



# Impact of COVID -19 Crisis for Clinical Trials

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- **Continuing Clinical Trials – Ethical discussion**
- **Continuity and Contingency Plan – Example of what we are doing now**
- **Ensuring Stability & Infrastructure for sites – Today and Tomorrow**

# Continuing Clinical Trials – Ethical discussion

## **FDA Guidance...Covid-19**

### **Local and State Orders / Regulations**

#### **Continue ongoing trials and subjects**

- FDA Guidance clearly allows discretion to continue ongoing subjects and does not prohibit continuing enrollment of new subjects.
- We have an ethical obligation to participants, and to the integrity of the trial.

#### **Enrollment of new subjects (many, but not all studies)**

- Often, the only health care option of many subjects / patients
- Implement specific procedures for maximizing the safety of subjects
- Implement specific procedures for maximizing the safety of clinical research personnel

#### **Preservation of Clinical Research Personnel / Sites – “minimize risk to trial integrity” (FDA Guidance)**

- A prolonged delay (>2-4 weeks) of enrollment will have severe adverse consequences on continuity of research personnel and the overall quality of research operations
- Relieve burden to other health care settings (some evidence of increase subject participation), Mental Health service closures.

# Continuity and Contingency Plan – Example of what we are doing now

## **Robust implementation – Pre-Office Visit Screening**

- Volunteers are contacted prior to coming into office
- Drivers / transportation controls

## **Participant Distancing – Outpatient and Inpatient**

- Volunteer distancing prior to entering clinic
- Volunteers *“Participant Distancing Rooms”*.
- Face to Face prep first via *“On-Site Video Communications”*
- Clinical assessments required are conducted by sponsor approved & trained clinicians as usual. Solution, *“Participant Distancing Rooms”* and *“On-Site Video communications”*

## **Safety, Secure, Study data, collected by expert sites**

- Inpatient studies we can provide 100% observation and 100% control over volunteer distancing.
- Staff are issued a badge with their credentials and name of company we are essential business and is proof of site staff member’s necessity to travel to work.
- We want to get the message across , we can help with the collaboration as site with pharma

# Ensuring the Stability & Infrastructure of Sites - Today and Tomorrow

## Feedback from Sponsors on Current Situation and Future Impact

- Difficult decisions
- Confusion around next steps
- Economic instability impacts all stakeholders at some level
- ***Clinical research sites are “critical” to the Eco-System!***

## Financial Impact of Sponsor Decisions

- Industry panic
- Increases site costs
- Screening halted & new study delays = new revenue shutdown leading to potential cash crisis in ~30-60 days
- Remote monitoring & confines of existing contractual obligations
- Overhead is overhead . . . . Your study hold doesn't effect sites' monthly bottom line

## Increase Costs associated with site modifications & accommodations are real and include:

- Short-Term: Staff childcare, PPE, Increased Transportation, etc.
- Long-Term: IT infrastructure accommodations

# Ensuring the Stability & Infrastructure of Sites - Today and Tomorrow

## Key Considerations:

- Impact of “Screen Holds” on studies with active patients
- Initiating new studies based upon site preparedness - possibly in waves
- Allowing for confinement at sites with capacity to control environment/minimize exposure
- Improving cash flow by ensuring monthly payments continue (on time)
- Modifying contractual terms to ease burden (Terms, Timing, Holdbacks)
- Re-establishing advance payments TO SITES on all studies (ongoing and new)

***Small concessions by industry can “Ensure the Stability & Infrastructure of Sites”!***



# Contributors

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