ACCELERATING ENROLLMENT FOR CLINICAL STUDIES

A Schizophrenia Case Study on AutoCruitment's Comprehensive Qualification Services Capabilities

Schizophrenia, a complex and often debilitating mental health condition, affects approximately 3.6 million people in the United States. Despite the large population, recruiting participants for schizophrenia clinical trials poses unique challenges. The symptoms and severity of the condition can significantly impact individuals' behaviors, making it difficult to engage and qualify potential participants.

This case study explores how AutoCruitment successfully addressed these challenges through a targeted, multi-faceted approach that accelerated enrollment and improved patient qualification outcomes.

ACCESS: REACHING A CHALLENGING POPULATION



Schizophrenia's impact on individuals' cognitive and social functioning often makes traditional recruitment methods less effective. Recognizing this, AutoCruitment implemented a direct-to-patient strategy, leveraging digital channels to place clinical research opportunities directly in front of a large and relevant audience of individuals with the condition as well as their caregivers.

In a remarkably short period of just over a month, this approach successfully engaged 79,000 people interested in pursuing a clinical trial.

This rapid and extensive outreach was a crucial first step in overcoming the barriers associated with recruiting this difficult-to-reach population.

INSIGHTS: DEEP QUALIFICATION THROUGH CUSTOMIZED SCREENING



While access to potential participants is critical, the next challenge lies in effectively qualifying these individuals for the study. For this schizophrenia trial, rigorous criteria were established to ensure that only the most suitable candidates proceeded to the next stage. AutoCruitment developed a customized online screener tailored to the clinical and symptom-based criteria of the study.

The study also required assessments of psychosocial and environmental factors, such as stability in living arrangements, which could not be fully captured through an online screener alone. To address this, AutoCruitment incorporated Registered Nurses into the recruitment and qualification process. These medical professionals were instrumental in discussing complex medical histories with potential participants and evaluating the additional factors impacting qualification. Their involvement was particularly valuable in easing the concerns of participants, many of whom experience paranoia as a symptom of schizophrenia, by providing reassurance that they were speaking with a knowledgeable and trustworthy medical professional.

As a result of this thorough and personalized approach, 417 well-qualified patients were referred to the study sites for screening visits.

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EFFICIENCY: SUPPORTING SITES AND PATIENTS FOR OPTIMAL OUTCOMES



Efficiency in recruitment is not just about rapid engagement but also about supporting both patients and clinical sites throughout the enrollment process. AutoCruitment's engagement services team acted as an extension of the study sites, providing continuous support to both sites and patients. This collaboration was especially effective in a study with multiple arms, where two of the study arms closed enrollment early. AutoCruitment successfully re-engaged approximately 36% of patients for screening into the third arm, ensuring that valuable candidates were not lost due to the closure of other arms.

The impact of AutoCruitment's support was evident in the feedback from the sites involved. Over 85% of the sites expressed a desire for continued support with patient referrals, and more than half requested ongoing engagement support from AutoCruitment.

RESULTS

79,000 Patients Interested

417 Patients Referred to Sites

36% of Patients Re-Engaged

85% of Sites Requested Continued Support

36% of Patients Re-Engaged

Recruitment Timeline Reduced by 32%

AutoCruitment Contributed 30% of Randomized Participants

AutoCruitment

IMPACT: ACHIEVING SIGNIFICANT OUTCOMES IN A SHORT TIMEFRAME

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Qualified Patients Referred



Decreased Recruitment Timeline



Randomization Contribution