomized controlled trials, observational studies, and registries.

The results of these analyses will be discussed at a scientific workshop, co-sponsored by the parties listed above. The statistical findings and report on the deliberations from the workshop will be made public by one or more publications in professional journals.

Goals and Objectives:

The goal of this scientific workshop is to advance the use of proteinuria and eGFR-based endpoints as surrogate endpoints for accelerated and traditional approval of new treatments for FSGS. The workshop will be used to discuss the results of the aforementioned analyses and engage in a data-driven discussion with the larger community about the use of these endpoints as surrogate endpoints for the approval of treatments for FSGS.

Agenda

Monday, October 7

TIME	ACTIVITY	LOCATION
12:00 PM	Lunch	Senate Suites
1:00 PM–3:00 PM	<p>Proteinuria and GFR as Clinical Trial Endpoints in FSGS</p> <ul style="list-style-type: none"> 1:00 Why PARASOL? Background and Unmet Need – <i>Laura Mariani and Josh Tarnoff</i> 1:15 Patient Panel 1:45 Break 2:00 Regulatory Perspective: Endpoints in FSGS – <i>Aliza Thompson</i> 2:20 Data Sources and Statistical Analysis Methods – <i>Margaret Helmuth</i> 2:40 Break (with refreshments) 	
3:00 PM–7:00 PM	<p>Applications</p> <ul style="list-style-type: none"> 3:00 Summary of findings from Reykjavik – <i>Abigail Smith</i> <ul style="list-style-type: none"> eGFR Findings – <i>Ulysses Diva</i> 3:45 Biological Plausibility – <i>Tobias Huber</i> 4:30 Break 4:45 Results: Modeling Proteinuria <ul style="list-style-type: none"> Overall – <i>Abigail Smith</i> Proposed Endpoints 5:15 Validation from the UK RaDaR Registry – <i>Moin Saleem, Danny Gale</i> 5:30 Q&A on analysis – <i>Margaret Helmuth, Abigail Smith, Alex Mercer, David Pitcher, Ulysses Diva, Jialu Zhang, Dali Zhou, William Koh</i> 	
7:00 PM	Dinner	Senate Suites

Tuesday, October 8

TIME	ACTIVITY	LOCATION
7:00AM	Breakfast	Congressional Ballroom
Time TBD	<p>EMA commentary</p> <p><i>Frank Holtkamp, Karin Janssen Van Doorn, Thorsten Vetter</i></p>	
8:00 AM–12:00 PM	<p>Planning for the Future</p> <ul style="list-style-type: none"> 8:00 Using PARASOL Findings to Inform Clinical Trial Planning: Options and Pathways – <i>Alex Mercer, Ulysses Diva, Aliza Thompson, Rekha Kambhampati</i> 9:00 Panel – Nephrology Community Feedback (<i>Moderated by Barbara Gillespie</i>) <i>Sayna Norouzi, Keisha Gibson, Brad Rovin, Gaia Coppock, Shikha Wadhvani</i> 10:00 Commentary: <i>Aliza Thompson</i> 10:15 Break (with refreshments; hotel check-out) 11:00 What's Next? – <i>Howard Trachtman, Matthias Kretzler and Laurel Damashek</i> 	
12:00 PM	Lunch/Close	

SPONSORS



