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Do people prefer to participate in a clinical trial from home?

A discrete choice experiment in persons living with type 2 diabetes mellitus

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Purpose

To determine the preferences and trade-offs for participation in clinical trials with different decentralisation levels in persons with type 2 diabetes mellitus.

Background

- Decentralised clinical trials (DCTs) move trial activities to the participants' direct surroundings and promise to overcome some of the challenges faced by conventional clinical trials.
- There is no evidence available on what potential trial participants prefer regarding trial designs.
- This knowledge is important to design future trials more patient centric, less burdensome and ultimately improve trial conduct.

Methods

- A discrete choice experiment (DCE) was conducted in three countries:

🇳🇱 N = 276 🇦🇹 N = ~265 🇩🇪 N = ~244

- Participants were asked to complete a survey with 16 DCE choice tasks and background questions.
- Each choice task comprised of three options: two trial options described by six attributes and an opt-out option.
- Panel Mixed Multinominal Logit models were used in the interim data analyses.

Results

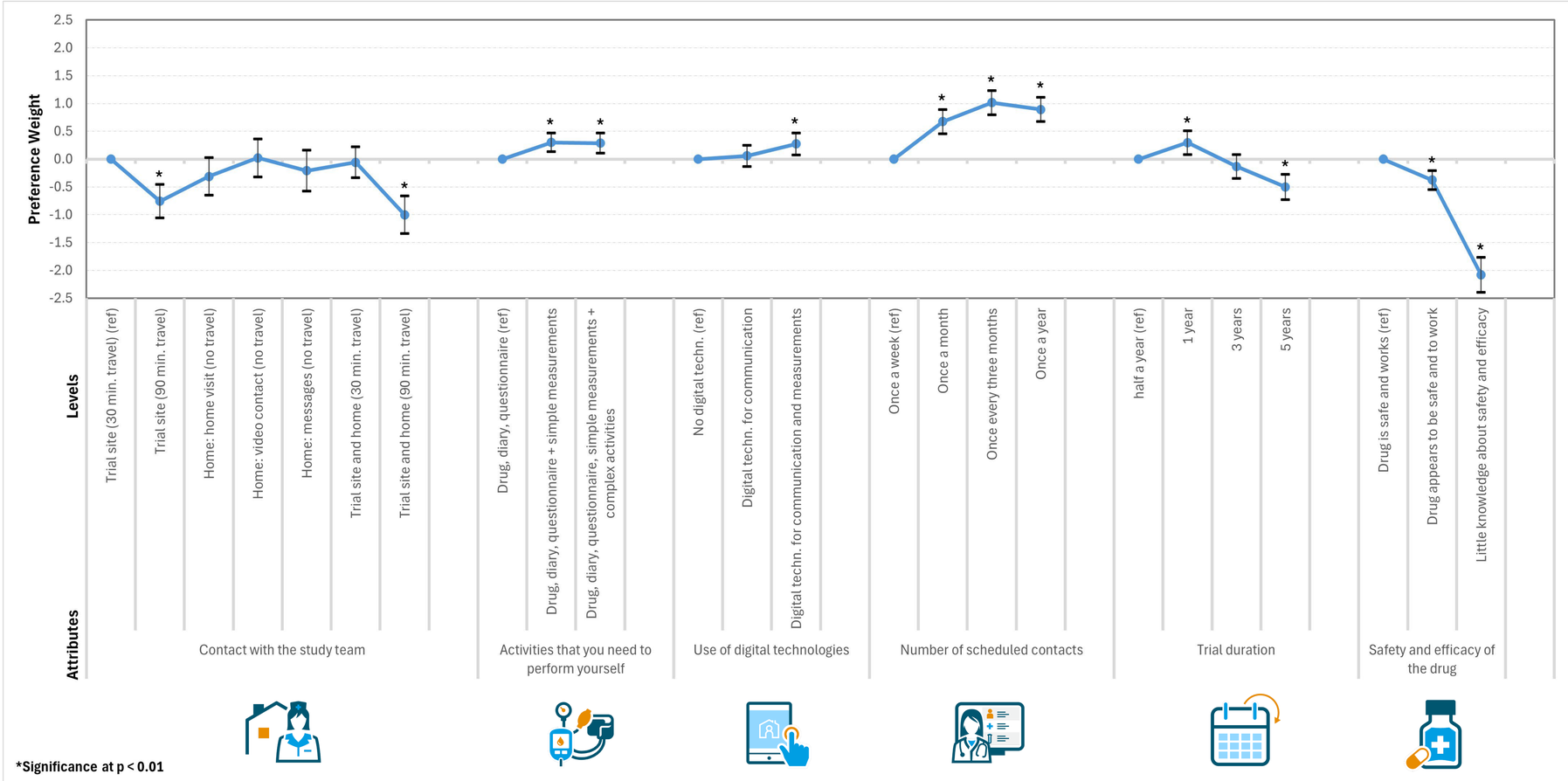

Figure 1: Attribute preference weights

Interim results on the Dutch population

- 39% female
- median age: 66 years [IQR: 58-71]
- 19% had trial experience
- Trial participation was preferred over opting out (mean coefficient: -0.354) (Figure 1)
- Relative attribute importance is given in Figure 2
- Preference heterogeneity was significant for all attributes

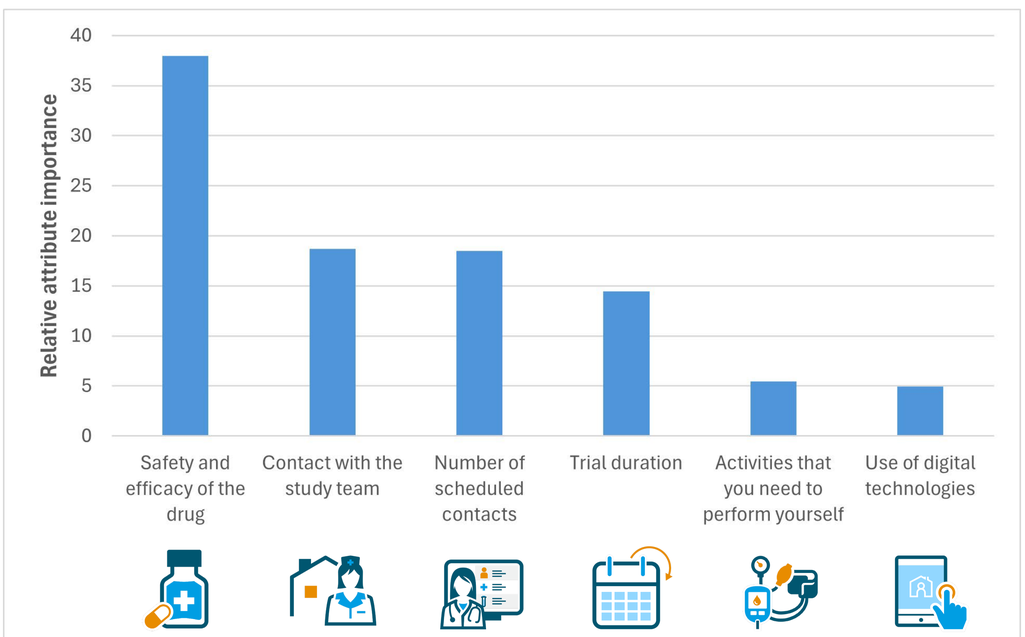

Figure 2: Relative attribute importance

Conclusion

- ✓ Safety and efficacy of a drug was the most important attribute for Dutch respondents when deciding whether to take part in a trial relative to the other attributes.
- ✓ Further analyses will be performed to investigate preferences in certain subgroups and to predict the uptake of more decentralised trial scenarios.
- ✓ Next steps: finalise analyses of DCE data for all three countries.

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