

# Principal Investigators and Site in the Challenges of Clinical Trials Recruitment and Contemporary Tendencies

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## Abstract:

### Annotation:

Clinical trial is cutting edge of science to bring the so needed medicines to the suffering patients over the whole world. Cutting edge always the challenge and modern challenges now substantially increased and consist of digitalisation, decentralization, personalization and many others new tendencies and the meantime the old challenges like recruitment of patients keeps saved. From the one side challenges is facilitating the trial but from others it requires much more education, trainings and a time. It could seem that role of investigators and site can be reduced by these tendencies and to reveal it we will highlight the tendencies by the perspectives of site and site. The role of principal investigator anyway still continues to be the important for all of this challenges.

**Materials and Methods:** Review of the publications randomly found on the topic of challenges and Principal investigators and site in the challenges of clinical trials - recruitment and contemporary tendencies.

Study objectives: to highlight Principal investigators and site in the challenges of clinical trials - recruitment and contemporary tendencies

**Statistical analysis:** there were no statistics and only the observation of journal open sources.

**Results:** It was reviewed the modern and old tendencies in clinical trials Principal investigators and site in the challenges of clinical trials - recruitment and contemporary tendencies.

**Discussion:** Recruitment as an old challenge to continue to be important part of clinical trials and this challenges and role of site and principal investigators continue to be important. Modern tendencies as new challenges require the site and principal investigator even be a more involving to the clinical trial compare to conventional centralized trials.

**Keywords:** zinner syndrome; seminal vesicle carcinoma

## Introduction:

Clinical trials as of today is the way to provide the society with the effective and safe treatment and diagnostic approaches to the patients (Friedman, L, 2010, Toerien M. Et al., 2009).

Over 34000 clinical trials are conducting annually in the world. Data of clinicaltrial.gov for 2021 year consist of 34,528 studies including all phases.

The number of patients who is participating in clinical trials annually is dozens of millions. But anyway, this not more than 2-5% out of patients could be participating (Mona N. Fouad at all, 2013)

Cost to reach the approval is so high that it could seem that the more cost done the more success is expecting. For example, now to reach the success in

clinical trial it could be spent more than 10+ years and more than 2+ bln USD, but only 1% bring the approaches to the patient or reach the market or, by other words, having overcome all approvals and studies to be safe and effective in order to give favor to the patients (Woodin K. at al., 2003).

The reasons of this result are due to challenges arising during the development of the Investigational Medicinal Product.

## Methods and Materials:

It was done the review of the randomly found publications the topic of challenges and Principal investigators and site in the challenges of clinical trials - recruitment and contemporary tendencies. It was grouped found challenges and tendencies in a few groups and discussed it.

## Statistical Analysis:

No statistical analysis done.

## Results:

Clinical trials traditionally are conducted in hospitals or medical centers and being called CENTRALIZED or conventional trials and this is set up in ICH GCP any revisions (ICH GCP).

Based on the literature (Herzhoff Y., 2022, Bonner K., 2022) we grouped following challenges:

## Challenges:

1. Related with the study itself (protocol, site, recruitment)
2. non-related with site – pandemic, political reasons.

Challenges related with the study could be shown like below:

### 1. To prove that the new approach is effective and safe.

Efficacy, safety and efficacy are the first aims of any clinical trial and this is indeed the challenge to prove that the new IMP is more effective and safer than the previous IMP.

### 2. To finance the study Fundraising the study.

Definitely when the study started sometime a company who runs the study could not find the resources to finish the study.

### 3. To involve and keep patients in study.

Recruitment of the patients. Retention of the patients.

Recruitment and retention are pertaining to the patients and both are the big challenge.

### 4. To be always motivated to perform a study.

Motivation to do the study is one of the key drivers inside the site's team, follow the P.G. de Jong (2015) and O. Rengering (2014) the approach when the more dedicated and motivated investigator locally the more recruitment rate will appear. Motivations have to have a leader and it must be a principal investigator.

### 5. Other challenges related with the study:

Many others (regulatory, eligibility criteria, education of staff, diversity)

The most important challenge is the recruitment of patients and retention in the study. The studies which are failed in recruitment of patients are reaching up to 80% (Kelsey M. 2011). Additionally, 85% of trials fail to retain a patient and drop-out rate reached up to 15-30% (Brooks' S. Et al., 2015)

CHALLENGES NON-RELATED with study

- ▶ Pandemic (COVID-19)
- ▶ Disasters
- ▶ political reasons (conflicts)

The challenges in clinical trials partly call a tendency of clinical trials. Of course, the tendencies are the evolution of clinical trials.

Not all the tendencies have a clear determination and description (Lazarus A., 2004, DeSantis, S., 2005, Munroe J., 2004, Ruano G., 2004, FDA, 2006.).

The tendencies now are:

1. Decentralization of the study
2. Implementing the patient-centric and personalized studies
3. Virtualization of the studies
4. Risk-management approach in conducting of clinical trial
5. Implementation of artificial intelligence to the study
6. RWD/RWE approaches
7. Hybridization of the studies
8. Clinical trials with using of Bayesian statistics
9. others

All clinical trials are conducted by the principal investigators and his team even that for the 2021-year number of decentralized clinical trials is increased the "decentralized" does not mean excluding the site or clinical site from the participation. Ed Miseta By Ed Miseta, (2021) Chief Editor, Clinical Leader is saying that centralized studies is dead. Centralized is already can be titled as traditional. Decentralized study is study which are conducted fully or partly out of clinical site.

When conducting the decentralized studies there is a necessity to conduct the protocol procedures out of clinical site – in place of the patients and this causes a regulatory (like form 1572 for out of site nurse), ethical and some other considerations, but the recruitment and retention is very high compared with conventional studies (Adams, S. Et al., 2015)

Patient-centric trials are defined as investigations that prioritize the needs of the patient at all stages, including design, activation, enrollment, data collection, completion and outcome reporting - (Bob T. Li B. et al, 2022) or by other words - Patient-centric studies is the study where the patient is determining the design of protocol in order to make it more comfortable to them

## Virtualized studies

- ▶ Purely this means that studies are done virtually. For example, some sponsor before the run of real studies does the part of aspects virtually.

### Risk-management approach in conducting of clinical trial

- ▶ This approach more spreaded and allow to protocol be very flexible and react to the raised risk in timely manner.
- ▶ **Implementation of artificial intelligence to the study**

The evolution of precise technology to nanotechnology is resulted to implementation of artificial intelligence (AI). AI as of now can track the very small and hardly revealed items related with safety for example. AI also a challenge (Bonner K, 2022)

**RWD/RWE approaches.** Real world data and evidences now are more and more emerging tendencies and allow the patient and the investigator doing their job and simultaneously participating in the study and nurse in these studies also doing their job in ordinary manner.

## Hybridization of the studies

This is the mixture of any described above tendencies in the studies.

## Discussion

Rapid changes in the outlines of the present and future primarily concern global medicine and trends are associated with a shift in focus from illness to general health, patient-centricity, digitalization of medicine (Herzhoff Y., 2022) including artificial intelligence (Bonner K., 2022) and the global strategy until 2030 includes the following goals for improving health - to guarantee universal access, continuity, coverage and quality of care through adequate investments to strengthen health systems and implement effective policies at the national, regional and global levels.

Since the start of clinical research, the first mention of which dates back to the 18th century (Bull J, 1959, Lilienfeld A., 1982), clinical studies were conducted for a long time in the composition - a sponsor, a researcher, which was then joined by an ethical component, and until the end of the 20th century, the scheme included a clinical center where patients were concentrated and basic procedures were carried out.

Currently, the classical scheme has certain modifications associated with the introduction of new technologies and we can talk about the following types of clinical trials (Lazarus A., 2004, DeSantis, S., 2005, Munroe J., 2004, Ruano G., 2004, FDA, 2006, Hekmat R et al., 2021, Wilkinson M., 2018, Blake A. 2022, Li B. Et al.)

- Decentralized Clinical trial
- Personalized Clinical trial

- Hybrid Clinical trial
- Virtual CT
- Bayesian Clinical trial
- Real World Data
- Real Evidence Data
- Artificial Intellect

Also, from the trends in CI, a shift in localization from Western countries to Eastern countries is clearly visible. Miseta E. (2021) cites data that in 2016, 23.6% of all clinical trials were initiated in the USA, and 12.5% in China. In 2018, the ratio was already 21.6% in both countries, and in 2019, the number of initiated clinical trials in China was already 23.7%, while in the US it fell to 20%. In the countries of India, Iran, Japan, Germany, and the UK, the number of new trials increased from 4.4% in 2016 to 10.9% in 2019. The growth of CT in the East is affected by the cost per patient - the cost of a phase 3 study in immuno-oncology in The US is 60 thousand dollars, in China - 25,000.

The trend of the aging of the population as a whole is obvious and, for example, according to estimates in China alone, the number of visits per year of the aging population is 2.2 billion dollars and 50 million visits.

We must also take into account the current epidemiological (Ledford H., 2021, Unger J., et al., 2021, WHO report 2022, NIH report, 2021) and political situations (Dalio R., 2022, Alsumudaie M, 2022, Castaneda C. 2022)

Patient-centricity trends are typical not only for clinical trials, but also for preclinical trials (Taylor N., 2022). However, the patient-centricity of CI has also been criticized (Mermet-Bouvier, P., 2020).

The future lies in blending gaming technology with clinical research (Sinha A., 2022)

Global standardization of CI is also a trend (Koski G. Et al., 2018)

Nevertheless, despite the trends in the virtualization of clinical trials, enrollment of patients remains the prerogative of centralized trials (Miseta E., 2021).

At the end we did not find that role of investigators and site's team changed dramatically and requires revised of the ICH GCP regulations which means that principal investigator and his team is still very important in the challenges of clinical trials - recruitment and contemporary tendencies.

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