

FDA U.S. FOOD & DRUG ADMINISTRATION

## Swati Kulkarni, Lan Huang, Jyoti Zalkikar

## Introduction

FDA's enterprise-wide ecosystem, FiDL, is built on a modern architecture in the AWS Gov cloud high. This highly secure ecosystem unites data, tools and artificial intelligence across agency with the on-demand scalability of cloud computing. The ecosystem technology platform is focused on providing business value and accomplishing data driven goals (e.g., providing shared enterprise-wide experience for accessing data along with methods/ algorithms that cross center domains). It is built for diverse users - expert data scientists, biostatisticians, data engineers, and machine learning (ML) specialists.

## LRT Tool based on R-Library

The IxJ Safety Data-Matrix from FAERS Database: The foundation for the derivation of LRT method.

For a fixed drug, j: n(ij)~Poisson(n(i.)×pi)  $[[n(.j)-n(ij)]] \sim$  $Poisson(([n(..)-n(i.)]\times qi))$ 

	Diugs					
	1		j		J	
1	n <sub>11</sub>		n <sub>1j</sub>		n <sub>1j</sub>	
2	n <sub>21</sub>				n <sub>2J</sub>	
i.			n <sub>ij</sub>		n <sub>ij</sub>	
I	n <sub>11</sub>		n <sub>ij</sub>		n <sub>ij</sub>	
Col. total	n <sub>.1</sub>		nj		n <sub>J</sub>	

H0: pi=qi=p0 for all I; *Ha*: vi > ai for at least 1  $i \in I$ Drug Other drugs

	Drag,	-	
AEi	n <sub>ij</sub>	Δ1	n <sub>i</sub> .
Other AEs	∆2	Δ3	∆4
I	<u>n.<sub>j</sub></u>	∆5	n

LRT Statistic is max of logLR over i :  $\log LR1 = nij * \log(nij/ni.) + (\Delta 2) * \log((\Delta 2)/(\Delta 4))$ logLR2=n.j\*log(n.j/n..) logLR=logLR1-logLR2 - A function of cell counts and marginal totals

A signal is a disproportionally high reporting frequency (some drug or AE) To detect a signal is to reject the null hypothesis H0 at

least once (some drug or AE)

For use of this LRT methodology R-Library is available at www.routledge.com/9780367201432. LRT tool currently available in openFDA for analyzing the large post market safety data for drugs (FAERS) could be made available through the FiDL ecosystem for enterprise-wide usage with current and diverse data sets.

The LRT tool usage at the agency level will benefit FDA by providing dynamic interfaces and functions for further data analysis, output, and display while maintaining its unique features of **high precision and control over** overall false positive signals.



## FDA's Enterprise-wide Ecosystem FiDL: **A Potential Use Case utilizing LRT R-Library**

## In this potential use case of FiDL ecosystem,

- We create a common tools repository to gain synergies in costs and reduce proliferation of tools.
- As part of this toolset, we provide capabilities to support advanced data science and augment analytical needs through visualization tools like Tableau, Business Objects, Qlik, enterprise-grade professional software for data science and scientific research like RStudio and LRT R-library in the biostatistics book named Signal Detection for Medical Scientists: Likelihood Ratio Test-based Methodology.

## **Potential Use Case: Problem**

Biostatisticians, Data scientist and clinicians are working on signal detection from drugs as well as devices and have different programing language skills. Integrating their work needs exceptional amount of data transfer between systems through legacy data transfer mechanisms. They need a single (i) Data Ingestion, (ii) Data Aggregation, (iii) Analytics through LRT methodology and (iv) Output through Visualization tools. The existing process is on-prem servers and commodity hardware and found to be time-consuming and not scalable.

### **Challenges:**

- 1.Inability to access and analyze refreshed datasets on demand
- 2. Inability to efficiently share common data sets across scientists
- 3.Manual and time intensive data extraction from multiple internal/external systems
- 4.Time consuming and process-intensive data cleansing and transformation for scientists

## **Potential Use Case: Methods & Results**

### Methods:

- . Creation of workspace in AWS Gov Cloud high with scalable compute and storage for biostatisticians
- 2. Automated data migration services and orchestration
- 3. On-demand data refresh process from FAERS and MDR databases
- 4. Custom scripts for data cleansing and transformation **Results**:
- Common data-store solves the manual data integration by biostatisticians
- 2. Fast and automated (scheduled) extraction replaces the manual data loads results in saving time
- 3. The data is current (on demand) and avoids multiple versioning of data sets
- 4. Auto data cleansing jobs that can load data into scalable cloud storage

## **Office of Information Management and Technology (OIMT) Center of Devices and Radiological Health (CDRH)**



FAERS and/or MDR databases (b) Significant improvement in processing power deployment lifecycle

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The information in this poster is not a formal dissemination of information by FDA and does not represent agency position or policy.

**Center of Drug Evaluation and Research (CDER)** 

- (c) improvement in LRT development, testing, validating and

## Acknowledgment

## References

R. Tiwari., J. Zalkikar, and L. Huang. *Signal Detection for Medical* Scientists: Likelihood Ratio Test-based Methodology. Chapman and Hall/

## Disclaimer