

## 81QD CASE STUDY:

# Optimizing Clinical Trial Recruitment

## CASE BACKGROUND



### SITUATION

- Client is focused on the discovery and development of precision medicines for difficult-to-treat cancers
- The target disease is rare. About 8,000 people in the United States are diagnosed with it each year



### CHALLENGES

- Identifying HCPs and treatment centers with potential patients for clinical trials is a lengthy process
- Client sought to explore approaches to leverage real-world data to improve and accelerate the clinical trial recruitment process



### KEY BUSINESS QUESTIONS

- What is the size of the target clinical trial patient pool?
- Where are those patients located?
- Which Clinicians are treating target patients?
- How do we prioritize Clinicians to contact for clinical trial participation?

## APPROACH

### ANALYZE

#### 81qd Approach

##### Identified & Segmented Potential Patients:

- With client input, collaboratively define the appropriate patient inclusion and exclusion criteria using the clinical trial protocol as a basis to create the patient cohort
- Iterative data analysis to identify and segment patients who meet clinical trial criteria

### ASSESS

##### Connected Clinicians to Anonymized Patients:

- Map patients back to Clinicians who were treating or referring them with “specific” diagnoses

##### Segmented and Mapped Clinicians:

- Map connections between those treaters and current client trialists based on patients in common

### ACTION

##### Assessed Clinicians Based on Connections to Current Trialists and Patients in Common:

- Number of qualifying patients
- Number of qualifying patients shared with client investigators
- Recency and frequency of qualifying patient visits
- HCP specialty
- Proximity to existing client sites for company outreach

## OUTCOME



#### Identified High Potential Clinical Trialists

- Found over 200 Clinicians with patients meeting clinical trial protocol criteria



#### Prioritized Recruitment of Target Patients

- Mapped patients back to Clinicians who were treating or referring them with “specific” diagnoses
- Mapped connections between those treaters and current client trialists based on patients in common



#### Accelerated the Clinical Trial Recruitment Process

Prioritized potential new investigators for engagement based on:

- Number of qualifying patients
- Number of qualifying patients shared with client investigators
- Recency and frequency of qualifying patient visits
- HCP specialty
- Proximity to current trial sites for company outreach

