

## 4<sup>th</sup> International Congress on DRUG DISCOVERY, DESIGNING AND DEVELOPMENT &

International Conference and Exhibition on BIOCHEMISTRY, MOLECULAR BIOLOGY: R&D

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## **Gail Adinamis**

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Innovative patient-centric service model helps speed patient recruitment and increase retention in virtual and traditional study designs

atient recruitment and retention are key factors, and generally  ${f P}$  the most challenging, in meeting the objectives and success of clinical trials. Clinical trial costs, complexity and development timelines have continued to increase over the past several years as well as the burden to participating patients and caregivers. We are approaching a critical juncture where traditional trial designs can no longer be justified or sustained. More patientcentric trial models and novel trial designs incorporating mobile technologies are available to make studies more patientfriendly as well as more cost efficient. A patient-centric service model has evolved over the past two decades allowing study visits to be conducted at the patient's home where it is more convenient and comfortable than at the investigator site. By conducting selected protocol visits at home, the workplace or other alternate location, ambulant healthcare providers offer a way for patients to participate in trials regardless of typical barriers of study duration, visit frequency, disease state, distance to site, site office hours, or family, school or work obligations. By making trials more convenient for patients, this service model has demonstrated that more patients are willing and able to participate and remain in studies. Virtual study (centralsite) designs have been introduced to also address real world challenges to gain access to hard to reach patients residing in rural areas and those who may have mobility issues and to utilize available technologies to remotely consent and monitor patients. There remains the need for local clinical support to obtain safety labs or train patients on utilizing the mobile



devices. The use of ambulant healthcare providers to conduct at-home study visits can result in significantly more costeffective, efficient and patient-friendly clinical trial programs conducted globally than traditional studies. This session will explore the use of an innovative, patient-centric approach to conducting selected study visits via an ambulant healthcare network to reduce patient burden and other barriers to study participation; Show, how conducting selected protocol visits at the patient's home or alternate location rather than at the investigator site can make study participation more convenient and comfortable for patients resulting in faster recruitment and better compliance and retention; Present case studies using ambulant care services and demonstrate win-win benefits for all stakeholders.

## **Speaker Biography**

Gail Adinamis is Founder and CEO of GlobalCare Clinical Trials, LLC, a global niche patient-centric service organization that takes study visits to the patient's home or alternate setting via a global network of ambulant healthcare providers in over 60 countries. She has over 35 years of comprehensive global clinical trials experience including over 12 years of global trials management at Abbott Laboratories and Astellas. She has founded the in-home business model for study visits in 1992 and established and headed clinical trials divisions for three national home infusion companies and was a Founder, President and CEO of the first independent ambulant care service company for clinical trials. She is a Member of the Women Presidents' Organization, National Association of Professional Women, and DIA and has been an Invited Speaker at several industry conferences and recipient of numerous awards/recognitions including twice being among INC 5000's fastest growing private companies, and Game Changer and CEO of the Year.

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