

Review of Nevins and Potti genomic predictor model - IRB report 1-7-10-redacted
From: John M Harrelson [harre004@mc.duke.edu]
Sent: Thursday, January 07, 2010 9:57 AM
To: Abrams, Jeff (NIH/NCI) [E]
Cc: McShane, Lisa (NIH/NCI) [E]; kornb001@mc.duke.edu
Subject: Review of Nevis and Potti genomic predictor model

Attachments: Review of Genomic Predictors from Duke.pdf
Dr. Abrams,

I would like to thank you for your assistance in identifying reviewers to address the questions raised in the Baggerly and Coombes article. We have completed the following inquiries into this matter.

- 1) Voluntary suspension of enrollment has been maintained on the three studies involved.
- 2) Regarding the safety of subjects already enrolled in these trials, the IRB obtained the opinions of three external cancer center directors as to the advisability of allowing these subjects to remain on study. All agreed that subjects already on study should continue to receive treatment.
- 3) An independent outside data safety monitoring board that oversees each of these studies reviewed all current data and reported to the IRB that they found no safety issues.
- 4) Similarly, the Duke Cancer Center Protocol review committee reviewed all three studies and reported no issues regarding subject safety or conduct of the studies.
- 5) Finally, an independent review of the science underlying the trials was conducted by names redacted to protect confidentiality, a copy of which is attached. They were charged with addressing the issues raised by Baggerly and Coombes in their Annals of Applied Statistics manuscript as well as an assessment of the performance of the genomic methodologies that are used in these trials. They were provided with a detailed response by Drs. Nevins and Potti to the issues raised in the Baggerly paper as well as a detailed description of the methodologies used in the genomic analyses. On the first issue of response to the questions raised in the Baggerly paper, the reviewers conclude that, with a few additions, the response of Nevins and Potti fully addressed the issues raised by Baggerly and Coombes. On the second issue of performance of the genomic methodology, they state that they were able to show with an independent analysis that the approaches used in the Duke clinical predictors are viable and likely to succeed. They go on to state that "we have found nothing that indicates that the predictions in the trial would be completely one-sided or reversed as suggested by Baggerly and Coombes."

Based on this review process, we believe that the trials are safe for patients, the scientific basis for these studies is valid and we have every reason to hope that important results will be obtained. In light of these reviews, we are initiating processes to re-open enrollment in the involved trials.

Thanks again for your help.

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