Increasing cross-referral and recruitment to clinical trials: a new APProach

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Background/Aims

The Haematology Clinical Research Network of New South Wales & the Australian Capital Territory (HCRN NSW/ACT) comprises public hospital clinical trial unit managers committed to collaboration in clinical research. In June 2013, the HCRN and NSW haematologists launched the ClinTrial Refer Application (App) on iTunes &Google play. This smart-phone and iPad/Tablet tool provided clinicians, research staff & patients with instant knowledge of our currently recruiting trials, and was associated with an immediate increase in inter-hospital cross referrals of patients for trials. We aimed to measure this increased referral and trials recruitment, and create a not-for-profit template App transferrable to other trial portfolios.

Methods

Cross-referral, recruitment and staffing data were obtained from each of the 19 contributing hospitals from Jan 2012 to Dec 2016. Modified versions of the App were created with other cancer networks, establishing search functions unique to each network's geography and/or tumour stream. Newly derived Apps had to conform to the specifications of ClinTrial Refer, including being publically available, free to download, and hosting only publically listed data of current recruiting trials.

Results

There was an immediate and sustained increase in cross referrals for haematology clinical trials: median 1 (range 0-6) to 8/month (4-19), Figure 1a, across NSW/ACT, a state-wide 63% increase in recruitment from 386 patients in 2012 to 612 in 2016, Figure 1b, and a 60% increase in unit staffing from 36.8 staff in 2012 to 59.0 staff in 2016.

Fourteen other Australian haematology/other cancer Apps, a New Zealand haematology and French lymphoma App have since been derived from the original. Re-design for the needs of each network ranged from a simple re-configuration of the logo, splash screen and recruiting locations to providing mutational status or age criteria. The back-end database of listed trials, selection criteria and recruiting sites can be instantly updated ensuring currency of trial information. The early adopters within other cancer research networks have reported a similar increase in trials recruitment. Recognising ClinTrial Refer as an effective tool for patients to identify recruiting trials close to home, cancer consumer groups have posted the Apps on their websites.

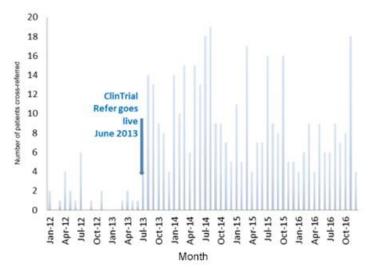


Figure 1a

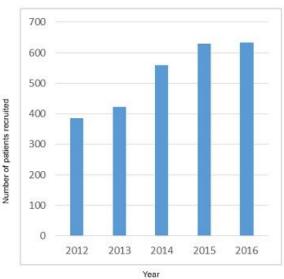


Figure 1b.

Conclusions

An instantly accessible, simple smartphone Application in the clinician and study coordinators' pockets has provided better knowledge management of local trials across the spectrum of haematology malignancies. A tool to facilitate collaboration in clinical research, it has significantly enhanced cross-referral and recruitment, increasing patient access to emerging therapies and supporting the viability of haematology trial units across Australia and beyond. ClinTrial Refer has been rapidly adapted to suit the trials portfolios of other clinical trial networks.