

# 'START' (Start-up Time And Readiness Tracking) Study

Working Group

FINAL REPORT

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*Boston, MA*

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**Tufts Center for the  
Study of Drug Development**

**TUFTS UNIVERSITY**

# Executive Summary

- **The majority of companies have no centralized study start-up teams or department in place.**
  - Those that have teams are staffed with an average of 6 FTE, have been in existence for about one year on average, and report into clinical operations.
- **Overall perceptions are that study initiation cycle times can be somewhat shortened and that shorter study initiation cycle times are very important to each company.**
- **All companies reported the existence of initiatives to speed up study initiation.**

## Executive Summary *(continued)*

- Each participating company initiated 87 Phase I-IV studies on average in 2011.
- In general, the most commonly utilized sites are those that are run by an independent researcher/physician as well as those that are affiliated with an academic institution.
- North America and Western Europe had the largest number of sites utilized per study.
- Overall, benchmark percentage of sites enrolling, percentage of sites non-enrolling, and percentage of sites dropped after initiation are 84%, 16%, and 14% respectively.

## Executive Summary *(continued)*

- **Companies varied in the sequence of activities completed prior to enrolling first patient in.**
- **The early stages of the site initiation process are areas where companies can potentially improve upon.**
  - “PSV” to “Contract Execution” accounts for the majority of cycle time
  - Little variation observed from “Contract Execution” to “First Patient In” across TA, type of site, and geographical region
- **Large variances in stages of the site initiation process might indicate that companies are not managing the process consistently.**

## Executive Summary *(continued)*

- **Benchmark areas with *HIGHEST* variance:**
  - Protocol Approval to 25% Approved Sites Initiated
  - 50% to 100% Approved Sites Initiated
  - Pre-Visit to Contract/Budget Sent
  - Contract/Budget Sent to Contract Execution
- **Benchmark areas with *LOWEST* variance:**
  - 25% to 50% Approved Sites Initiated
  - Contract Execution to Site initiation
  - Site Initiation to First Patient In
- **Benchmark time from “Regulatory Submission” to “Regulatory Approval” was 2.8 months**
  - CNS studies require the most time to approval for patient enrollment
  - North America has the shortest time to approval

## Executive Summary *(continued)*

- **Oncology and CNS therapeutic areas represented the longest cycle times to first patient in.**
  - 12.6 months for oncology and 12.2 months for CNS/Neuroscience
- **Academic institutions and government funded sites took longest to enrolling first patient in, while physician practices were fastest.**
  - 13.0 months (academic) and 12.6 months (government) vs. 7.2 months (physician practices)
- **Cycle time (to first patient in) in Latin America was more than twice that of North America.**
  - 16.1 months in Latin America vs. 7.4 months in North America

# Study Methods

- **Phases I-IV**
- **Enrollment completed between 2008 and 2011**
- **Therapeutic Areas:**

Cardiovascular	Metabolics/Endocrine
Dermatology	Oncology
Gastrointestinal	CNS/Neuroscience
Hematology	Respiratory
Immunology	Transplant
Infectious disease	Other
- **Type of data collected:**
  - Company information, department structure, and overall perceptions
  - Study characteristics and metrics
    - **n= 105 studies**
      - » 21 Phase I
      - » 35 Phase II
      - » 36 Phase III
      - » 13 Phase IV
    - Site level metrics
      - **n= 5296 sites**
    - Country level metrics
      - **n= 774 submissions**
- **Study supported by an unrestricted grant from goBalto, Inc.**

# COMPANY INFORMATION AND DEPARTMENT STRUCTURES



# Working Group Companies and Study Start-Up Teams

- **General Trends:**
  - Large pharma/biotech
  - Majority of companies have **NO** dedicated start-up team
  - Study teams report into Clinical Operations
    - If no team, start-up handled by study teams
  - Average group size is 6 FTE; average age of team is one year
  - Overall perceptions:
    - study initiation cycle times can be somewhat shortened
    - shorter study initiation cycle times are very important to each company

# Company Challenges

Greatest challenges in initiating a study?

- Contract/Budget Negotiation
- Regulatory requirements
- Protocol amendments
- Site/country selection
- Resourcing/Site training/site experience
- Study materials

# Perceptions about the Study Start-Up Process

What organizational resources or process changes would speed study initiation?

- More streamlined and data-driven site selection
- Electronic document/workflows and visibility
- Protocol Development
- Contract Negotiation
- Clearly integrated CRO/Sponsor processes

# STUDY CHARACTERISTICS

# Characteristics of Study Data Provided by Participating Companies

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Phase II or III

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Chemical; Oral

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Adult; Adult and Senior

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33 eligibility criteria

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29 unique; 161 total procedures

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42 months of treatment; 14 treatment visits; 11 procedures/visit

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Enrollment timeline is 15 months

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Actual enrollment timeline is equal to planned timeline on average

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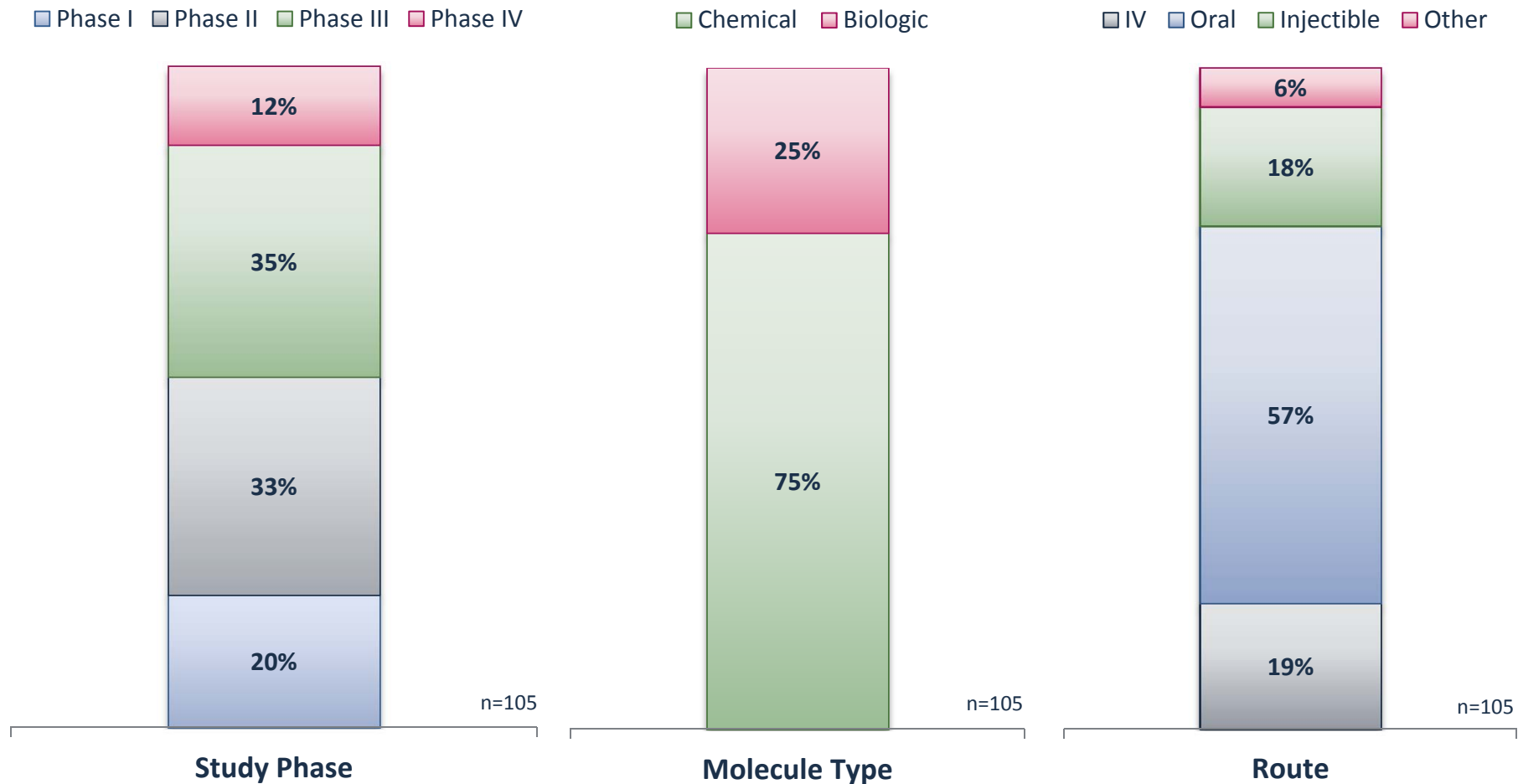
North American study sites

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620 patients screened; 420 enrolled; 280 completed

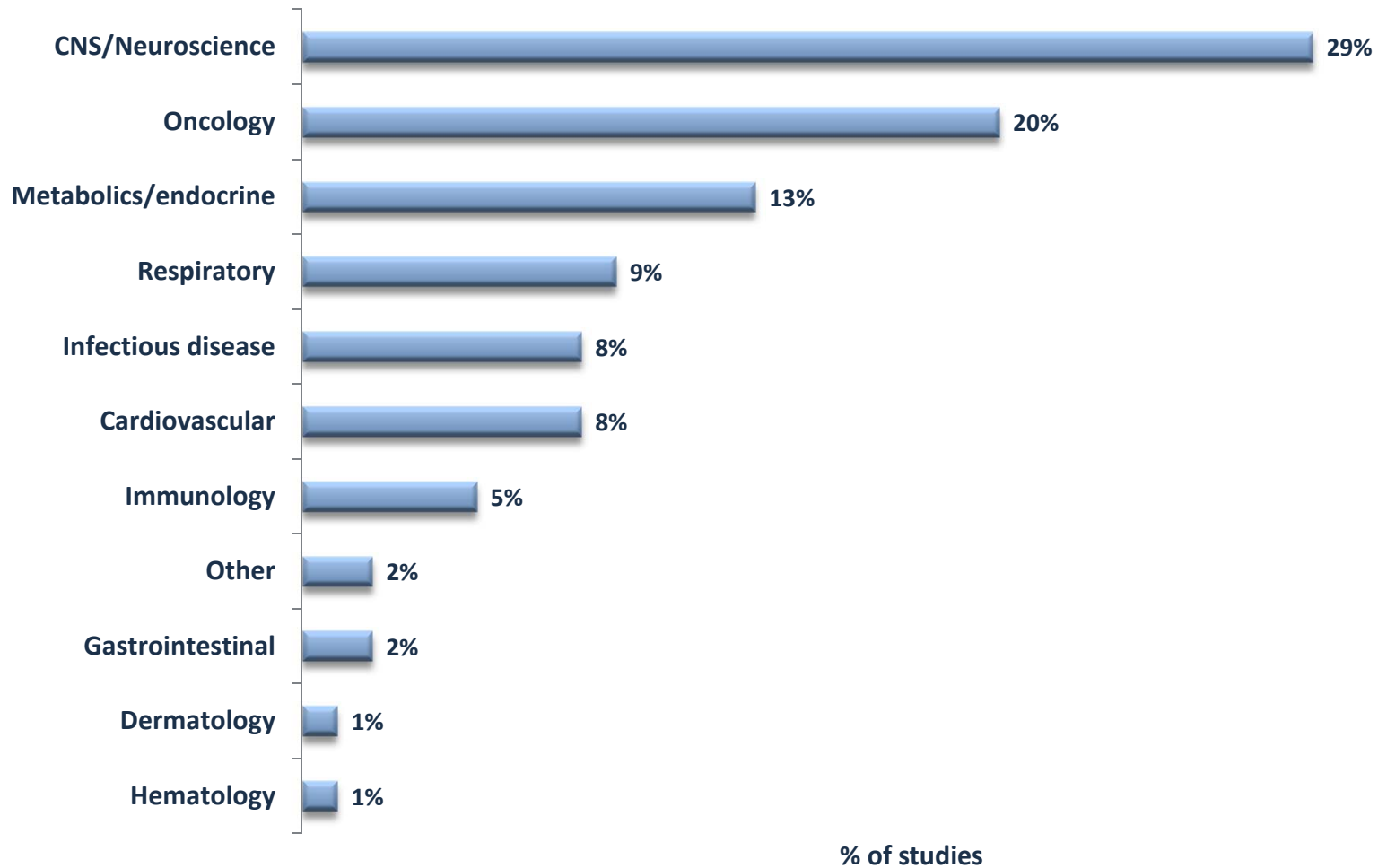
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# Study Phase, Molecule Type, and Route of Administration

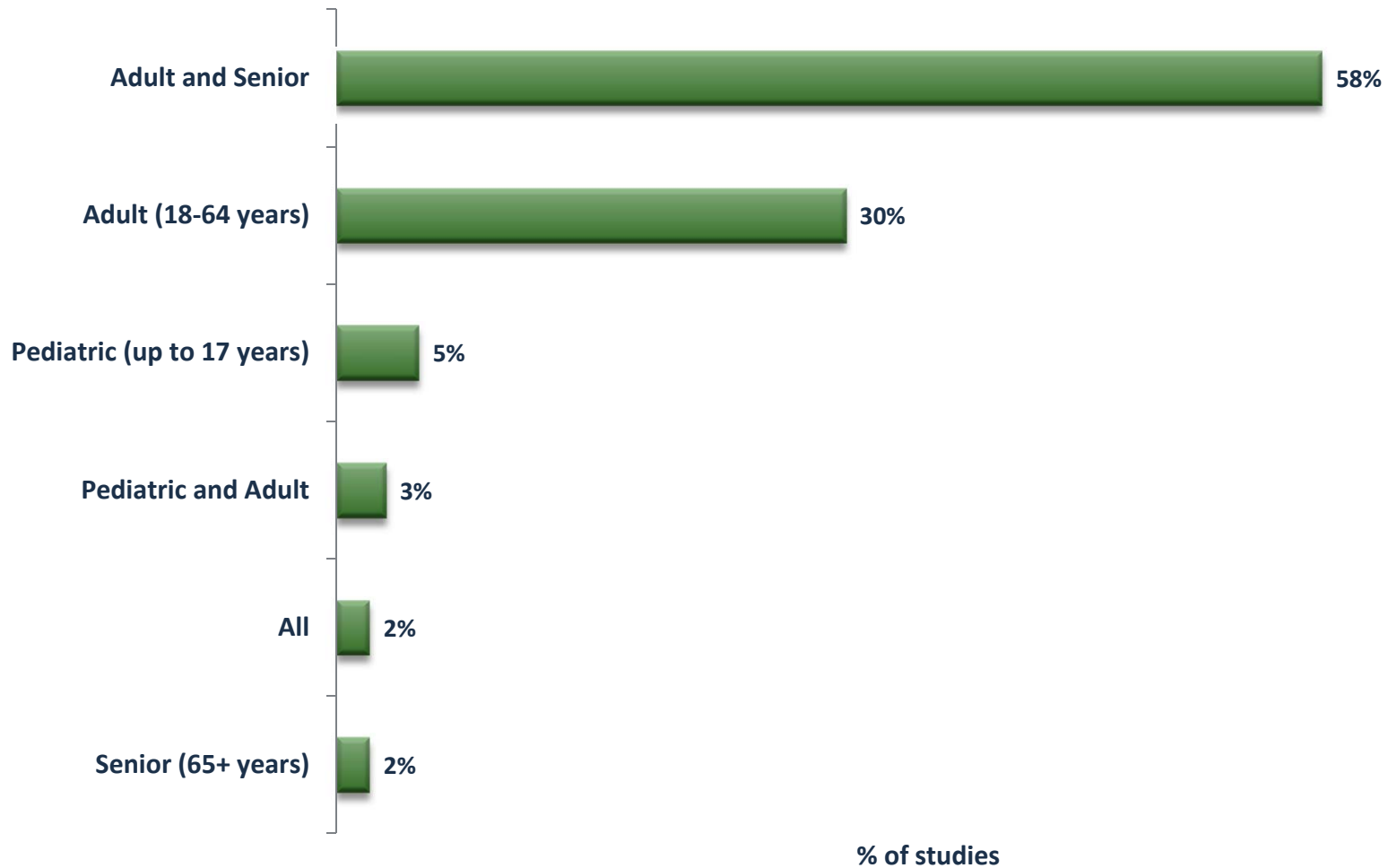


**NOTE:** Majority of Phase I studies did not involve “healthy” patients

# Study Therapeutic Area



# Age Group of Study Patients





# Treatment Procedures and Visit Frequency by Phase

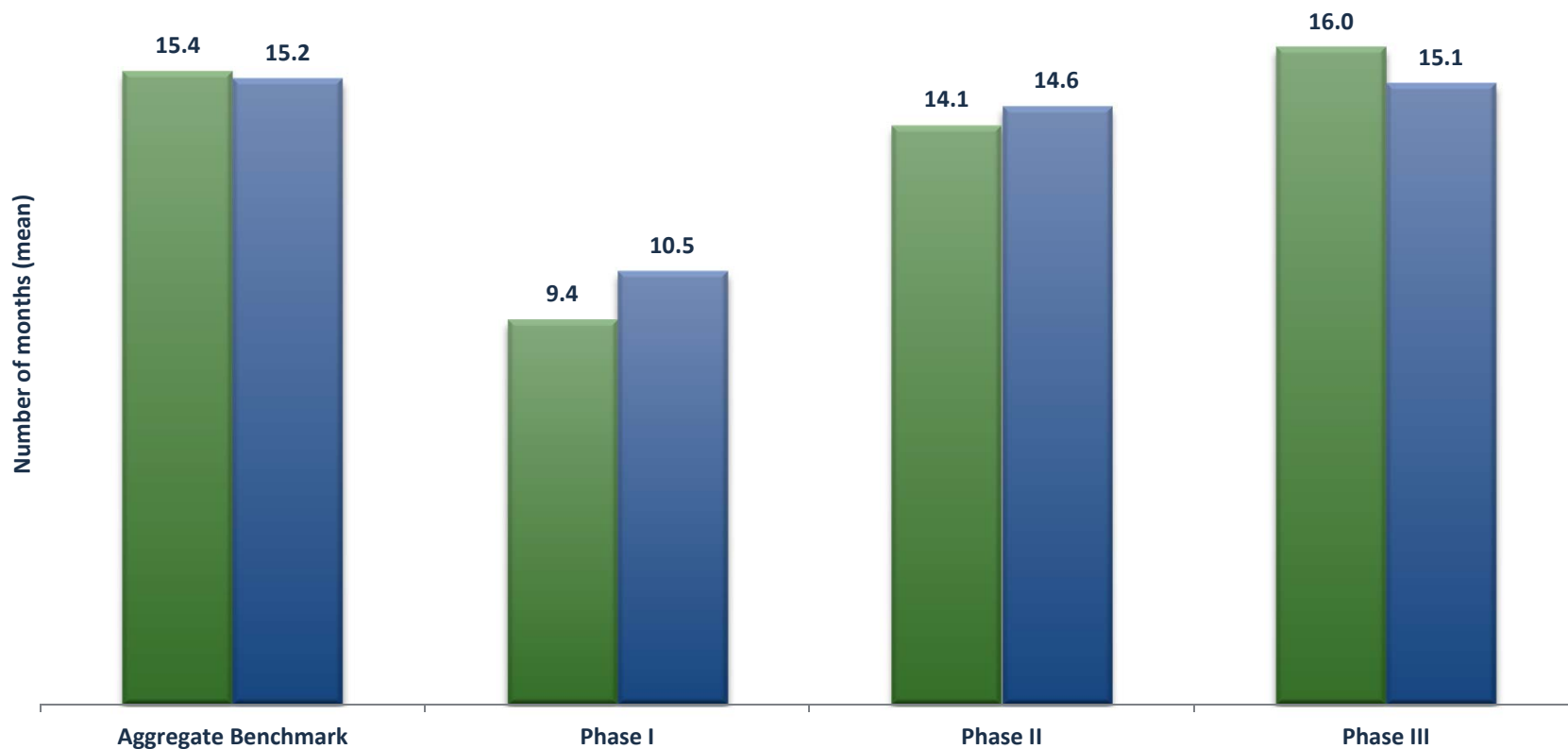
	Phase I (n=18)	Phase II (n=34)	Phase III (n=34)	Phase IV (n=11)	Aggregate Benchmark (n=80)
# of Eligibility Criteria (mean)	32.6	33.6	31.4	33.4	<b>32.6</b>
# of Unique Procedures (mean)	20.8	27.9	30.8	27.7	<b>29.1</b>
Total Procedures (mean)	83.9	124.9	198.7	154.7	<b>161.3</b>

	Phase I (n=18)	Phase II (n=33)	Phase III (n=33)	Phase IV (n=11)	Aggregate Benchmark (n=78)
Length of Treatment in months (mean)	9.6	26.5	60.7	37.8	<b>42.7</b>
# of Treatment Visits (mean)	8.6	9.2	19.2	16.7	<b>14.6</b>
# of Total Procedures per Visit	9.7	13.5	10.3	9.3	<b>11.0</b>

NOTE: Aggregate benchmark excludes Phase 1

# Enrollment Timelines by Phase

■ Actual Enrollment Timeline    ■ Predicted Enrollment Timeline



Change in  
timeline

**101%**  
n=70

Phase I

**89%**  
n=22

Phase II

**97%**  
n=35

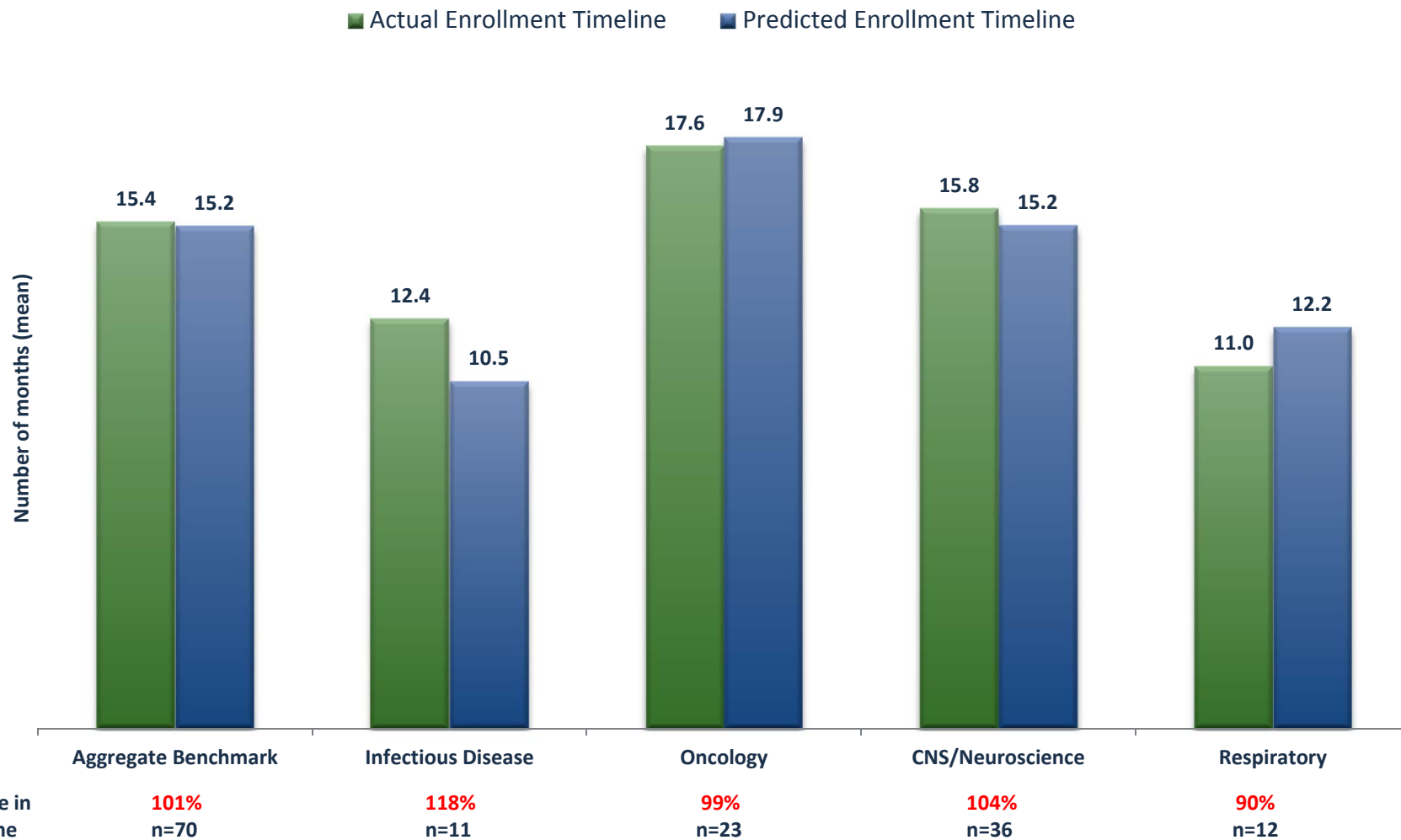
Phase III

**106%**  
n=34

NOTE: Aggregate benchmark excludes Phase 1

% Change in timeline = actual timeline/planned timeline

# Enrollment Timelines by TA

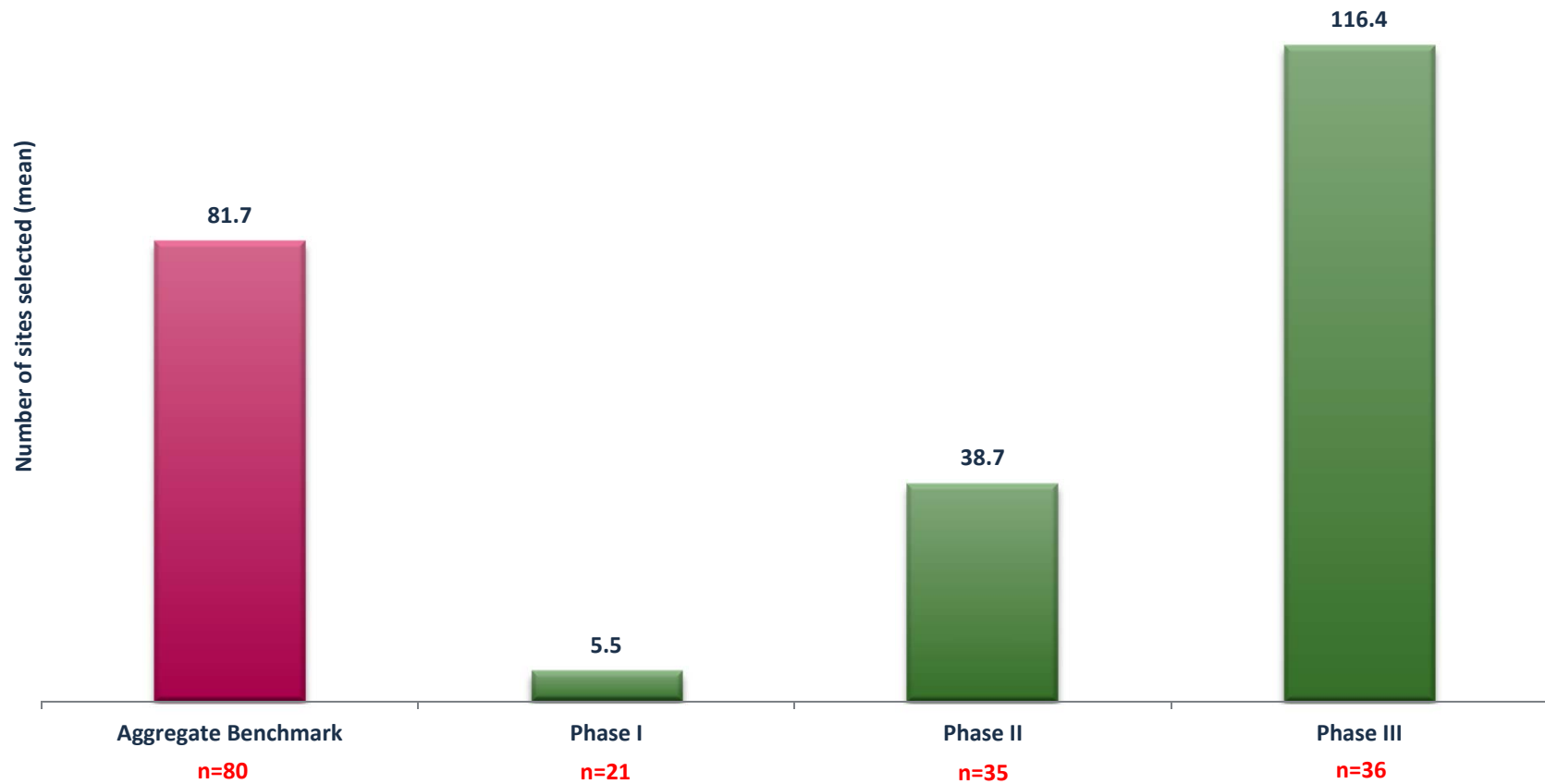


NOTE: Aggregate benchmark excludes Phase 1

% Change in timeline = actual timeline/planned timeline

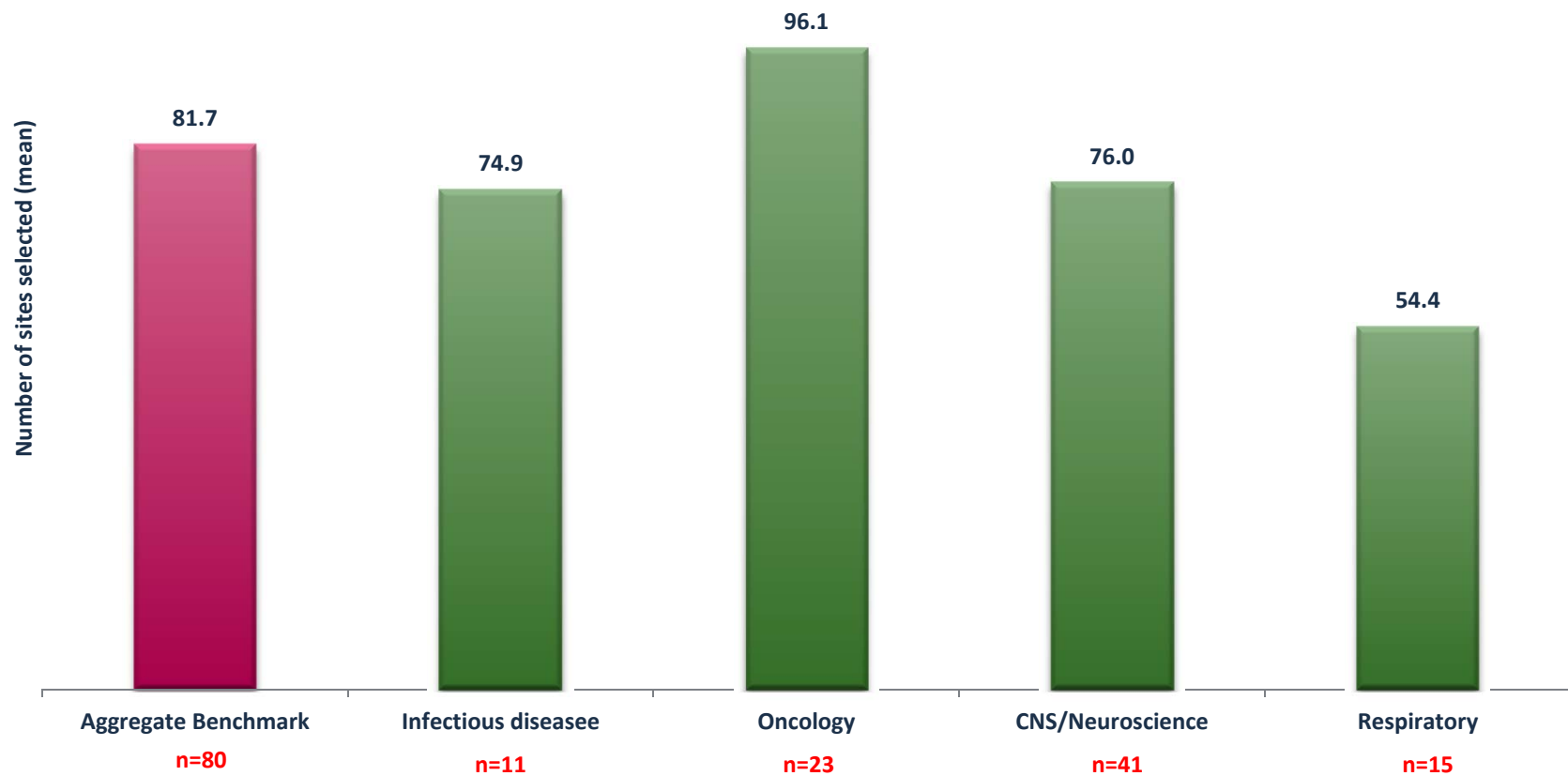
# STUDY LEVEL METRICS

# Site Selection by Phase



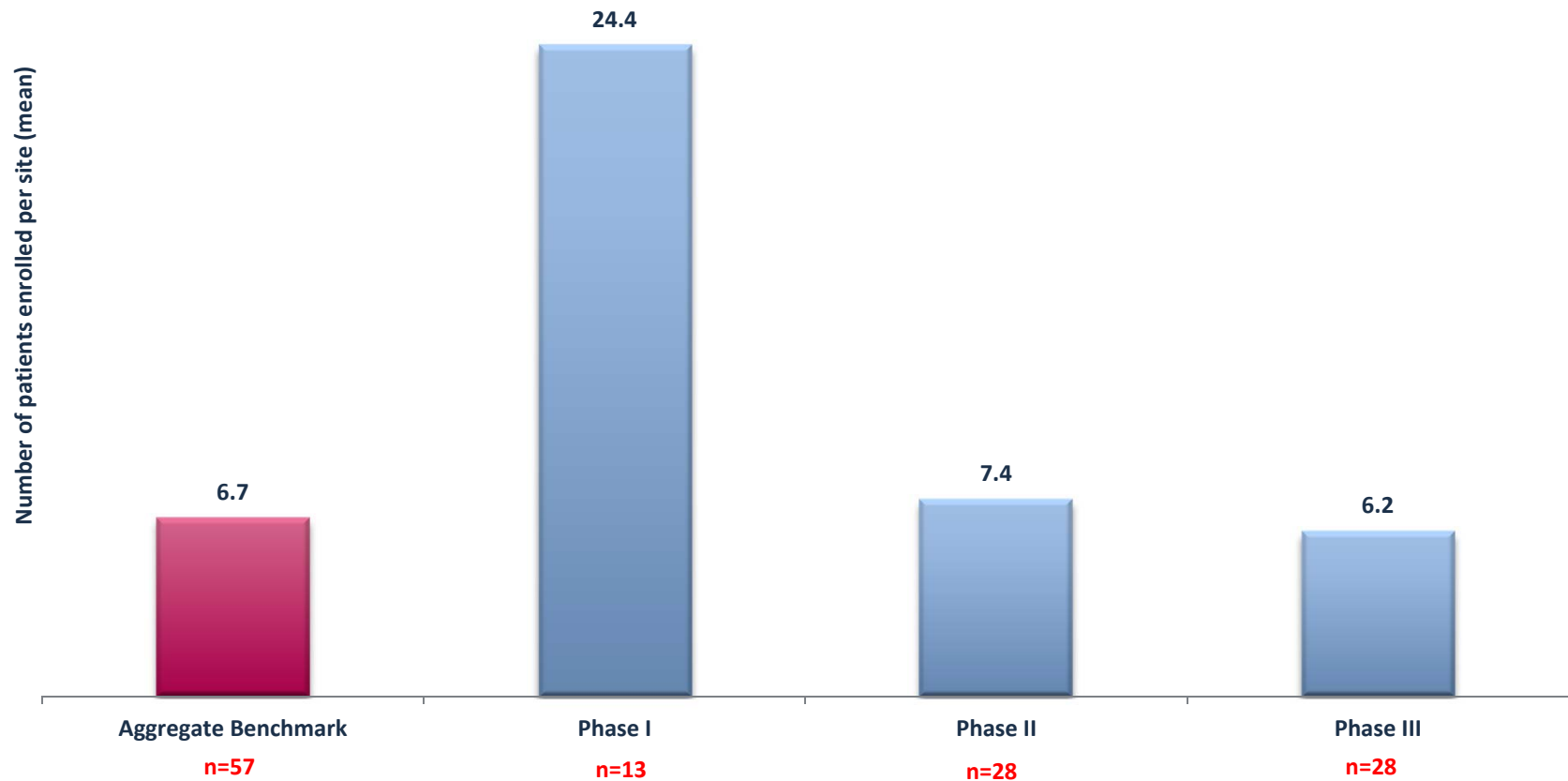
NOTE: Aggregate benchmark excludes Phase 1

# Site Selection by TA



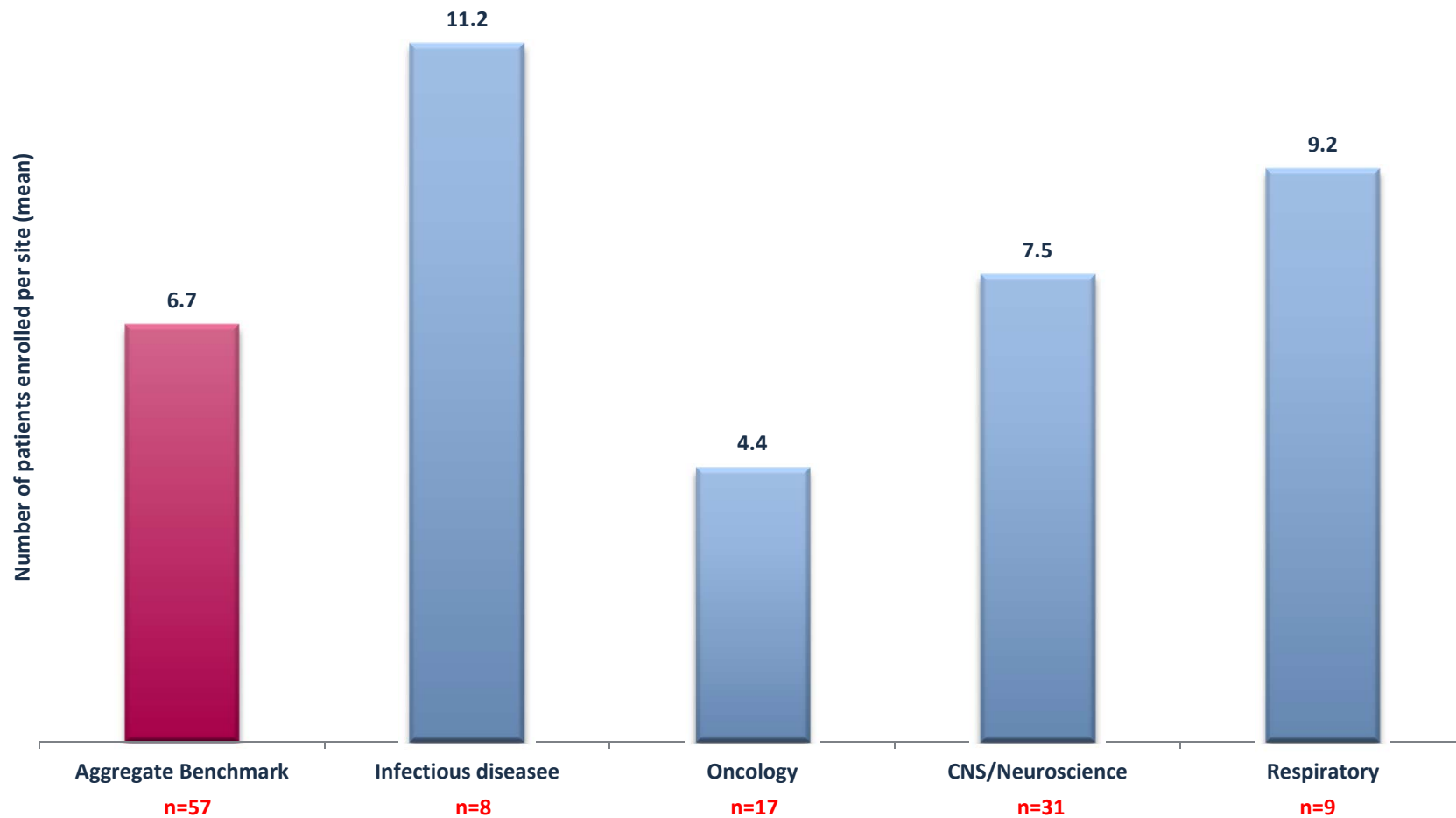
NOTE: Aggregate benchmark excludes Phase 1

# Patients Enrolled per Site by Phase



NOTE: Aggregate benchmark excludes Phase 1

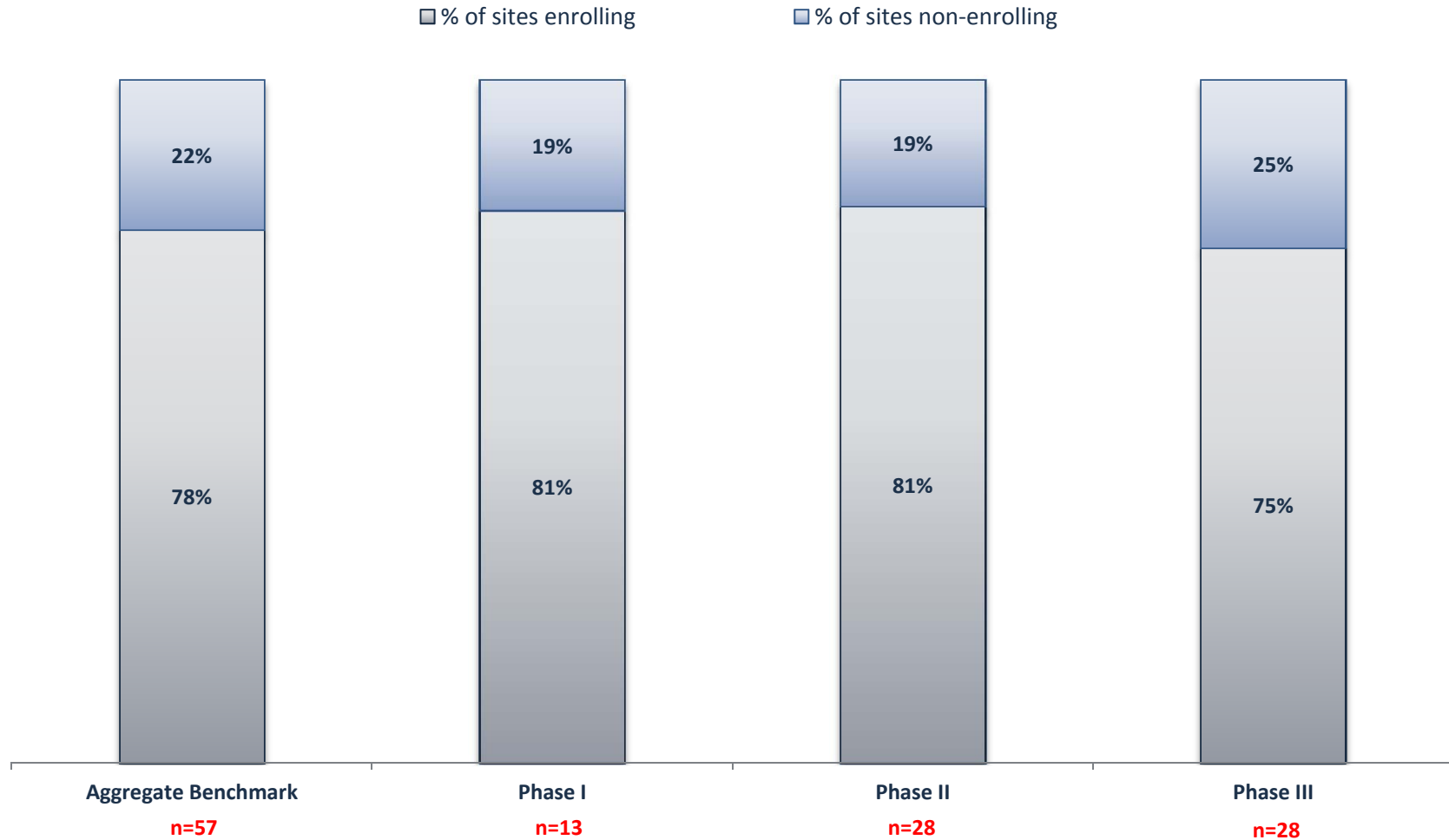
# Patients Enrolled per Site by TA



NOTE: Aggregate benchmark excludes Phase 1

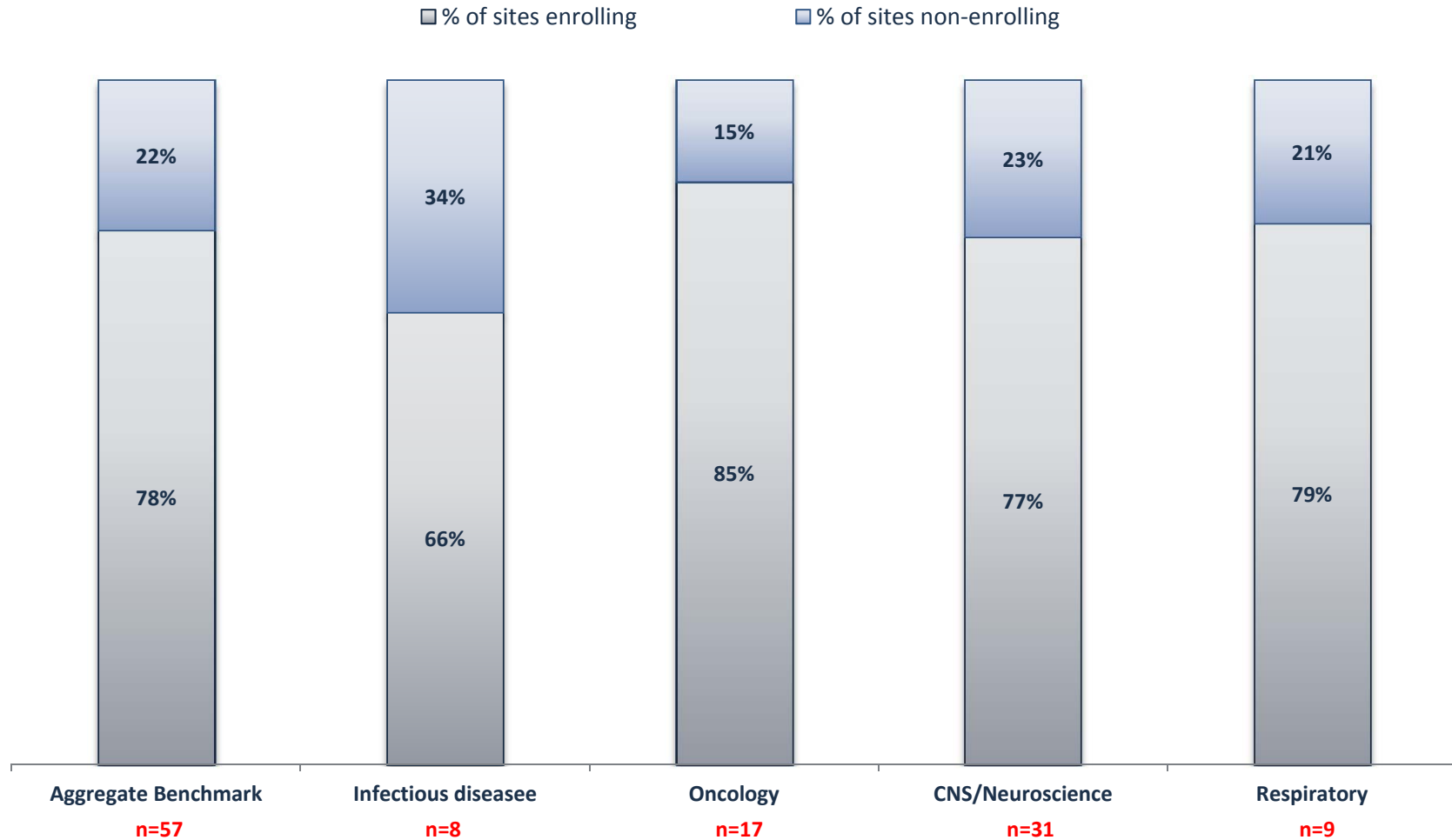


# Site Breakdown by Phase



NOTE: Aggregate benchmark excludes Phase 1

# Site Breakdown by TA



NOTE: Aggregate benchmark excludes Phase 1

# Site Initiation Timeline



\* Interpret with caution due to low number of data points

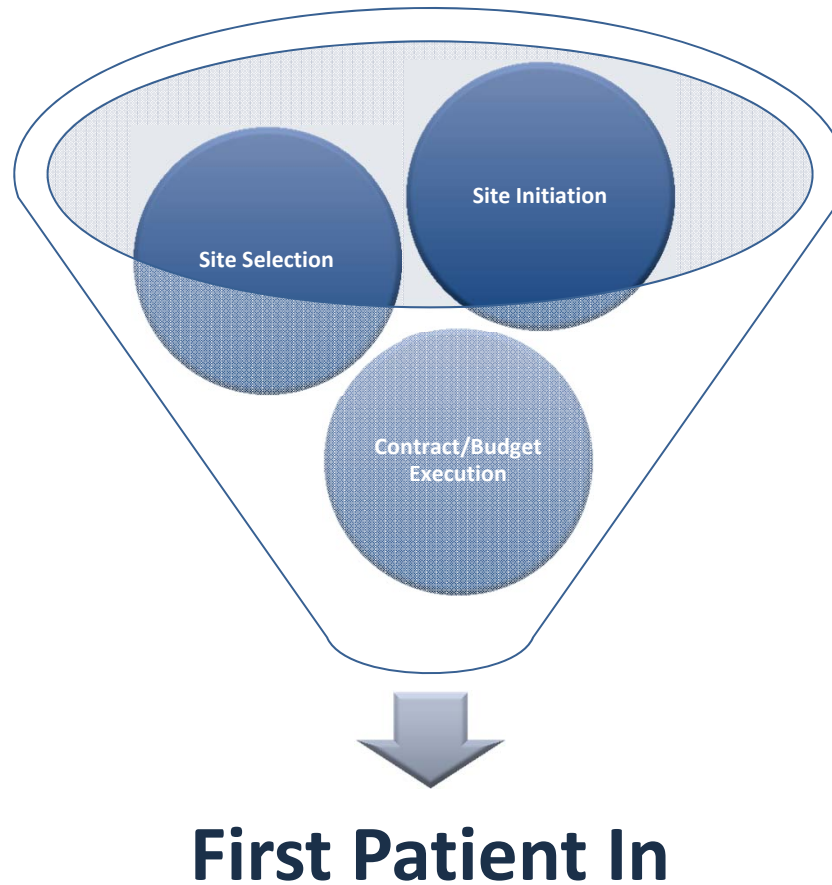
# Site Initiation Timeline by TA



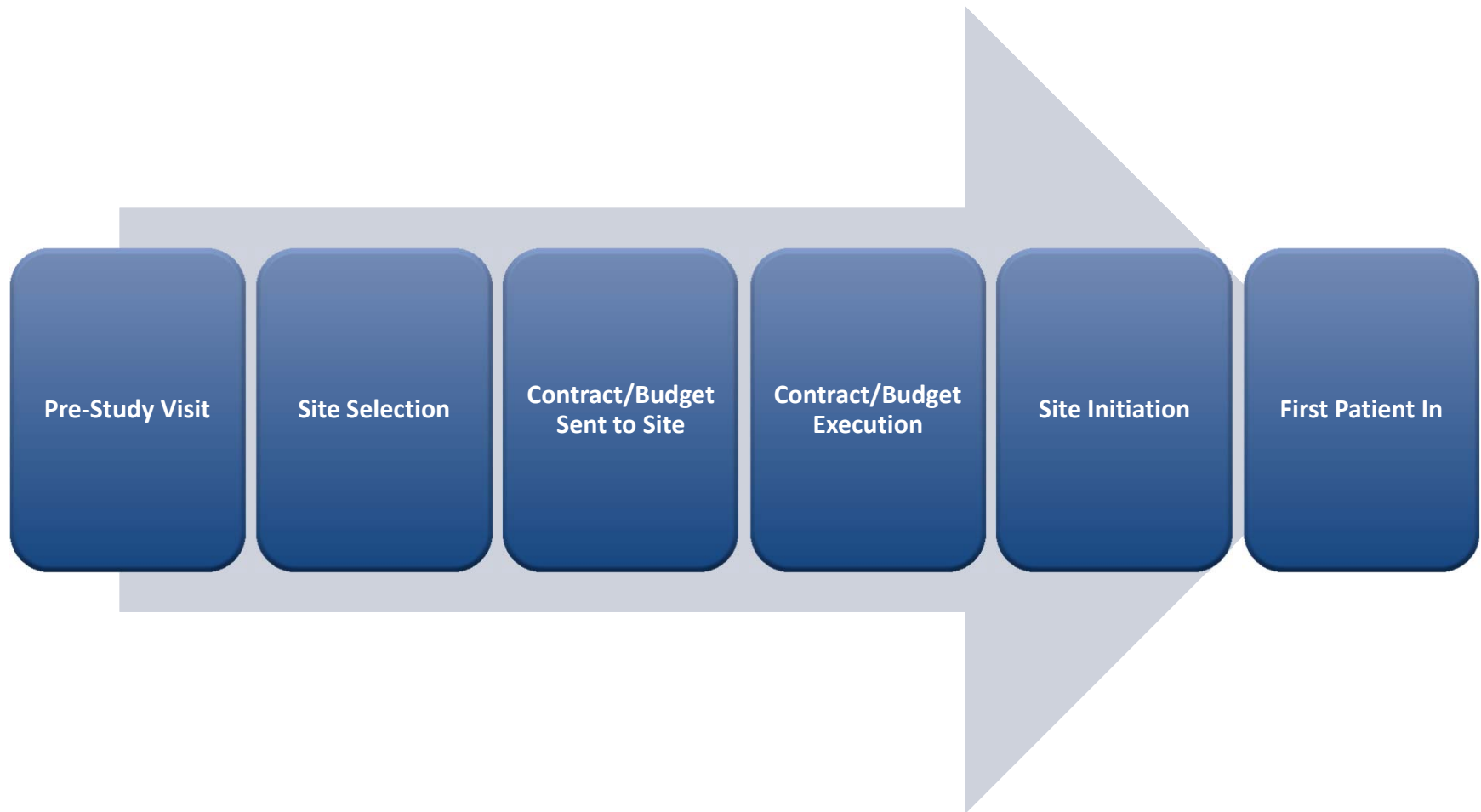
\* Interpret with caution due to low number of data points

# SITE LEVEL METRICS

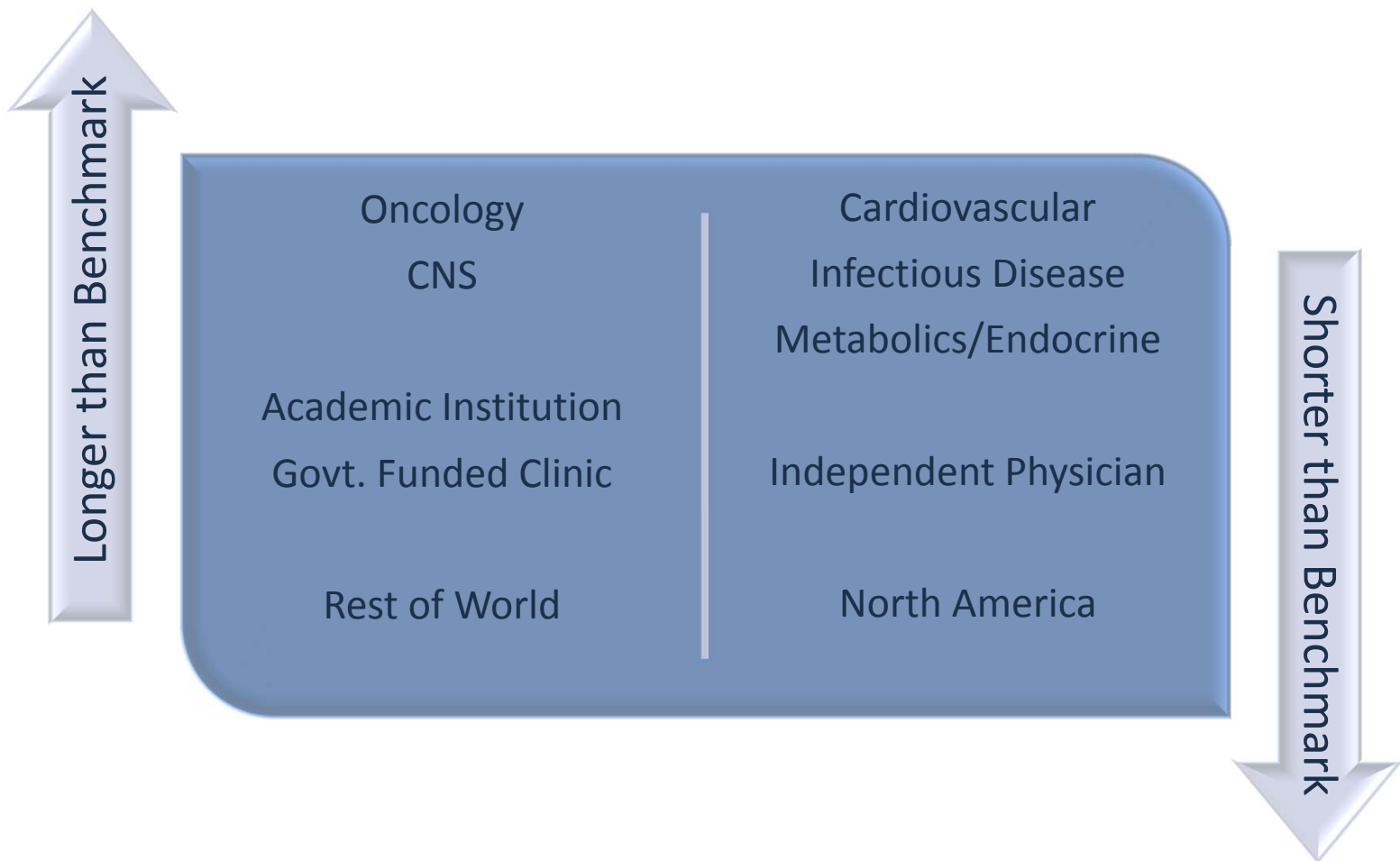
# Variation in Site Initiation Process



# Most Common Process Flow



# “First Patient-In” Cycle Time





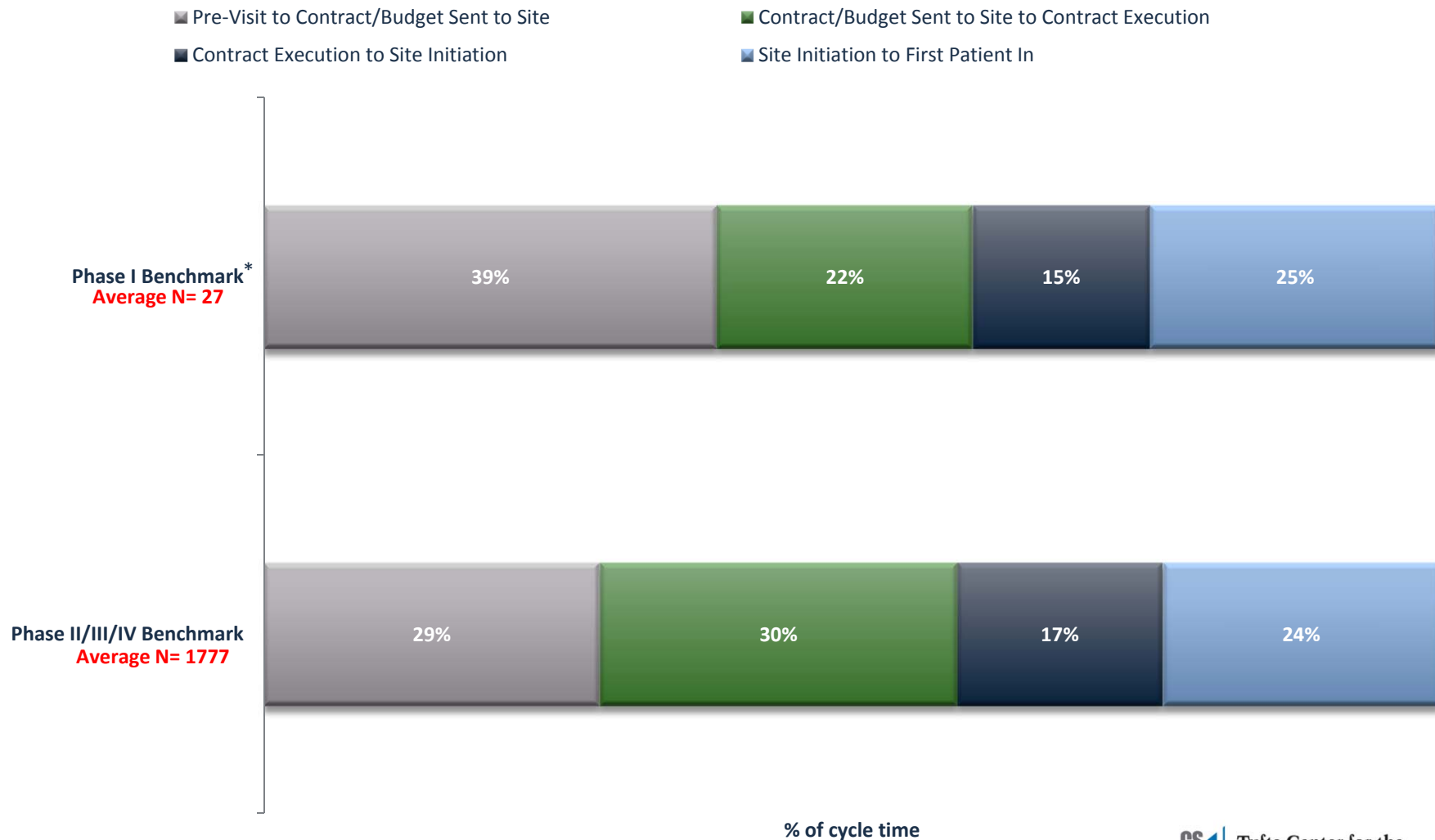
# “First Patient-In” Cycle Time

- Pre-Visit to Contract/Budget Sent to Site
- Contract/ Budget Sent to Site to Contract Execution
- Contract Execution to Site Initiation
- Site Initiation to First Patient In



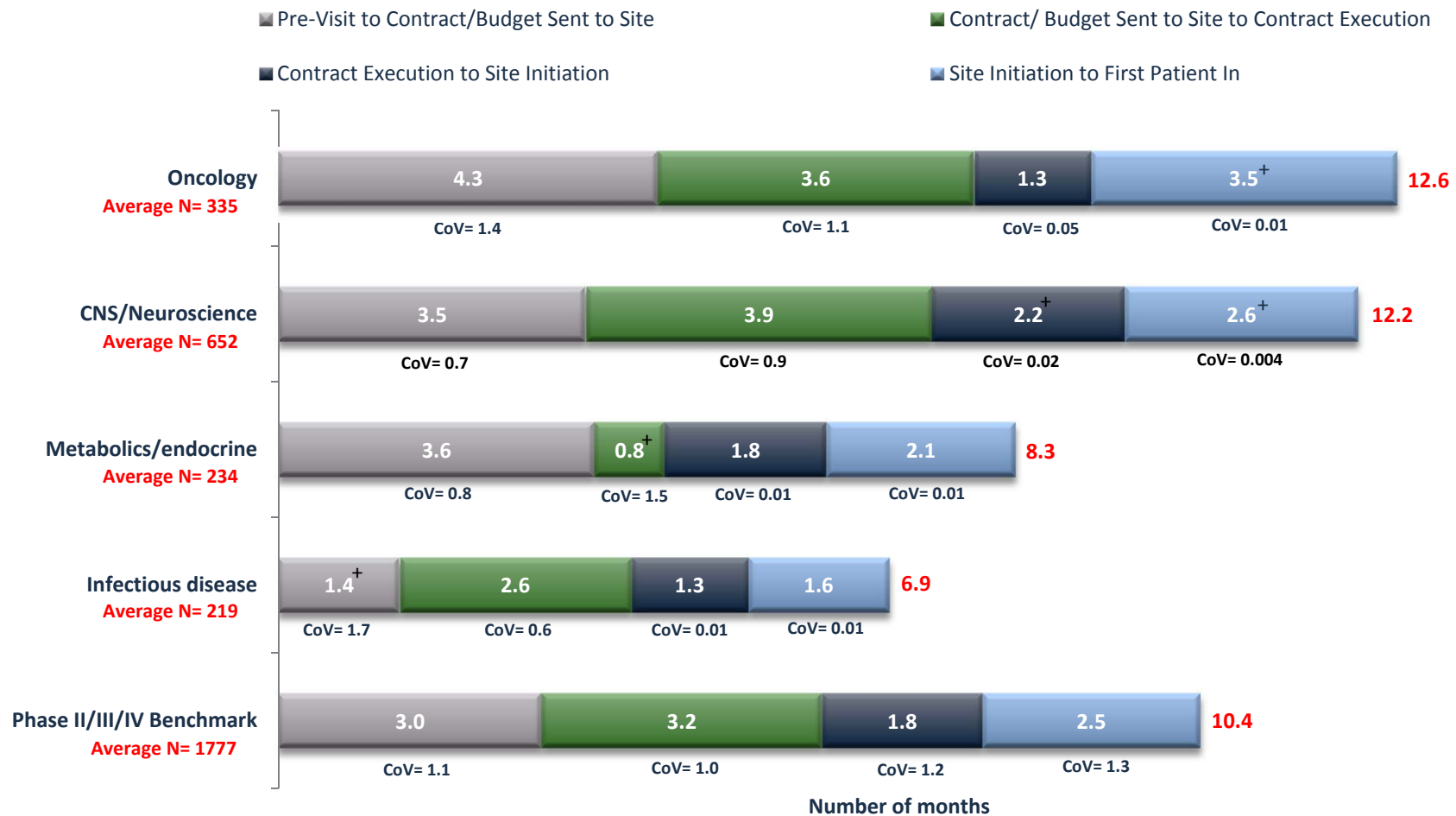
\* Interpret with caution due to low number of data points

# “First Patient-In” Cycle Time Breakdown



\* Interpret with caution due to low number of data points

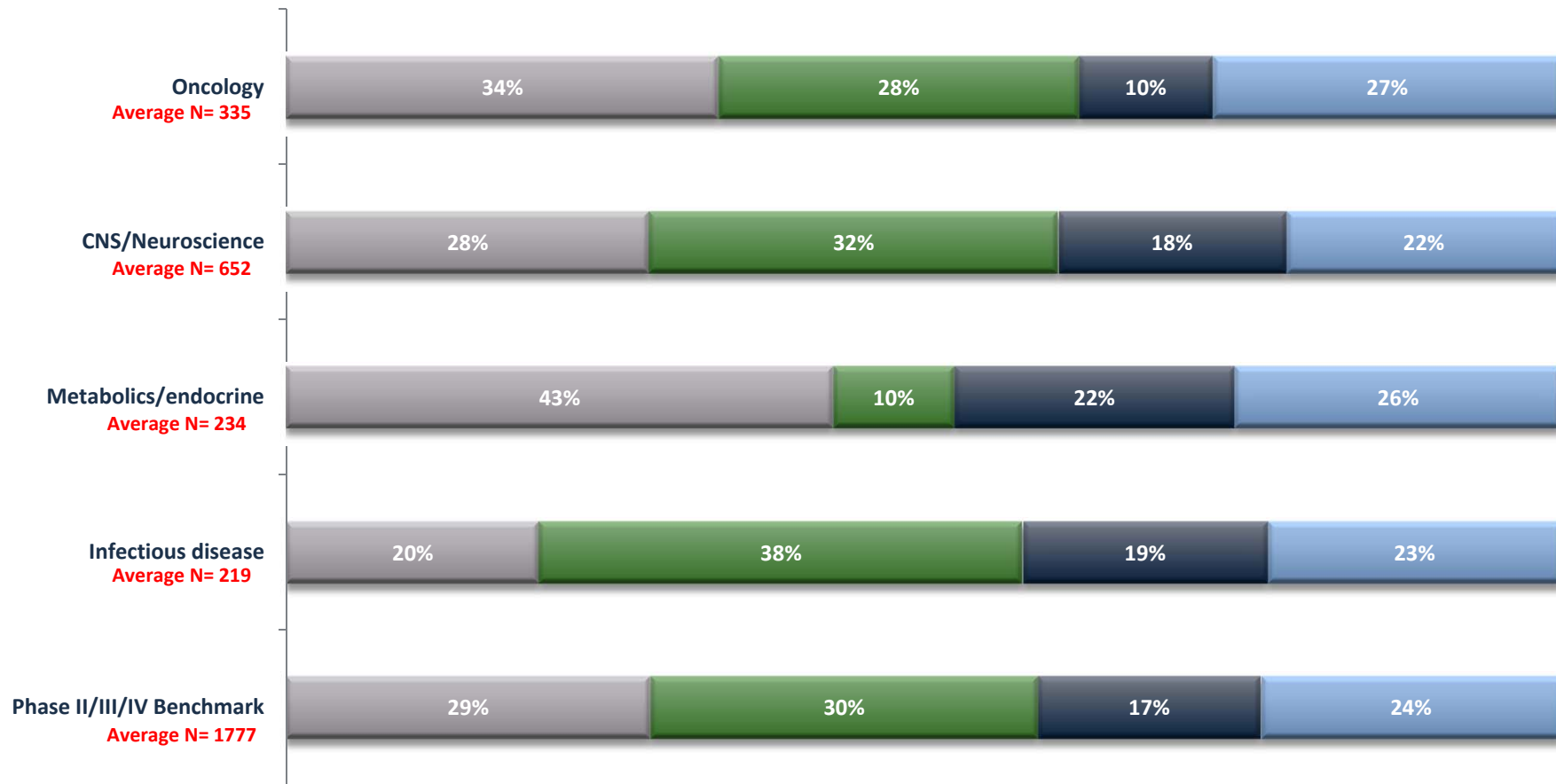
# “First Patient-In” Cycle Time by TA



+ Statistically significant; P ≤ 0.05

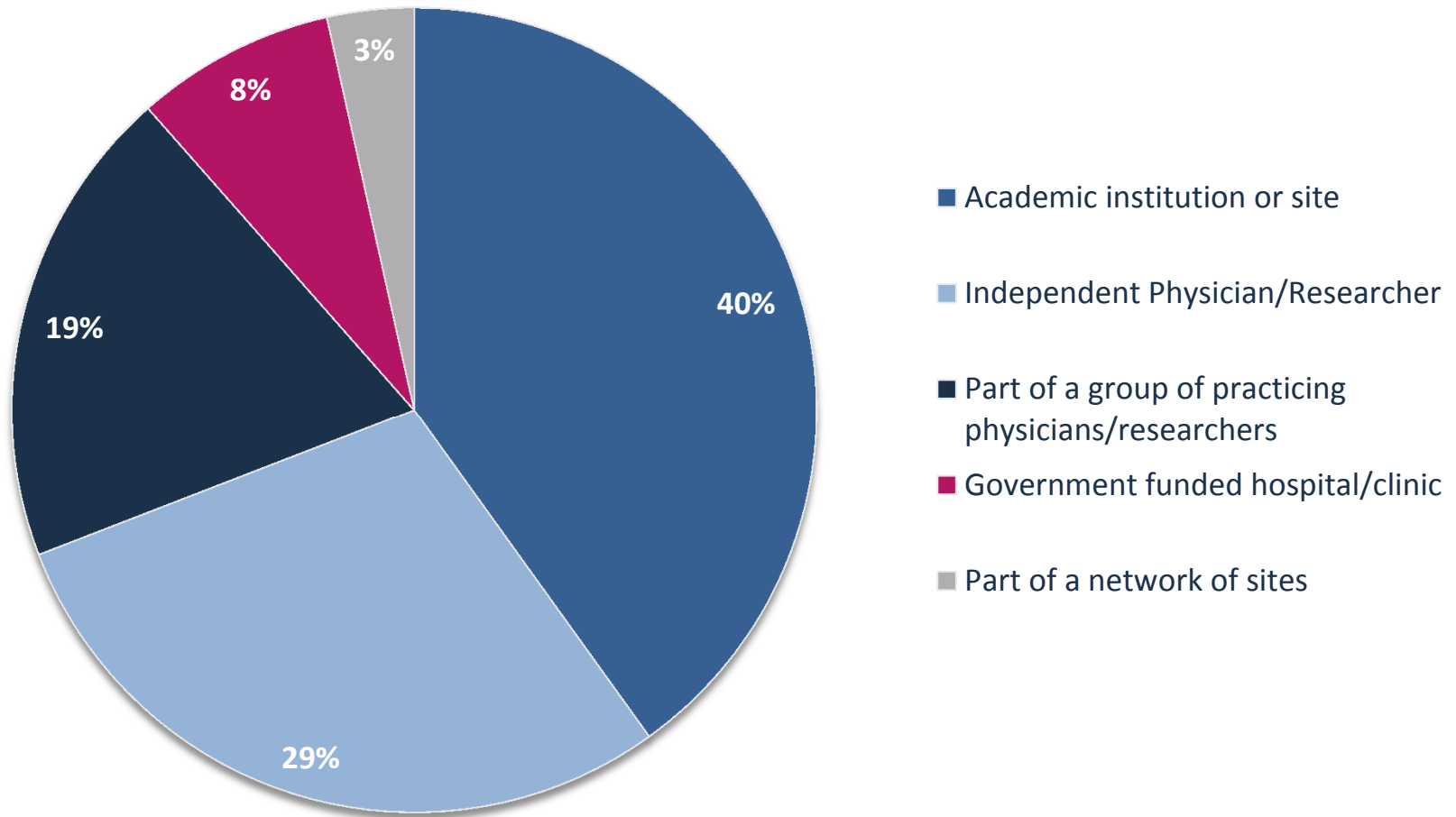
# “First Patient-In” Cycle Time Breakdown by TA

- Pre-Visit to Contract/Budget Sent to Site
- Contract Execution to Site Initiation
- Contract/ Budget Sent to Site to Contract Execution
- Site Initiation to First Patient In



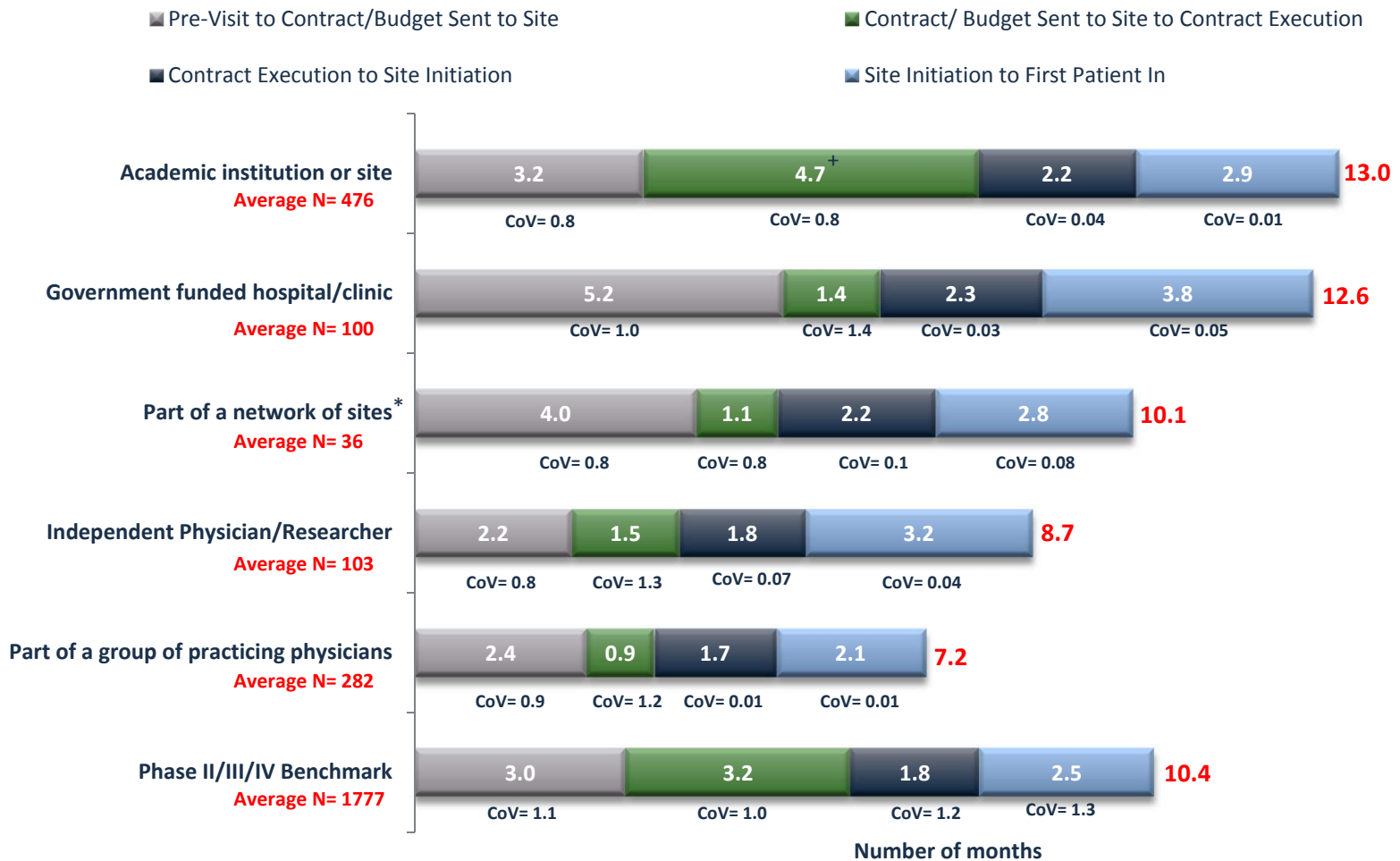
% of total cycle time

# Type of Site Initiated



n=2679, 45% of all sites

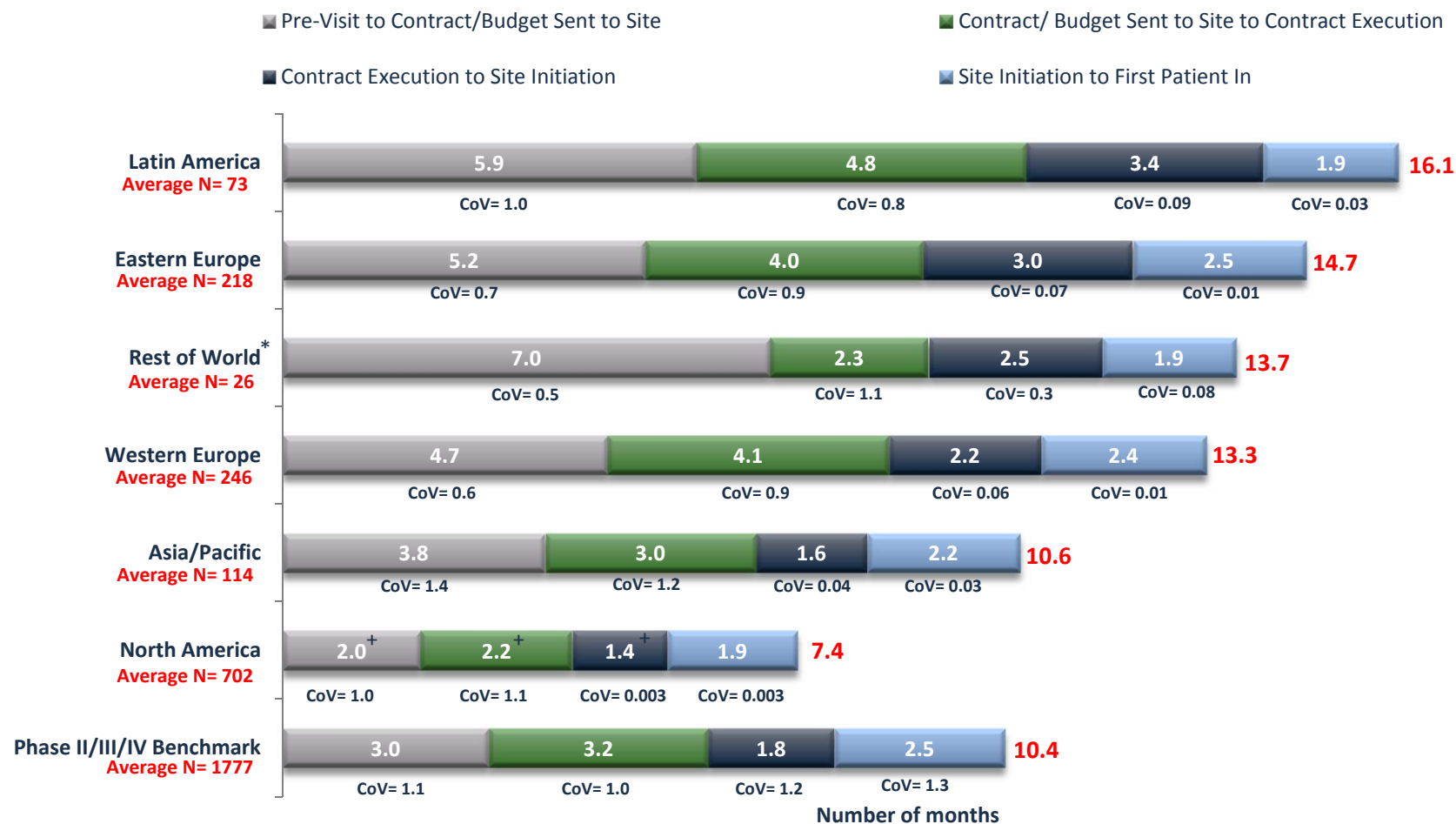
# “First Patient-In” Cycle Time by Type of Site



\* Interpret with caution due to low number of data points

+ Statistically significant; P ≤ 0.05

# “First Patient-In” Cycle Time by Region



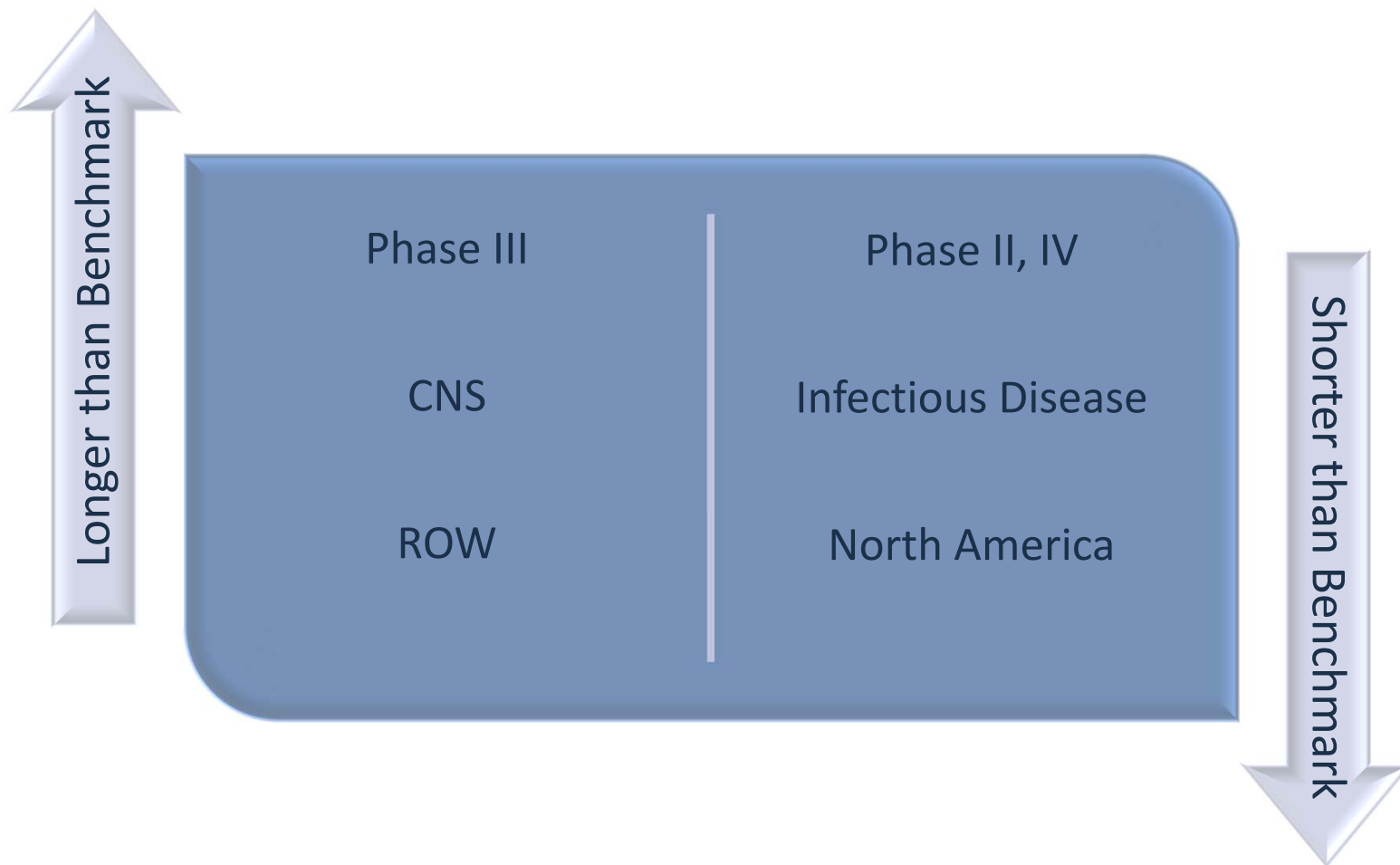
\* Interpret with caution due to low number of data points

+ Statistically significant;  $P \leq 0.05$

# COUNTRY LEVEL METRICS



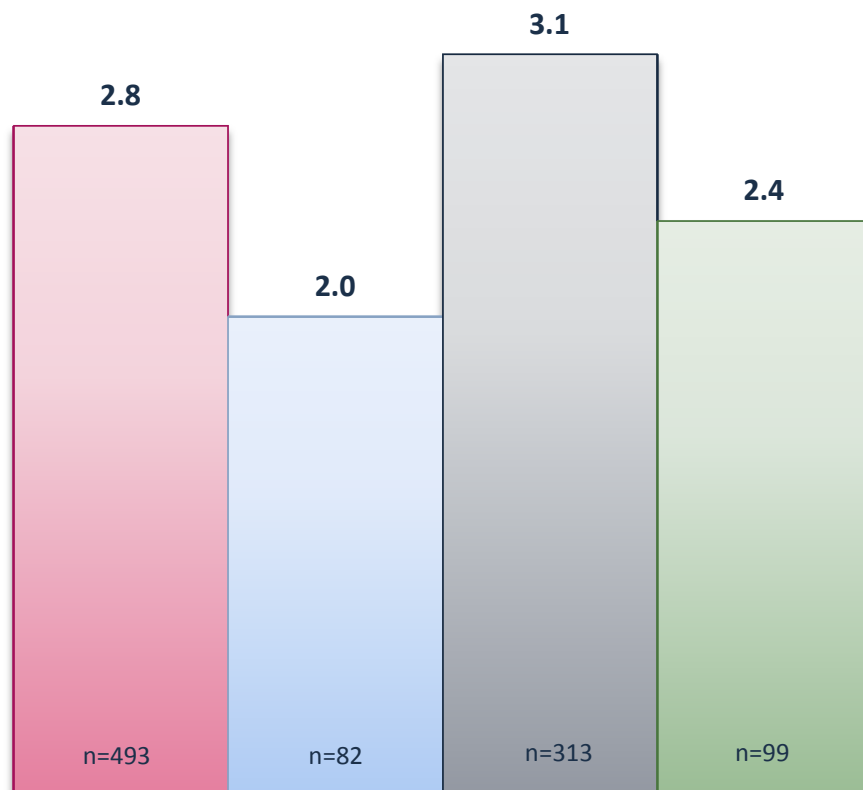
# Regulatory Review and Approval



NOTE: 66% of regulatory submissions had both submission and approval dates

# Regulatory Approval by Phase

Aggregate Benchmark Phase II Phase III Phase IV

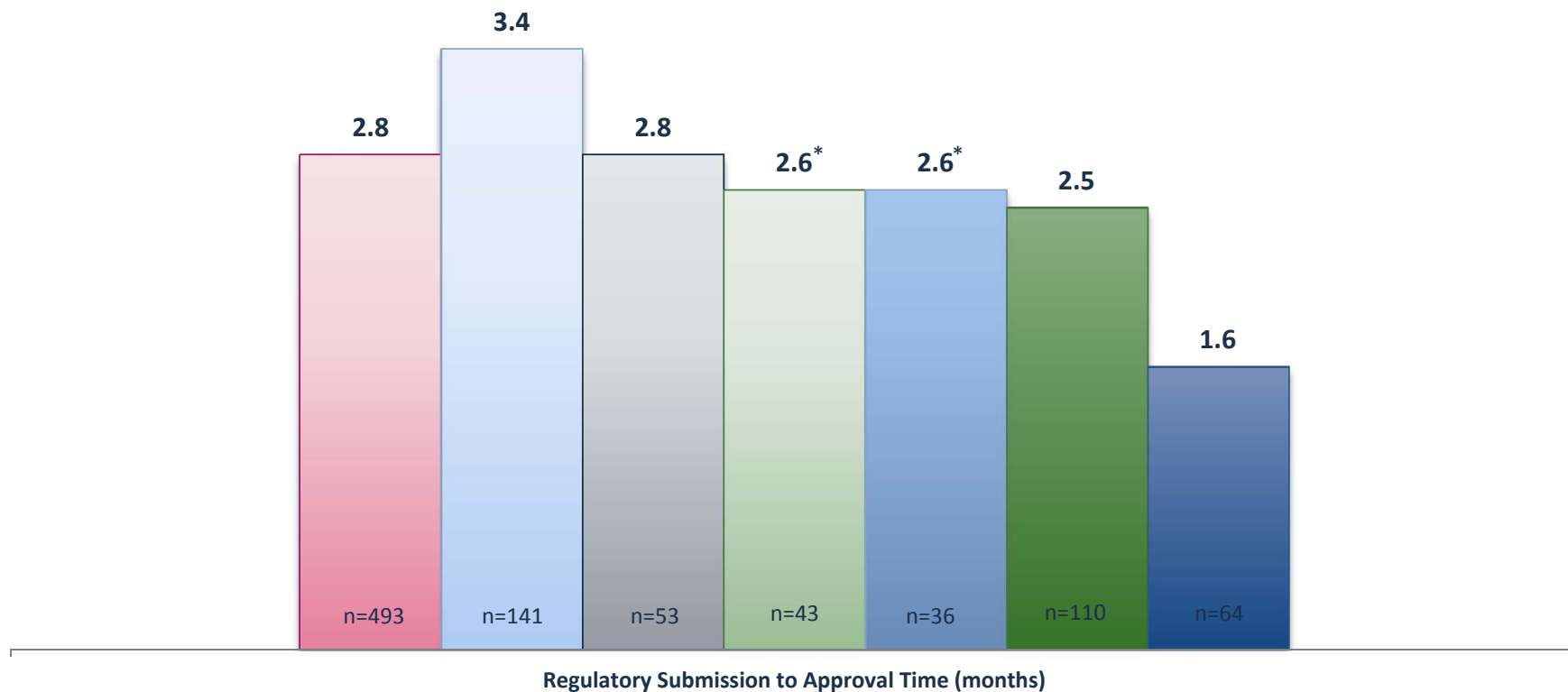


Regulatory Submission to Approval Time (months)

NOTE: Aggregate benchmark excludes Phase 1

# Regulatory Approval by TA

- Aggregate Benchmark
- CNS/Neuroscience
- Metabolics/endocrine
- Cardiovascular
- Immunology
- Oncology
- Infectious disease



NOTE: Aggregate benchmark excludes Phase 1

\* Interpret with caution due to low number of data points

# Regulatory Approval by Region

- Aggregate Benchmark
- Asia/Pacific
- Western Europe
- Eastern Europe
- Rest of World
- Latin America
- North America



NOTE: Aggregate benchmark excludes Phase 1

\* Interpret with caution due to low number of data points

**Thank You!**

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**Tufts CSDD, Tufts Medical School**

# APPENDIX

# Background and Context

- **Little to no data benchmarking study initiation practices**
- **Dramatic changes in operating environment**
  - Rising volume of global clinical trial activity
  - More sites enrolling patients
  - Competition for patients
  - Logistical complexity
  - Regulatory pressures
  - Company consolidation and downsizing

# Working Group Model

- **Working group format is used to target scholarly study of the most valued and relevant topical issues to aid management decision-making**
- **Working Group Participants:**
  - Collaborated with Tufts CSDD on the development of a data collection tool
  - Provided company data based on study sampling frame
  - Provided ongoing feedback and input during the study
  - Participate in a roundtable discussion to review preliminary analysis



# Project Objectives

## MEANINGFUL, USEFUL DATA

- To gather detailed quantitative metrics
- To capture baseline data benchmarking sponsor and CRO practices
- To identify and quantify trends in study initiation process
- To compare custom company data with working group benchmarks
- To communicate and share high level findings with the industry
- To stimulate additional study

# Participating Companies



# Data Characteristics

- **Missing company data**
  - Organizational Structure
  - Overall perceptions
- **Incomplete data**
  - Number of studies very limited for some therapeutic areas:
    - Hematology
    - Dermatology
    - Gastrointestinal
    - Immunology
    - Transplant

# Data Characteristics

- **Most Complete:**
  - Study phase
  - Age of study patients
  - TA
  - Molecule type
  - Route of administration
  - Eligibility criteria
  - Treatment procedures
  - Visit frequency
  - Enrollment timeline
  - Enrollment rates
  - Date of protocol approval
  - Date site is initiated

# Data Characteristics

- **Least Complete:**
  - Number of sites by region
  - Type of site initiated
  - Date of site selection
  - Date of pre-study visit
  - Date either contract or budget sent to site
  - Date of contract execution
  - Date of regulatory authority submission
  - Date of regulatory authority approval

# Working Group Companies and Study Start-Up Teams

Company Type	n
Pharma/biotech	8
CRO	2

Company Size	n
Large (Revenues \$4B to \$50B)	7
Mid-Sized (\$100M to \$4B)	3
Small	0

Dedicated Start-Up Team	n
Yes	3
No	7

# Working Group Companies and Study Start-Up Teams

Team/Department Reports to:	n
Clinical Operations or Clinical Development	2
Site or Trial Operations	1

Team/Department Characteristics	Mean
Age (years)	1.3
Size (FTE)	6.5

If NO dedicated team, handled by:	n
Clinical Operations	2
<b>Study Teams</b>	<b>4</b>
Both Study Teams and Clinical Operations	2

# Overall Perceptions

Study initiation cycle times can be...	n
Greatly Shortened	2
<b>Somewhat shortened</b>	<b>6</b>
Minimally shortened	0
Not at all shortened	0

Importance of shorter study initiation cycle times...	n
<b>Very Important</b>	<b>7</b>
Somewhat important	1
Not very important	0
Not at all important	0



# Companies and their Study Start-Up Groups

Organization implemented any initiatives to improve study initiation?	n
Yes	8
No	0

# of Studies Initiated per Year	(n =7)
Mean	87.6
Median	40.0

# Site Initiation Timeline Variance

BENCHMARK	Protocol Approval to 25%			25 to 50% Approved Sites			50 to 100% Approved Sites		
	Avg.	Range	CoVar.	Avg.	Range	CoVar.	Avg.	Range	CoVar.
<b>Phase I</b>	3.5	0 - 8.9	1.1	1.5	0 - 11.2	1.7	4.9	0 - 20.8	1.3
<b>Phase II/III</b>	6.1	2.1- 21.3	0.7	2.4	0 - 11.5	1.0	8.2	0 - 36.1	0.1

# “First Patient-In” Cycle Time Variance

	Pre-Study Visit to Contract/Budget Sent to Site			Contract/Budget Sent to Execution		
	Avg.	Range	CoVar.	Avg.	Range	CoVar.
<b>BENCHMARK</b>						
<b>Phase I</b>	2.52	0.2 - 8.4	1.1	1.42	0.1 - 6.8	1.1
<b>Phase II/III/IV</b>	2.97	0 - 17.4	1.1	3.16	0 - 21.5	1.0

	Execution to Initiation			Initiation to First Patient In		
	Avg.	Range	CoVar.	Avg.	Range	CoVar.
<b>BENCHMARK</b>						
<b>Phase I</b>	0.98	0 - 4.3	1.2	1.61	0 - 13.6	1.3
<b>Phase II/III/IV</b>	1.81	0 - 21.4	1.2	2.46	0 - 30.8	1.3