



SHAPING THE FUTURE OF ARTHRITIS CARE

OBRI ANNUAL REPORT 2020



OBRI

ONTARIO
BEST PRACTICES
RESEARCH INITIATIVE

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MESSAGE FROM OUR PRINCIPAL INVESTIGATOR



The Ontario Best Practices Research Initiative (OBRI) pilot began in 2005. Through the collaborative efforts of physicians, payers, researchers and patients, the Ontario cohort has grown to include over 3900 patients and 72 rheumatologists (both community and academic). The OBRI focuses on the safety and effectiveness of treatments for patients living with Rheumatoid Arthritis (RA).

OBRI's unique platform integrates clinical data from rheumatologists, patient-reported data from participants, and administrative data from the Institute for Clinical Evaluative Sciences (ICES) to monitor comparative drug safety and effectiveness and patient quality of care. This platform has prepared OBRI for the Real World Data (RWD) and "big data" trends in Canada today. These approaches to data, which combine information collected across multiple registries, are being adopted by government, payers and researchers. With our years of experience, the OBRI team is well prepared to collaborate with these RWD stakeholders.

2020 presented unprecedented challenges to OBRI and the world. The COVID-19 pandemic forced us to change our daily practices and to become innovative in our personal and professional lives. For many, life became virtual – from medical appointments, meetings and congresses, to grocery shopping. The OBRI team was fortunate to be able to continue working uninterrupted with the technology provided by the University Health Network and the year has been a productive one: we hosted our first virtual annual conference which had a record number of attendees; hosted the first Psoriatic Arthritis investigator meeting; attended national and international virtual meetings; had 3 articles accepted for publication; and updated the interviewer questionnaires to collect important and timely data on COVID-19 and vaccinations. Visit our website at www.obri.ca to access our publications and learn more about OBRI.

We are pleased to share this overview of our activities in 2020 and we look forward to 2021.

A handwritten signature in black ink, appearing to read "C Bombardier".

Dr. Claire Bombardier, OBRI Principal Investigator

ABOUT OBRI

Who We Are

The Ontario Best Practices Research Initiative (OBRI) is a clinical cohort that follows patients in routine care along their clinical path. It is a collaborative data platform involving rheumatologists, researchers, and patients. Originally created as the Ontario Biologics Research Initiative, it was officially renamed in 2013 to reflect the expansion of the organization's goals beyond the scope of biologic treatments.

Our Mission & Mandate

To improve the care and health outcomes for Rheumatoid Arthritis (RA) and Psoriatic Arthritis (PsA) patients by gathering and analyzing long-term information on therapies, clinical practice patterns, and health care utilization in the real world. Our goals are to:

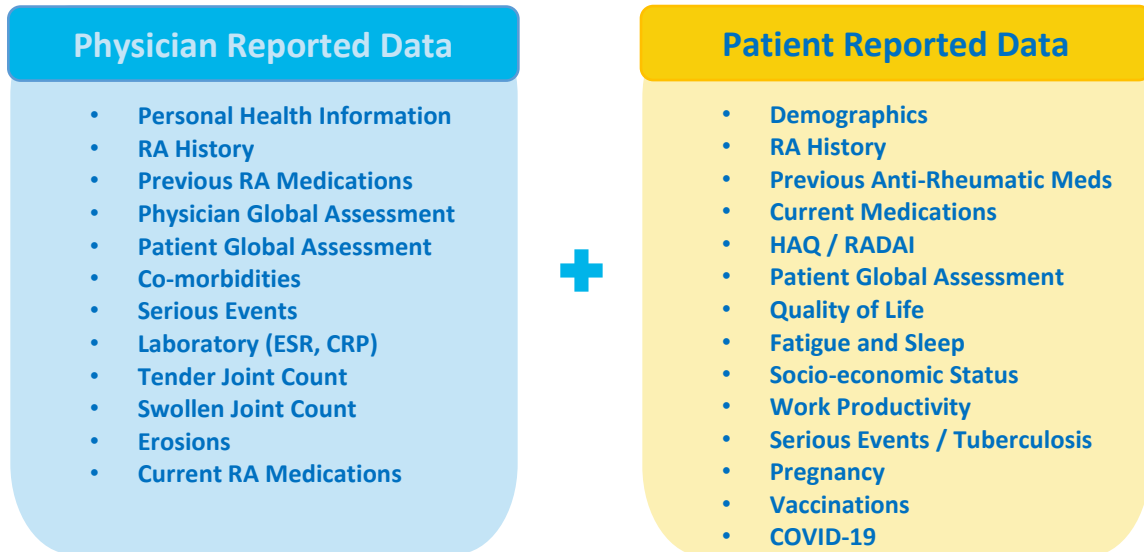
- Define safety, effectiveness, and sustainability of available RA and PsA therapies in the real world
- Identify clinical practice patterns that improve patient health outcomes
- Use real world clinical data to inform health care decisions

The OBRI generates outcome data specifically related to pharmacotherapy, clinical outcomes, practice patterns and population health. The OBRI team also provides leadership in best practices for ethics and obtaining consent, data management, real world data analysis, and administrative database validations.

Our Value Proposition

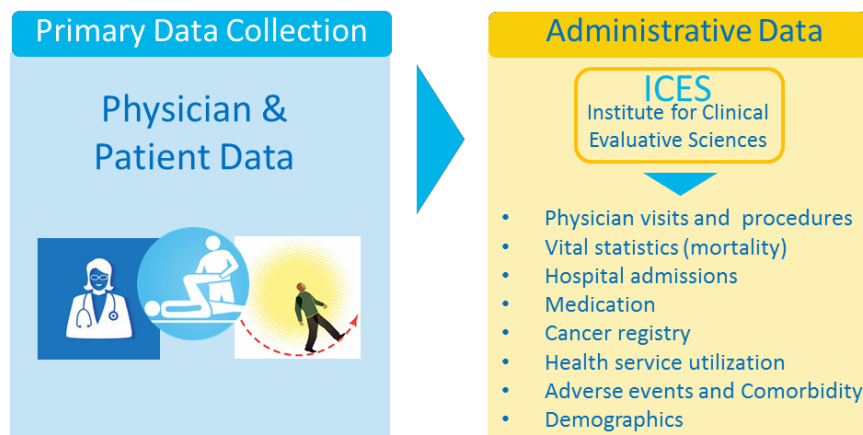
The OBRI has evolved into a powerful decision-making tool that is used to shape and inform the future of arthritis care. This rich source of comparative data combines real-world outcomes with administrative data. It is vetted through scientific rigor and the active involvement of a clinical advisory committee so that it may be used by policy makers to influence health care and clinical treatments decisions.

What's in Our Data?



Our Data Linkages

The OBRI clinical data is linked to the provincial administrative databases held by the Institute for Clinical Evaluative Sciences (ICES).



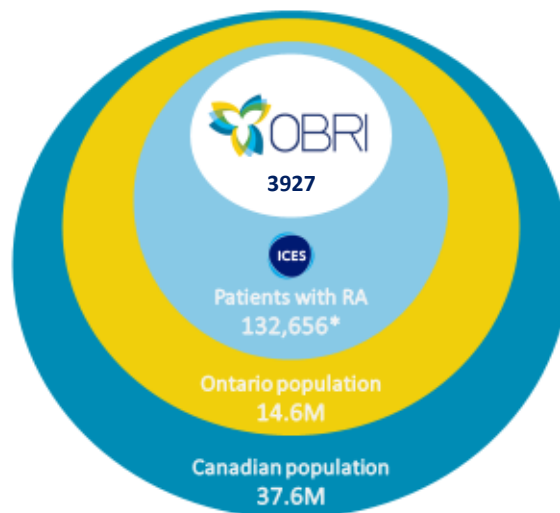
Our Research Pillars

Technology and evidence informed guidelines are being used to examine clinical outcomes, quality of care, and practice patterns leading to health system innovations through initiatives addressing models of care, epidemiology, and health economics.

Pharmacotherapy	Clinical Outcomes and Practice Patterns	Population Health	Collaborations with RA Registries
<ul style="list-style-type: none"> Safety Efficacy Sustainability 	<ul style="list-style-type: none"> Clinical Measures and Outcomes Practice Guidelines Quality Indicators Models of Care 	<ul style="list-style-type: none"> Epidemiology Health Economics and Cost Effectiveness Equity and Access 	<ul style="list-style-type: none"> Rhumadata Cohort of Canadian RA Registries

Representative RA Sample

The population of Ontario comprises approximately 40% of the Canadian population. The 2017/2018 Ontario administrative data identified 132,656 RA patients. Linking the OBRI clinical data to the ICES datasets will provide a unique opportunity to answer many research questions.



*ICES 2017-2018

OBRI Physician visits = 46,570

OBRI Patient interviews = 47,118

Key Findings for 2020

OBRI's research priorities include the examination of **Drug Impact and Outcomes** (effectiveness, safety, adherence persistence/survival); **Clinical Management and Practice Patterns vs. Guidelines** (clinical measures, quality indicators, practice guidelines), and **Population Health** (epidemiology, models of care, economics). We are pleased to highlight our research publications from 2020.

Is the time to remission as defined by swollen joint count similar to the time to remission as defined by patient reported outcomes in rheumatoid arthritis (RA)?

The goal of RA therapies is to help patients attain remission/low disease activity as quickly as possible and to maintain this state as long as possible. To ascertain the disease status of patients, rheumatologists use measures of disease activity such as tender joint count, swollen joint count, and patient and physician global assessment of disease activity. This study examined the lag of patient-reported outcomes (PROs) after patients attain remission as measured by the clinical disease activity index (CDAI) or the swollen joint count

Time to achieve low disease state or remission based on PROs was considerably longer compared with swollen joint count. Of note, time to achieving low disease state and remission was generally significantly shorter in patients with early RA compared with established RA patients, with the exception of fatigue. Treating to a composite target in RA could lead to inappropriate changes in DMARDs.¹

Is there a difference to time of discontinuation of biologic therapy depending on the mechanism of action (TNFi vs non-TNFi)?

Time to discontinuation of biologic therapy may be related to mechanism of action. We compared the discontinuation rate of tumor necrosis factor inhibitors (TNFi) versus non-TNFi in the OBRI cohort. Reasons for discontinuation included lack/loss of response, adverse events (AEs), and physician or patient decision. A total of 932 patients were included in the analysis of whom 174 (18.7%) received non-TNFi and 758 (81.3%) received TNFi.

We found that discontinuation of therapy is similar in patients started on TNFi and non-TNFi therapies. There was also no significant difference in stopping due to lack/loss of response or AEs, suggesting that these reasons should not drive the selection of one treatment over another. The results were similar for both biologic naïve patients and patients with a history of 1 or more biologic.²

What are the changes, if any, in the market share of biologic and targeted synthetic disease-modifying anti-rheumatic drugs for treatment of rheumatoid arthritis since 2008?

For patients with Rheumatoid Arthritis (RA) who do not achieve adequate clinical response with combined conventional synthetic disease modifying anti-rheumatic drugs (csDMARDs), initiation of advanced therapies such as biologic DMARDs (bDMARDs) or targeted synthetic DMARDs (tsDMARDs) is recommended. Tumour necrosis factor inhibitors (TNFi) are the oldest, and most commonly used subgroup of advanced therapies. In the last decade, new non-TNFi advanced therapy options have become available.

This descriptive analysis of data from the OBRI cohort reveals TNFi are still used in the majority of cases, however, there has been an increase in the use of non-TNFi therapies both overall and as first line advanced therapy. This trend towards non-TNFi therapies as first line advanced therapy may be partially explained by the shift in guideline recommendations from TNFi as first-line, to any of the advanced therapeutics.³

References

1. Pope, J., Rampakakis, E., Movahedi, M., Cesta, A., Sampalis, J.S., Bombardier, C. for OBRI investigators. **Time to remission in swollen joints is far faster than patient reported outcomes in rheumatoid arthritis: results from the Ontario Best Practices Research Initiative (OBRI).** *Rheumatology*, 2020August13. keaa343, <https://doi.org/10.1093/rheumatology/keaa343>
2. Movahedi, M., Hepworth, E., Mirza, R., Cesta, A., Larche, M. and Bombardier, C. **Discontinuation of Biologic Therapy due to Lack/loss of Response and Adverse Events is Similar Between TNFi and non-TNFi Class: Results from a Real World Rheumatoid Arthritis Cohort.** <https://doi.org/10.1016/j.semarthrit.2020.06.020>
3. Hepworth, E., Movahedi, M., Rampakakis, E., Mirza, R., Lau, A., Cesta, A., Pope, J., Sampalis, J.S., Bombardier, C., and OBRI investigators. **Changes in Market Share of Biologic and Targeted Synthetic Disease-Modifying Anti-Rheumatic Drugs for Treatment of Rheumatoid Arthritis: Results From the Ontario Best-Practice Research Initiative Database.** *Curr Rheumatol Rev.* 2020 Dec 11. doi: 10.2174/1573397116666201211130337. Epub ahead of print. PMID: 33308132.

Current OBRI Initiatives

Expansion to Psoriatic Arthritis

Over the last decade, the OBRI has developed a sophisticated infrastructure to study therapeutics in rheumatology, including RA and PsA, and is well poised to be leveraged by other chronic conditions. In collaboration with the OBRI, Dr. Sibel Aydin will be leading a new province-wide community based psoriatic arthritis (PsA) registry. Over the past year, Dr. Aydin has been working closely with the OBRI team to develop an OBRI PsA protocol, data collection forms, and to identify community-based rheumatologists to participate in this new registry. The OBRI hosted the first PsA investigator meeting this year and we look forward to the enrollment of the first participants in 2021.

COVID-19 and Vaccinations

The OBRI reviewed and updated the patient baseline and follow-up questionnaires. Timely information on vaccinations and COVID-19 exposure will be collected and newer versions of questionnaires will replace older versions.

In collaboration with the OBRI Clinical Advisory Committee and Carolyn Whiskin (Pharmacy Manager for Charlton Health, specializing in the treatment of autoimmune diseases), the OBRI has developed a new vaccination questionnaire that will be administered through the OBRI interviewers. By asking patients these questions, we expect to raise awareness of the recommended vaccinations for RA patients as well as identify any barriers preventing patients from receiving the recommended vaccinations.

Medical Cannabis

The OBRI has collected over 800 medical cannabis surveys from patients attending rheumatology clinics in Ontario. Data from these surveys will provide rheumatologists with a better understanding of the prevalence of medical cannabis use in patients within their practice, the symptoms being treated with medical cannabis, and whether its use is affecting the use of prescribed medications. OBRI is excited to be involved in this timely project which also hopes to determine whether the use of medical cannabis is affecting the use of prescribed RA medications. A poster with the initial findings will be presented at the Canadian Rheumatology Association (CRA) Annual Scientific Meeting in February 2021.

Data Sharing and Collaborations

OBRI's vast experience with the intricacies pertaining to issues of privacy, ethics, data collection, data management and analysis has made OBRI a valuable resource and partner to industry, payers, researchers and government.

- i. **Rhumadata** - The OBRI continues to work closely with Rhumadata to consolidate the data from these two registries. Analysis of the merged data is underway and results will be presented at national and international scientific meetings in 2021.
- ii. **Canadian Clinical RA Registries** - Led by Dr. Claire Barber, under the auspices of the Canadian Rheumatology Association (CRA), clinical rheumatoid arthritis registries across Canada are coming together in a national collaboration. This collaboration will create a summary of patient characteristics across four Canadian RA registries.
- iii. **Canadian RA Guidelines** - The Canadian Rheumatology Association (CRA) is updating the clinical guidelines for the management of patients with rheumatoid arthritis. Treatment guidelines typically rely on the data collected by randomized clinical trials. For the first time, the CRA RA guidelines committee, headed by Dr. Glen Hazlewood, are also reviewing the findings of real-world data to make recommendations for the management of RA.
- iv. **Gastrointestinal Registry** – Dr. Laura Targownik, University of Toronto Departmental Division Director, Gastroenterology (GI), is creating a provincial registry of GI patients. Recognizing OBRI's years of success and registry experience, Dr. Targownik approached OBRI for advice on launching the GI registry. We are pleased to share our wealth of experience collecting real world data to assist the GI group as they embark on this important journey.

Knowledge Translation

The OBRI had 3 peer-reviewed manuscripts published in 2020 (please refer to Key Findings on pages 7-8). We were also invited to share our results in three oral presentations. In addition, six unique abstracts were accepted at scientific meetings

The OBRI 7th Annual Conference was held virtually on May 8, 2020. This annual meeting brings together arthritis stakeholders from across the province for the presentation of cohort findings, investigator led work, and new research linkages and collaborations. The OBRI was pleased that the challenges presented by moving to a virtual meeting did not impact attendance. A record 102 registrants attended the online meeting, including 25 OBRI Investigators, 18 industry partners, 5 researchers, and 21 patients. The remaining attendees were comprised of consumer and advocacy groups, research coordinators and members of the OBRI team. The meeting featured a session on Big Data and the Rheumatologist, with each panel member presenting a different perspective on the topic. Dr. Claire Bombardier introduced the concept of Big Data; Michael Paterson of IC/ES discussed Harnessing Administrative Data (i.e., the data collected through OHIP billings); Dr. Tom Appleton, member of the Ontario Rheumatology Association (ORA), updated the group on the efforts of the ORA to capture and extract data from the rheumatologist's electronic medical records; and Dr. Janet Pope presented on conducting pragmatic trials within a clinical setting. The meeting also included poster presentations of OBRI's latest research and updates on the OBRI cohort.

Real world data

The availability of an increasing number of medications for the treatment of rheumatoid arthritis, although beneficial to patients and providers, has put tremendous financial strain on payers thereby increasing the need for comparative effectiveness studies. Through the OBRI, we can compare real world (and long-term) effectiveness of different treatment groups with similar indications rather than relying on historical data for comparisons. The large number of patients in the OBRI also allows for comparisons of “matched” controls of similar patients using different treatments. Payers, providers, and decision-makers are turning to the OBRI to provide comparisons of treatments that previously could only be studied in single arm cohorts.

The OBRI creates individualized yearly aggregated reports for investigators. This report provides information that allows clinicians to compare their practice outcomes to those of the entire OBRI cohort. The stakeholder yearly report provides unique information on the cohort status, patient characteristics and aggregated drug use. This aggregated data is of interest to payers, government and pharmaceutical companies.

Focused evaluation of biosimilars and targeted small molecules

New biosimilars continue to be approved in Canada and they will continue to emerge at a rapid rate as they offer a potential and real cost savings in the treatment of many chronic diseases – particularly in Rheumatology, Gastroenterology and Dermatology. With many new products entering the Canadian market, the growing need to understand the long-term safety, effectiveness, and economic benefit of biosimilars remains an important priority. OBRI continues to identify and monitor the long-term safety and effectiveness of all biologics, including biosimilars, so that it can document and provide comparative real world insights and evidence for physicians, patients, researchers, and policy makers when evaluating these new molecules.

Meetings & Conferences

In 2020, the OBRI participated in and presented at the following national and international scientific meetings:

- Canadian Arthritis Research Conference, Victoria, BC.
February 25-26, 2020
- Canadian Rheumatology Association (CRA) Annual Scientific Meeting, Victoria, BC.
February 26-29, 2020
- European League Against Rheumatism (EULAR) Congress 2020, Frankfurt, Germany.
June 3-6, 2020
- Canadian Association for Population Therapeutics (CAPT), Toronto, ON.
October 26-27, 2020
- American College of Rheumatology (ACR) Convergence, Virtual Meeting.
November 5-9, 2020

Awards and Recognition

Canadian Rheumatology Association 2020 Masters Awards:

- Dr. Claire Bombardier, Toronto, OBRI Principal Investigator
- Dr. Arthur Bookman, Toronto, OBRI Investigator
- Dr. Edward Keystone, Toronto, OBRI Investigator and Clinical Advisory Committee Member
- Dr. Carter Thorne, Newmarket, OBRI Investigator and Clinical Advisory Committee Member

Canadian Rheumatology Association 2020 Emerging Teacher – Educator Award

- Dr. Dharni Mahendira, Toronto, OBRI Investigator

Congratulations to Dr. Sibel Aydin, who was awarded a Tier 2 Research Chair by the Canada Research Chairs Program (CRCP). Tier 2 chairs are awarded to exceptional emerging researchers, acknowledged by their peers as having the potential to lead in their field.

Thank you to the OBRI Investigators

Dr. Vandana Ahluwalia ¹	Dr. Rafat Faraawi	Dr. Ami Mody
Dr. Zareen Ahmad	Dr. Derek Haaland ¹	Dr. Angela Montgomery
Dr. Pooneh Akhavan	Dr. Brian Hanna ³	Dr. Manisha Mulgund ¹
Dr. Lori Albert	Dr. Nigil Haroon	Dr. Edward Ng
Dr. Catherine Alderdice ³	Dr. Jackie Hochman ³	Dr. Tripti Papneja
Dr. Michael Aubrey	Dr. Anna Jaroszynska	Dr. Viktoria Pavlova
Dr. Henry Averbs ²	Dr. Sindhu Johnson	Dr. Louise Perlin
Dr. Sibel Aydin	Dr. Raman Joshi	Dr. Janet Pope
Dr. Sangeeta Bajaj	Dr. Allan Kagal	Dr. Jane Purvis
Dr. Mary Bell	Dr. Arthur Karasik ¹	Dr. Raman Rai
Dr. William Bensen ³	Dr. Jacob Karsh	Dr. Gina Rohekar
Dr. Sankalp Bhavsar	Dr. Edward Keystone	Dr. Sherri Rohekar
Dr. Raja Bobba	Dr. Nader Khalidi	Dr. Thanu Ruban
Dr. Claire Bombardier	Dr. Imtiaz Khan ²	Dr. Nooshin Samadi
Dr. Arthur Bookman	Dr. Bindee Kuriya	Dr. Sharron Sandhu
Dr. Julie Brophy	Dr. Margaret Larché	Dr. Saeed Shaikh
Dr. Antonio Cabral	Dr. Arthur Lau ¹	Dr. Ali Shickh
Dr. Simon Carette	Dr. Nicole Le Riche ³	Dr. Rachel Shupak
Dr. Raj Carmona	Dr. Felix Leung	Dr. Doug Smith ³
Dr. Andrew Chow ¹	Dr. Frances Leung ³	Dr. Elaine Soucy
Dr. Shirley Chow	Dr. Dharini Mahendira	Dr. Jonathan Stein
Dr. Gregory Choy	Dr. Mark Matsos ³	Dr. Andy Thompson ³
Dr. Patricia Ciaschini ¹	Dr. Heather McDonald-Blumer	Dr. Carter Thorne ¹
Dr. Alfred Cividino	Dr. Emily McKeown	Dr. Sharon Wilkinson ³
Dr. Dana Cohen	Dr. Ines Midzic	
Dr. Rajwinder Dhillon	Dr. Nataliya Milman	
Dr. Sanjay Dixit	Dr. Shikha Mittoo	

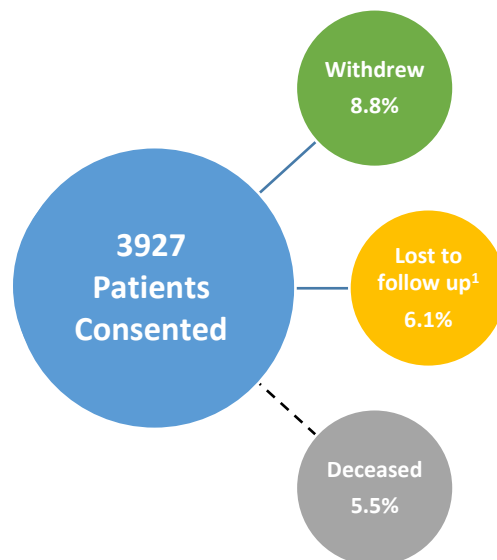
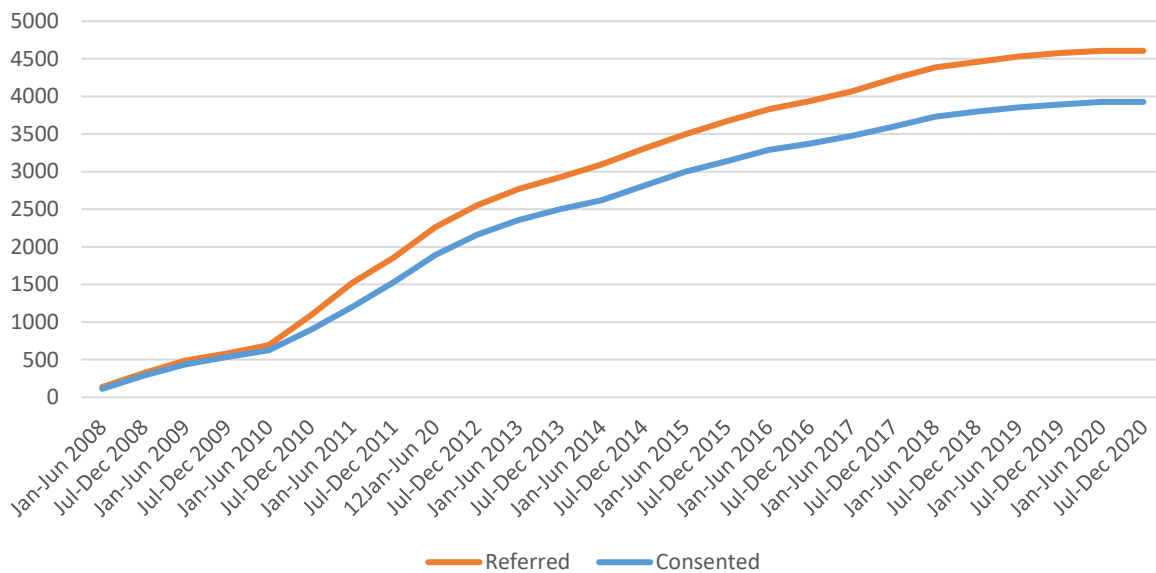
¹RA & SpA

²SpA only

³Retired/No longer participating in OBRI

2020 Recruitment Activity

OBRI Cumulative Recruitment by Year
January 2008 - December 2021



²Interviewer not able to contact patient. No data from patient for ≥ 18 months
AND no physician reported data has been received for ≥ 18 months

Young Investigators, students and trainees

The OBRI is an exciting place for young investigators, students and trainees to expand their research experience. The OBRI team provides assistance defining their research questions, creating their protocols and analyzing their data. We encourage students and trainees from Ontario and across Canada to contact our team (obri@uhnresearch.ca).



OBRI Investigator Dr. Bindee Kuriya, Director, Rapid Access Rheumatology Clinic, Mount Sinai Hospital, obtained a master's degree in clinical epidemiology from the Harvard School of Public Health. Dr. Kuriya leads the new CARDIA - Cardiovascular Assessment in Rheumatic Diseases and Inflammatory Arthritis - project. Research indicates that patients with rheumatoid arthritis may be at increased risk of cardiovascular disease (CVD) compared to the general population. It is known that CVD is documented as one of the most prevalent co-morbidity associated with inflammatory arthritis. Through this multi-disciplinary, collaborative and innovative project, CARDIA will provide patients with evidence-based management of their RA with a focus on primary and secondary prevention of CVD.



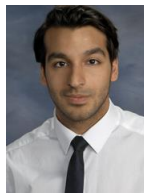
Dr. Pooneh Akhavan is a Consultant Rheumatologist at Mount Sinai Hospital in Toronto, with a MSc in Clinical Epidemiology. She runs the Early Arthritis clinic at Mount Sinai Hospital. Her main research interests include outcome measures and prognostic modeling in early RA, knowledge transfer, clinical practice guidelines and quality indicators in rheumatic diseases. As an OBRI investigator, Dr. Akhavan is working with the OBRI team to examine the relationship between patient global assessment of disease activity and physician assessment of disease activity at baseline and after one year in patients with early RA.



Mark Tatangelo, PhD, is measuring the costs and clinical consequences of rheumatoid arthritis by applying new statistical methods. The outputs of his research will assist clinicians, policymakers, payers, and patients to deliver better care for patients with rheumatoid arthritis.



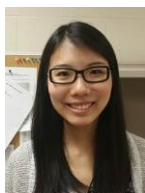
Dr. Elliot Hepworth (rheumatology resident at the University of Ottawa) and Dr. Reza Mirza (rheumatology resident at the University of Toronto) worked with the OBRI team to examine the Longitudinal Changes in Relative Market Share Proportions of Biologic and Targeted Synthetic Disease-Modifying Anti-Rheumatic Drugs for Treatment of Rheumatoid Arthritis in a recently published manuscript.



In 2020, they explored the differences and/or similarities of practice and treatment pattern outcomes in rheumatoid arthritis between OBRI academic and community rheumatology practices. We look forward to their exciting new research in the coming year.



2020 saw the return of Dr. Kangping Cui, this time as a rheumatology resident at the University of Toronto. As a medical student, Kangping worked on 3 OBRI abstracts which have been presented at both national and international scientific meetings: “Development of an Algorithm for the Classification of Cardiovascular Comorbidity in Rheumatoid Arthritis: Data from the Ontario Best Practices Research Initiative”; “Cardiovascular Disease Risk Factors May Negatively Impact Rheumatoid Arthritis Disease Outcomes: Findings from the Ontario Best Practices Research Initiative”; and “Contributions of Social Determinants of Health on Treatment Responses in Rheumatoid Arthritis Patients”. These abstracts have been developed into full manuscripts and are currently under review for publication.

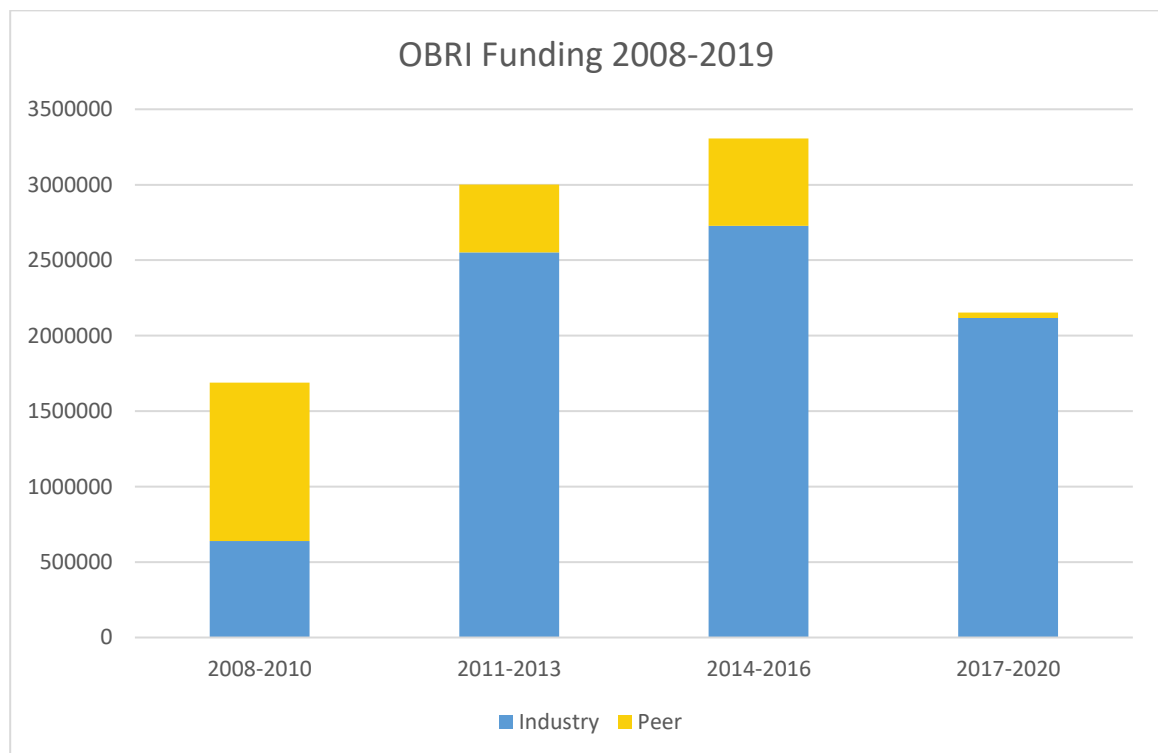


As a pharmacy student at the University of Toronto, Nancy Guo worked with the OBRI team to develop the abstract “Disease activity in moderate rheumatoid arthritis patients – Results from the Ontario Best Practices Research Initiative” which was presented at the 2015 CRA Annual Scientific Meeting. Nancy, now a practicing oncology pharmacist in Kingston, ON, has revived this research question. Using more recent and sophisticated data analyses, she is now preparing this work for publication.

Financial Report

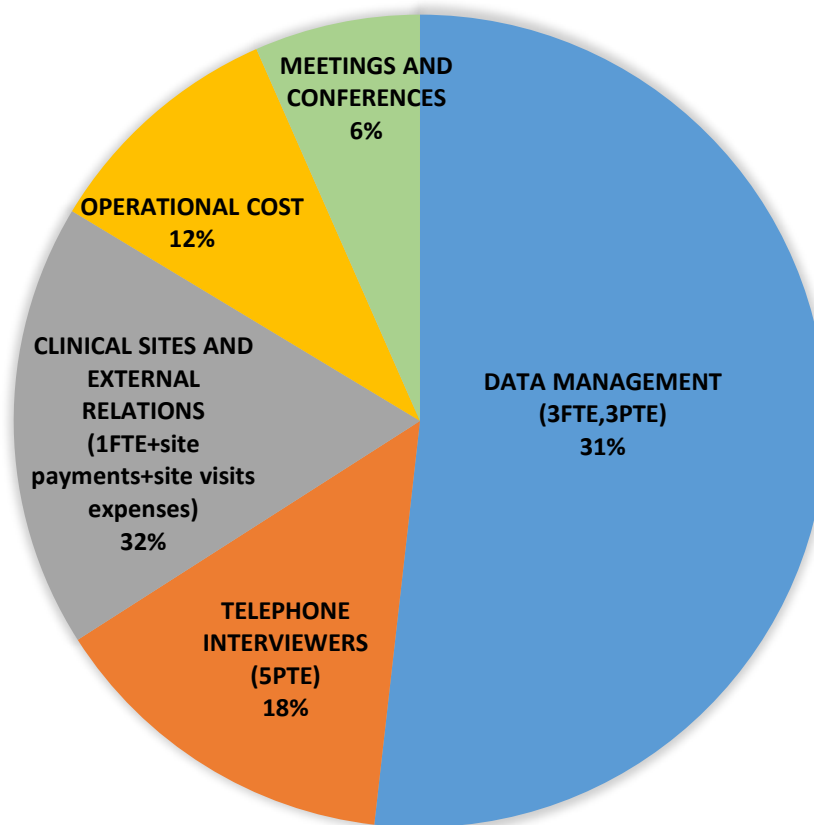
At OBRI, our main source of revenue comes from sponsorship; however, peer-reviewed funding has been awarded to OBRI for specific research activities. In 2020, OBRI received sponsorship from 8 industry partners. Sources of funding revenue from 2008-2020 are presented below.

OBRI Funding Revenue



OBRI Expenditures

OBRI expenditures for the fiscal year April 2019 – March 2020 totaled \$646,692.



Patient Advisory Committee (PAC)

The OBRI Patient Advisory Committee (PAC) is a volunteer-led group comprised of patient representatives with rheumatoid arthritis, ankylosing spondylitis, and psoriatic arthritis. The PAC works to improve patient well-being through the promotion of rights detailed in the *Canadian Arthritis Patients Charter*.

The OBRI PAC provides guidance to the OBRI research team through:

- the communication of patient perspectives to research staff, students, investigators and other stakeholders
- priority setting, project planning, and decision making
- patient engagement, communication, and retention activities
- the dissemination of research/knowledge to patients and caregivers

The OBRI PAC oversees the production of an annual patient newsletter “In the Loop” (<http://www.obri.ca/for-patients/patient-newsletters/>) to keep patients informed about OBRI research, news, and events. The committee also co-facilitates the Patient Information Sessions to communicate OBRI research activities to participants.

Patient Advisory Committee:

Catherine Hofstetter
David Barker
Jennifer Boyle
Maureen Forbes



Lynda Linderman
Gerald Major
Erinn McQueen
Denis Morrice



Clinical Advisory Committee (CAC)

The Clinical Advisory Committee (CAC) was developed in 2015 to serve as an oversight committee to:

- provide expert advice on matters relating to OBRI internal operations
- provide strategic leadership for communications and interactions with external stakeholders (i.e., Patients, Payers, Providers, Professional Associations) and industry relations
- engage and mentor junior investigators
- prioritize research questions to ensure alignment with OBRI overall goals and diversification of funding.
- provide the OBRI with leadership for the development and investigation of clinically-relevant research questions.

Members of the CAC work closely with OBRI staff and JSS Medical Research to explore new research questions relevant to rheumatology care. This collaboration resulted in 3 publications in 2020 (see publication summaries highlighted in Key Findings for 2020).

Clinical Advisory Committee:

Dr. Vandana Ahluwalia
Dr. Sibel Aydin
Dr. Claire Bombardier



Catherine Hoffstetter (PAC)
Dr. Edward Keystone
Dr. Bindee Kuriya



Dr. Arthur Lau
Dr. Janet Pope
Dr. Carter Thorne



Interviews: Collecting Patient Reported Outcome Measures

Part of what makes the OBRI unique is our ongoing collection of patient reported outcome measures through structured telephone interviews with patients. Patient reported data is collected on a regular basis to document patient experiences with disease activity, quality of life, comorbidity, socioeconomic status, functional ability, and work productivity. These interviews, combined with physician-reported data and administrative data, provide us with a holistic picture of the RA care landscape in Ontario.

We would like to thank our dedicated team of interviewers for their role ensuring that patient data is collected in a standardized manner.

OBRI Interviewers

Lynda Linderman
Andrea McClintock
Colleen Perrin



Linda Rosengarten
Sharon Zwarych



OBRI TEAM

The data management centre is staffed by a specialized team with competency in clinical trial management, biostatistics, ethics approvals, privacy, data management, health IT, stakeholder engagement and business development. Since inception, the OBRI has disseminated knowledge insights globally, nationally and provincially through abstracts, presentations, and manuscripts for a variety of vested stakeholders including clinicians, patients, manufactures and payers.

OBRI Staff

- Claire Bombardier, MD, OBRI Principal Investigator
- Angela Cesta, Clinical Research Coordinator
- Mohammad Movahedi, MD, PhD, Research Associate II
- Xiuying Li, Data Manager
- Carol Mously, Site Coordinator
- Leanie Culanding, Budget and Finance Manager (part-time)
- Cheryl Dawson-Titus, Administrative Assistant (part-time)





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