

Aussie App Taking Clinical Trials Recruitment to Next Level

An Australian-developed software application is helping to overcome the difficulties commonly encountered by medical researchers when trying to recruit patients for clinical trials.

ClinTrial Refer creates and maintains up-to-date databases of clinical trials which are currently recruiting patients, whilst its mobile applications make it easier for patients or their doctors to find a suitable trial.

Following rapid growth in demand, ClinTrial Refer is preparing for potential expansion to include all clinical trials, across all disciplines, in Australia and potentially globally.

ClinTrial Refer co-founder Roslyn Ristuccia says 90 per cent of all clinical trials conducted in Australia are delayed by difficulties recruiting sufficient suitable patients.

"Recruitment is an almost universal issue for clinical trials, but when ClinTrial Refer was first launched in 2013, haematology researchers in NSW saw an immediate and sustained improvement," Ms Ristuccia, who is a clinical research unit manager in the Haematology department at Sydney's St George Hospital, said.

"Everyone told us that patients wouldn't travel and that doctors wouldn't cross-refer. But there was an eight-fold increase in referrals and a 30 per cent increase in trial recruitment.

"Initially I thought ClinTrial Refer was changing clinician behaviour but I've come to believe the only difference is they now have the information they needed to do the best thing by their patients. A doctor can access the app and, in a couple of minutes, find the details for a clinical trial and pre-screen their patient for suitability," she said

Fellow ClinTrial Refer co-founder Judith Trotman is the Director of the Haematology Clinical Research Unit, a Senior Staff Specialist at Concord Hospital and Clinical Associate Professor at the University of Sydney. She says the data platform replaces the "very archaic" methods some researchers are using to target the patient populations they are seeking and attempting to help.

"A number of researchers might just advertise in the local paper for patients but it's very hit or miss. You could get one response or ten. Even then, they might not meet the protocol criteria," Professor Trotman said.

"Targeted screening against the inclusion and exclusion criteria listed in ClinTrial refer greatly improves the actual screening to recruitment ratio. It has enabled investigator-led studies to recruit to target."

In 2016, Sydney Health Partners recognised the potential for ClinTrial Refer to speedup medical research translation by funding the development of the first version of the app for other disciplines including including cardiology, endocrinology and immunology.

"The SHP app was the first to go live on multiple disciplines and across a multitude of sites, effectively piloting how we could make it work for the rest of Australia," Professor Trotman said.

Further growth in demand has seen more than 20 derivative apps of ClinTrial Refer developed, representing 850 clinical trial sites, or about 60 per cent of clinical trials in Australia.

A new version of ClinTrial Refer, due for launch by the end of the year, will integrate all the apps into a single digital platform and website.

Version 2.0 will solve the problems of the derivative apps creating duplication or requiring double entry of data. Users will be able to search one or several apps - or choose a global search.

In addition, ClinTrial Refer has reached agreement with the Australia and New Zealand Clinical Trials Registry and its United States equivalent to supply their data, meaning some fields will be pre-populated. In return, participating trial sites will help update the registries.

"We have a function in version 2.0 which allows trial sites to report if recruitment for their trial has closed, addressing the common complaint that the registries are often out of date," Ms Ristuccia said.

"This is the critical difference: ours is a bottom-up approach. And because all the trial sites are contributing data they feel some level of ownership.

"ClinTrial Refer is a public good. It's about being open, it's about being collaborative and it's about crossing boundaries between private and public institutions, breaking down hospital silos, so that patients are accessing cutting edge therapies, or keeping at the cutting edge."