

Balancing high-tech and high-touch approaches

Clinical trial success will depend on effective use of technology and human touch

Patients want a friendly face to guide them into clinical trials, not an avatar.

But as people increasingly use technology for everything from buying groceries to Googling their medical symptoms, technology is gaining a strong foothold in clinical trial recruitment.

Sites, sponsors and CROs struggling to find patients for trials have found help from high-tech approaches including data management, tablet and smart phone applications and targeted internet ads.

The focus on technology, though, raises concerns that the clinical trials world is forgetting what patients actually want.

"They're lured by shiny new objects" like insurance claims databases that can be mined for potential patients, said John Needham, head of Patient Recruitment Strategy, a Philadelphia consulting firm. "They've forgotten it's about human beings."

Christine Pierre, president of the Society for Clinical Research Sites (SCRS), said all the bells and whistles of technology can't drown out the need for a patient to have a sincere conversation with someone knowledgeable about the study. "It's the foundation of how informed consent is obtained," Pierre said. "It's conversation. It's not tweeting. It's not email. It's a good old-fashioned conversation."

A study by the Center for Information & Study on Clinical Research Par-

What are the most important factors influencing your decision to participate in a clinical research study?

	Percent rating the factor 'somewhat important/most important'
Quality of the care	85%
Access to medical/research professionals	83%
Opportunity to learn about my disease	79%
Opportunity to receive information about the results of my study	71%

Source: CISCRP, 2013 Perceptions & Insights Study; N=1,724 study participants; top four factors out of 10 rated

ticipation (CISCRP) found while 52% of patients surveyed prefer to hear about trials from their primary care physicians, only 20% do.

Personal touch still needed

Those numbers frustrate trial recruiters. Knowing patients like to hear from their doctors is one thing. Getting busy medical staff juggling multiple trials to do that is another.

"If it comes from physicians it carries more weight. But how do we make physicians talk to patients about the trial?" said Gretchen Goller, senior director of patient access and retention services at CRO PRA.

Michelle Sowell, research director at Clinical Research Atlanta (CRA), said sites don't tap into family practitioners because often they are too busy and many do not understand the value of clinical trials. CRA has worked to build relationships with internists, pe-

diatricians and cardiologists, but often they fail to complete the training needed to become sub-investigators.

University of Alabama Birmingham (UAB) professor of medicine Kenneth Saag, M.D., said technology can spur overtaxed doctors to become involved in trials.

Saag, director of the UAB Arthritis and Musculoskeletal Centers for Education and Research on Therapeutics, is studying whether paper or electronic versions of informed consent are more efficient for doctors and create more knowledge and satisfaction for patients and doctors. Electronic versions can include animation and quizzes to check patients' comprehension.

The ideal recruitment, said Michael Conlon, M.D., a biostatistician at the University of Florida, is to use data to find the right patients and then have professionals with strong interpersonal skills convince them to enroll. High tech hands off to high touch. Conlon is associate director and COO