AutoCruitment

CASE STUDY

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GLOBAL TOURETTE'S SYNDROME STUDY

Enrollment Recovery in 5 months

EXECUTIVE TAKEAWAY: Enrollment recovery through patient quality, site capacity alignment, and real-time optimizations.

ENROLLMENT AT RISK

Despite activating 60 sites across the United States, Germany, and Spain, enrollment progress lagged far behind projections. The study faced a limited pool of eligible adult patients, strict eligibility requirements, and low patient awareness of clinical trial participation.

Recruitment efforts relied heavily on site-driven outreach, placing additional strain on already overburdened research teams. As referral volume remained low and screen failures increased, sites lacked the time and resources to conduct proactive recruitment, further slowing enrollment.

With more than 70% of randomizations remaining and only a couple of months left in the enrollment window, the study had no room to absorb delays—putting timelines, budget, and overall study success at risk.

THE SITUATION (AT A GLANCE)

- Study Status: 14 months behind schedules
- Time Remaining: 5 months
- Enrollment Target: 140 patients
- Enrolled at Intervention: 46 patients
- Geography: United States, Germany, Spain
- Sites: 60 active sites

Severe enrollment risk with no remaining buffer for delays.

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ENROLLMENT CHALLENGES

As enrollment progressed, several compounding challenges emerged:

- Limited eligible patient pool
- Strict eligibility and washout requirements
- Low patient awareness
- Site capacity constraints
- Delayed visibility into performance

WHAT DROVE THE RESULTS

- *Protocol-Specific Online Screeners*
- *Registered Nurse Led Second-Line Screening*
- *Human-Centric Patient Messaging*
- *Local-Language Engagement*
- *Real-time Performance Optimization*

THE RESULTS

84 of **117**
Enrolled Patients from

3.55x
Enrollment Growth
33 ⟶ 117

12.73 Months
Recovered on the Timeline