

# Centralized Recruitment and Other Practices Enhancing Investigator Site Effectiveness

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# The Importance of Communication

- “Patients or potential trial participants cannot enroll in a new treatment study if they’re not aware of it’s existence”
- “After all, without trial participants, progressive medicine stops”

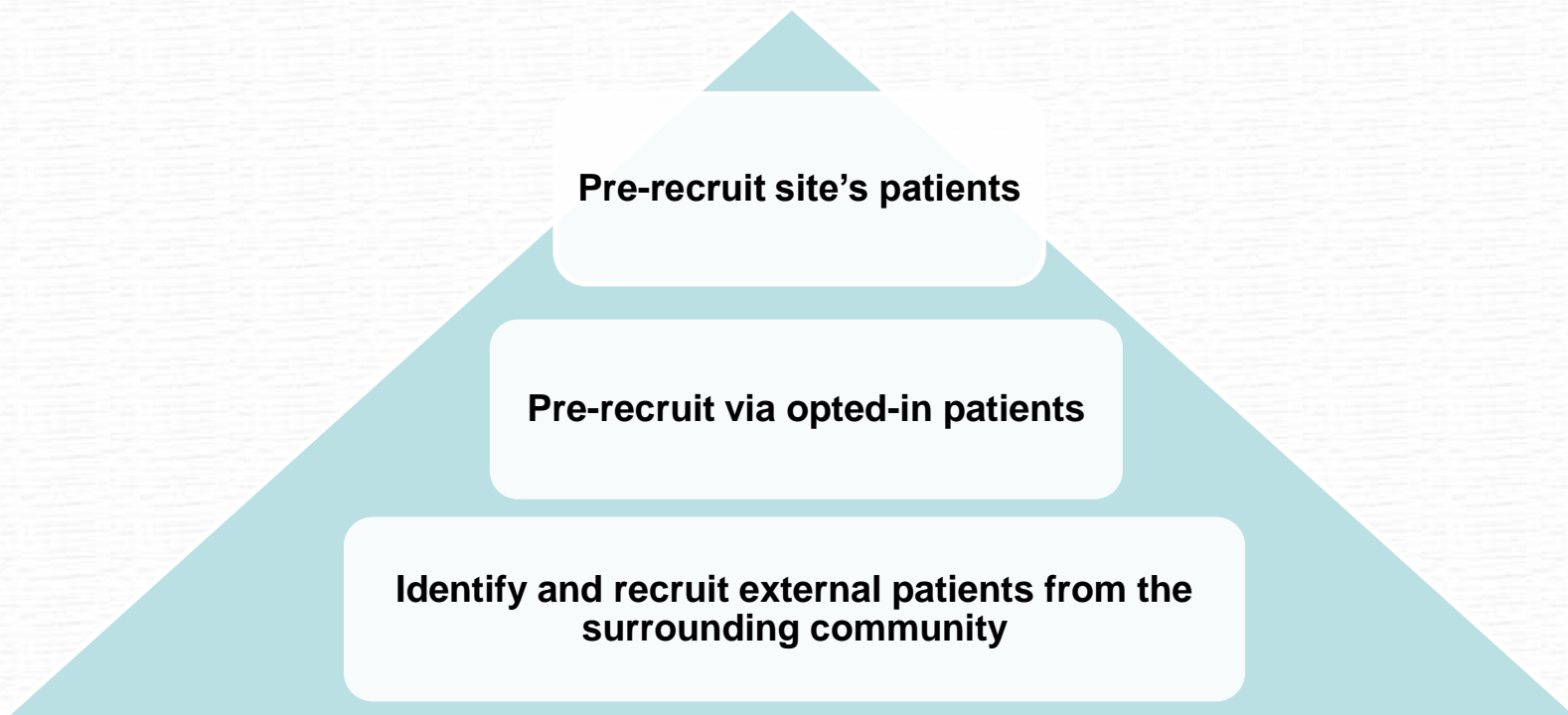
DIA Journal, Vol.44 pp 265-270, 2010

Barbara j. Godlew, RN, BA

Patricia Furlong



# Patient Recruitment Strategic Vision



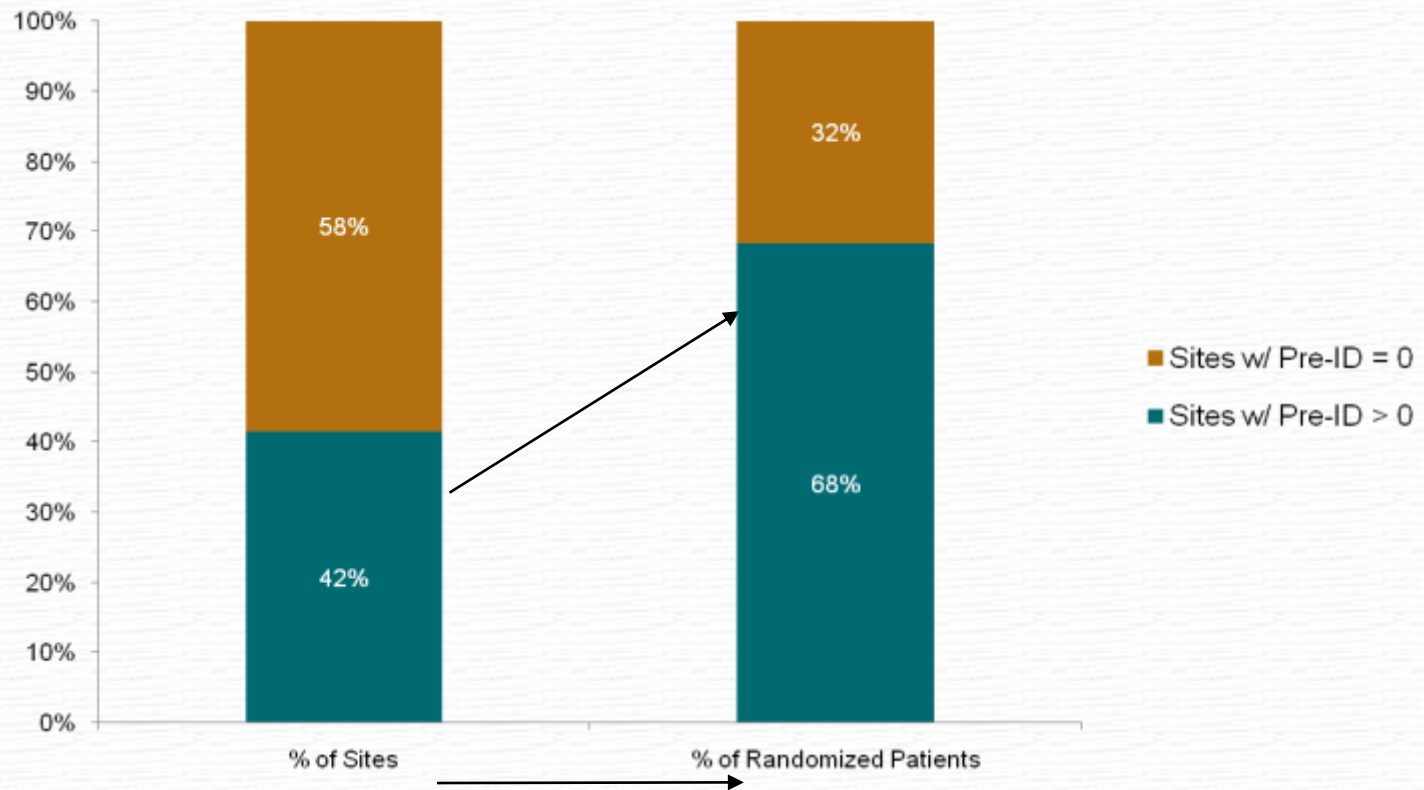
# Recruitment Tool Category Definitions

Category	Tools	Description
<b>Site's Pts</b>	Lab	Uses lab data to target physicians and patients that fit criteria. Provide names to MD for contact
	Claims data	Dx, Rx, lab data showing number of patients in a practice
	Chart reviews	Software or service that does key word search in an MD's charts to identify qualified patients
<b>Site's Pts and Real Time ID</b>	HIE	Health information exchange software that tracks patients across multiple EMR systems in a geographic area
	EMR	Electronic medical records that identify patients fitting study criteria
<b>Opted-In Pts</b>	Pt communities (iGuard & CR.com)	Online databases that patients have opted-in for contact regarding trial opportunities
<b>ID and Recruit External</b>	Social networks	Online chat rooms, blogs, websites where people openly discuss their disease and treatment options
	Pt communities	Online databases that patients have opted-in for contact regarding trial opportunities
	Pt profiling	Marketing data that models consumer behavior, socio-demographics and disease trends
	Pt public records	Online databases where patients update and track their own medical history
	Pharmacy	Uses patient claims data to deliver targeted messages to pharmacy customers



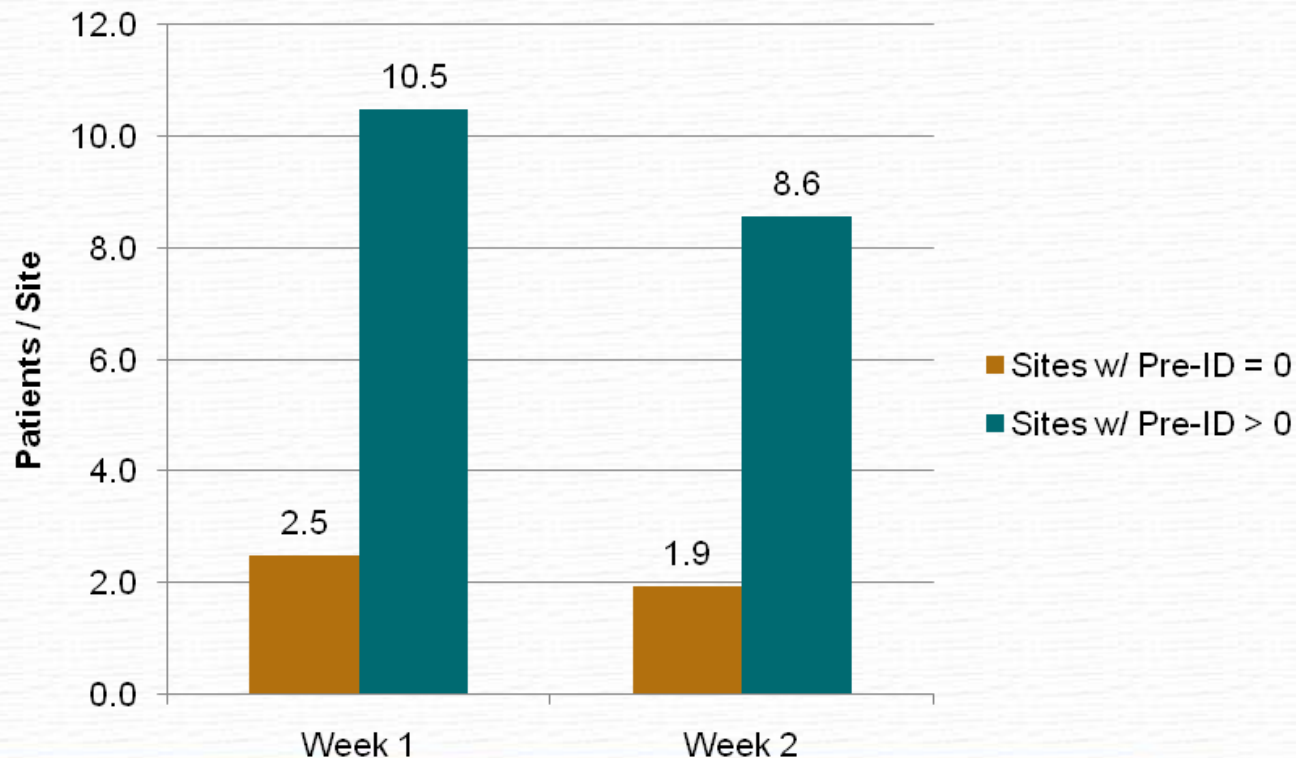
# Website to Pre-ID Site's Patients One Month Prior to FPI

42% of the sites randomized 68% of patients



# Initial Weeks of Enrollment

- For sites that pre-identified subjects, the randomization rate was ~4 times higher than sites without any pre-identified subjects

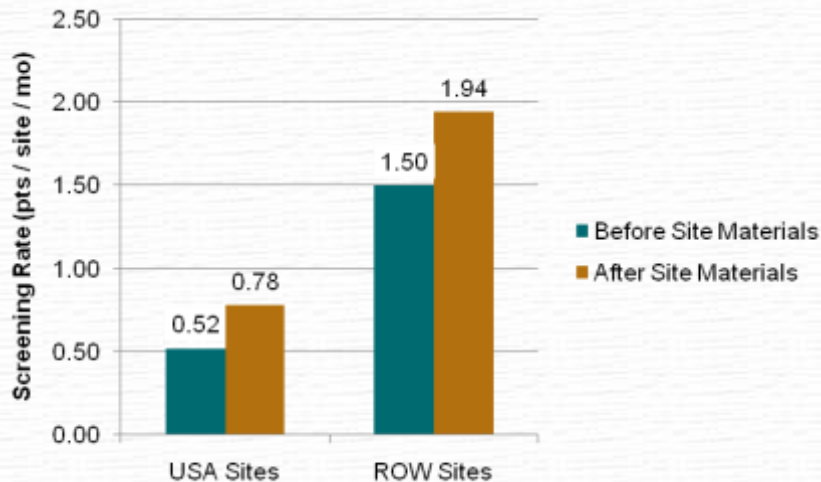


# Site Materials Lift

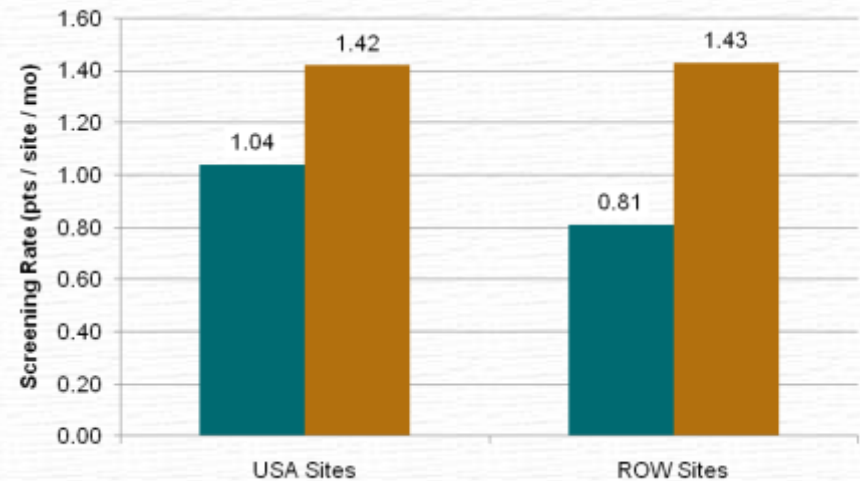
*Site Materials have consistently shown increased screening rates for USA and ROW sites in the period after distribution*

**Site materials drive 20%-60% increase in screening rate**

Cardiovascular Study

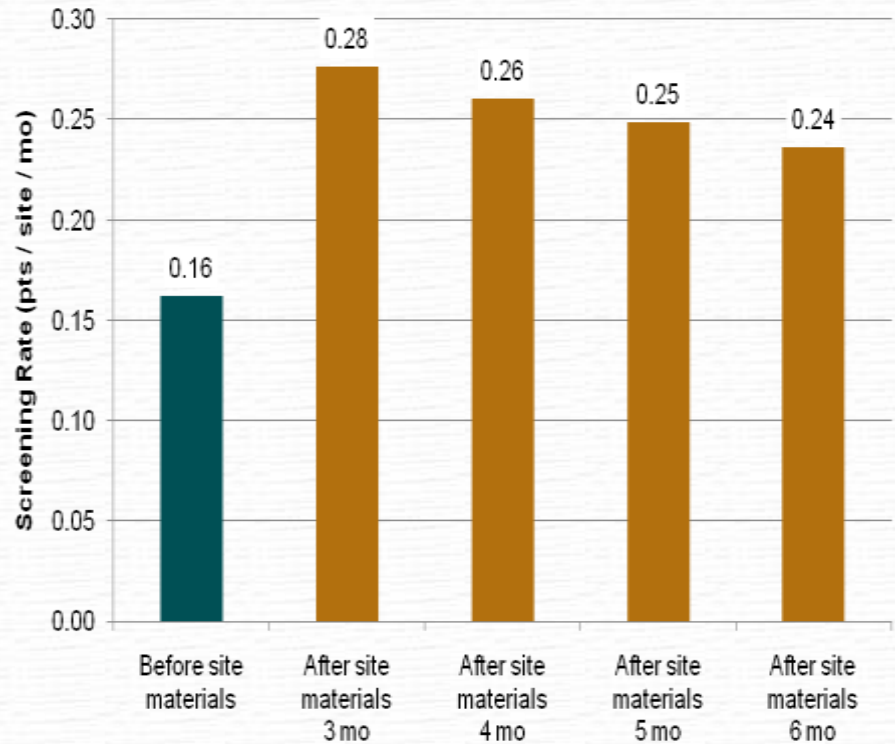
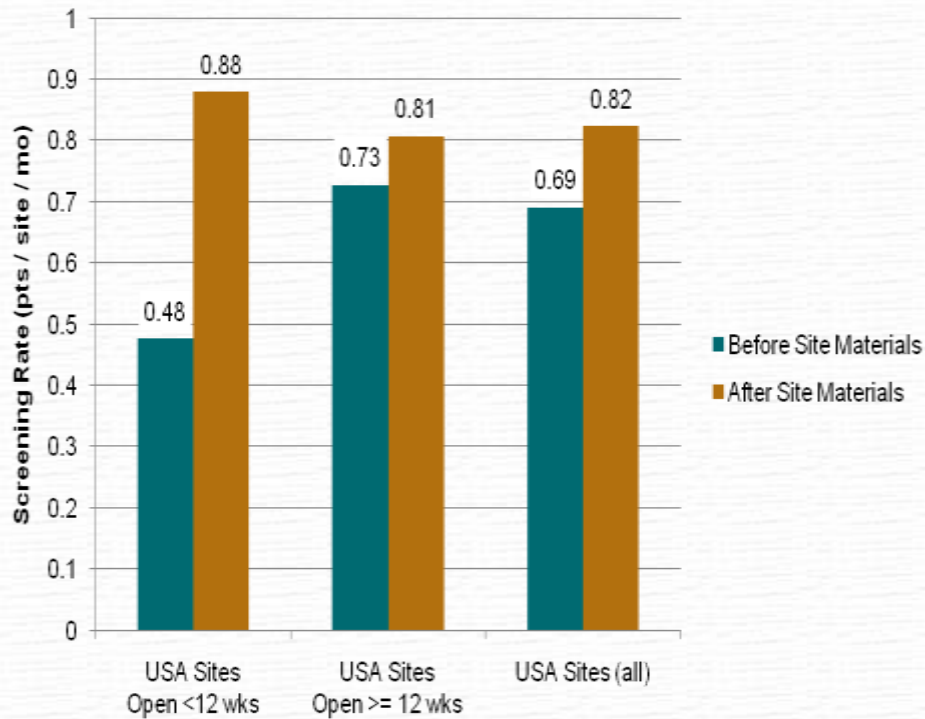


Neurology



# Timing of Site Materials

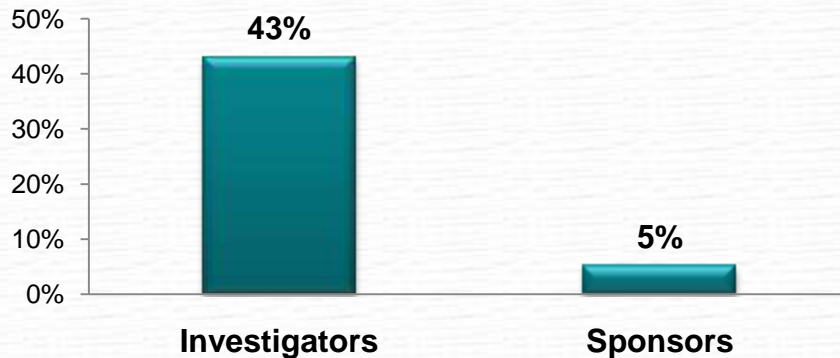
Clear benefit to early distribution of site materials but impact diminishes with time



# Disconnect between Sponsors vs Investigators and Patients

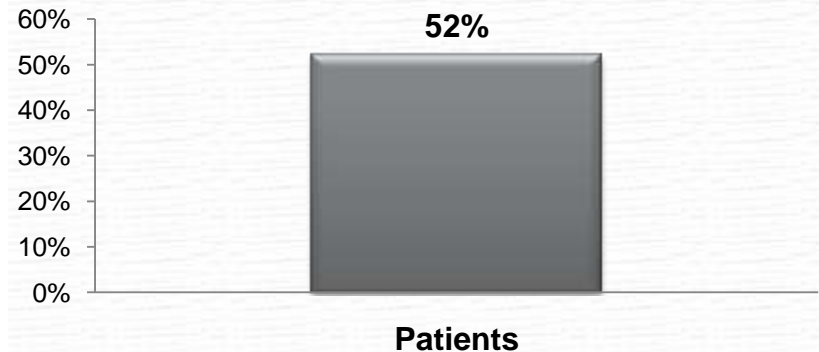
## What Affects Recruitment Success?

(% responding "Advertising")



## How did you learn about the Trial?

(% responding "Advertising or Web")



# Sponsors Don't See Value Proposition in DTP Outreach

## WHY?

### Site-reported outcomes can misrepresent the impact of outreach

- Sites are not motivated to accurately report referral conversions (for screenings or randomizations)
- Site-reported outcomes can vary widely from actual screening/randomization data

## Solution:

### Lift analysis examines recruitment rates to determine impact

- The lift methodology compares the recruitment rate before/after an engagement to estimate the impact
  - The rate difference – or lift – is the estimated impact of the engagement

## Value:

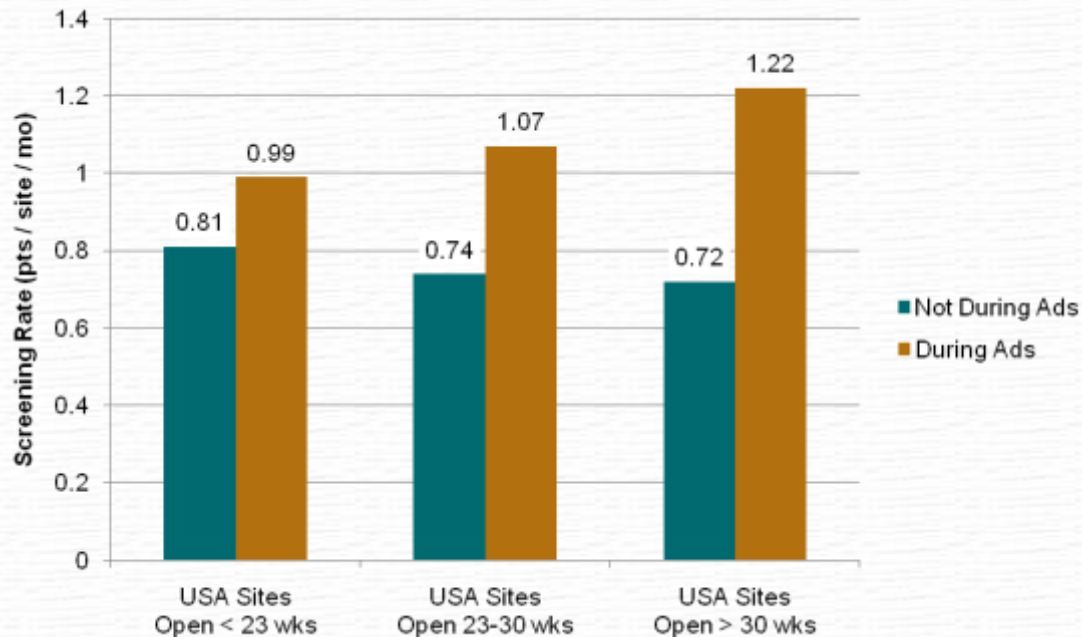
**Understanding actual impact on recruitment rates, enables evidence-based strategies that deliver more predictable results**



# Timing of Centralized Advertising

*In a recent cardiovascular study, sites were grouped based upon time open for enrollment prior to DTP advertising campaign*

**Sites open longer before DTP advertising realize greater lift**




# On-line Site Advertising Support

## Professional

- Web-based tool
- Access to Opt-in patient databases (iGuard and ClinicalResearch.com – over 2.2 million patients)
- Able to manage local advertising using professional quality materials
- Sites receive discounted (40-60%) media rates for TV, radio, print and direct mail

## Result

- Production, planning and placement of a multi-media campaign
- Performance metrics are tracked and reported at the study, site and tactical level



The screenshot displays the Quintiles Research Study website interface. At the top, there is a navigation bar with links for HOME, CONTACT US, HELP & TRAINING, and LOG OUT. The Quintiles logo is prominently displayed. Below the logo, there is a section for "CUSTOMIZATIONS" with a "NAVIGATION WINDOW" tab. This section contains a form for "Name, Phone, and URL" with fields for Name (Melissa Gates, MD.), a dropdown menu for "Doctor Gates", Toll-Free Phone Number (1-800-555-1212), and URL (www.quintiles.com). Navigation buttons for "<< PREVIOUS" and "NEXT >>" are located at the bottom of this section. To the right, there is a "CREATIVE" section with a "CUSTOMIZED PREVIEW" tab. The preview shows a video frame with the text "TYPE 2 Diabetes Medical Research" and a toll-free number "1-888-555-1234". Below the preview are buttons for "RENDERING..." and "CONTINUE". At the bottom of the page, there is a "powered by Baliho" logo and a "Contact Us" button.



# Value Proposition

## Sites' Perspective:

- Allows customization of centrally developed advertisements
- Professional media planning/buying support
- Stipend budget management tool

## Sponsor Perspective:

- Manages site advertising stipends via central web-based platform
- Provides sites with direct to patient outreach options normally only available through centralized campaigns
- Provides better value and lower pricing for broadcast and other direct to patient outreach media
- Provides thorough tracking and reporting of budget spend

## Recruitment Manager Perspective:

- Ability to track 'lift' from site stipends
- Better 'control' of site advertising dollars
- Ability to integrate with on-line screener and call centers (where applicable)



# Thank you!

