Engaging Community Providers and Patients in Clinical Research

The BedMed Experience
Faculty / Presenter Disclosure

- Faculty: Scott Garrison MD, PhD
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- Relationships with commercial interests:
  - Grants/Research Support: Ø
  - Speakers Bureau/Honoraria: Ø
  - Consulting Fees: Ø
  - Other: Ø
Full Time Fee-for-Service Family Physician (1st 20 Years)
Dr. Garrison… My cramps are gone!
Rest Cramps
(Nocturnal Leg Cramps)
Rest Cramps
Coming soon to a leg near you!
Not only the elderly
Treatment?
Drink more water

Stretch

Calcium

B Complex

Vitamin D

Quinine

Diltiazem

More/Less Salt

Verapamil

Magnesium

Potassium

Orthotics

Gabapentin

More / Less Exercise
Magnesium
Research Question
Are magnesium supplements efficacious in providing rest cramp prophylaxis?

RCT
Research Question

Are magnesium supplements efficacious in providing rest cramp prophylaxis?

RCT
How this relates to YOU...

- Common problem ≠ common presentation
- Docs will not dig beyond the presenting problem
- “Compelling” is subjective
- Expecting Docs to recruit during normal patient care is asking for trouble
Data Heaven
A Learning Healthcare System
The big ask...
The big ask...

...the clear answer
Broad Base of Support

- BC Divisions of Family Practice Innovation Fund
- Richmond Family Physicians
- Vancouver Coastal Health Research Institute
- Richmond Hospital Foundation (Donation)
Physicians engaged ✅
What about Data?
Beware the unexpected...
If you build it...will they come?
INRange

- 236 Physicians Recruited (51 BC, 185 Alberta)
- 54 Communities (26 BC, 28 Alberta)
- Of those receiving letters 16.7% called to enroll
- Loss to follow-up and non-adherence 3.7%
Every Pragmatic Trials Collaborative Physician brought in (on average) an additional 1.6 physicians to participate.

i.e. Our members were recruiting their own officemates to participate.
How this relates to YOU...

- Pilots aren’t compelling
- Docs will participate in large numbers if you make it easy and ask the right question
- Very low loss to follow-up
- Running a study is a great way to grow a network!
MAPEC:
- 2010 Spanish RCT
- 2,156 Patients x 5.6 years
- 61% reduction in a composite of mortality and cardiovascular morbidity if BP meds taken at bedtime
Making the Case

- **Cost Utility Analysis (Markov)**
  - 6,943 fewer deaths, 5,550 fewer strokes, 8,448 fewer CHF admissions, 16,418 fewer ACS admissions
  - Discounted lifetime savings of 8.8 billion (current cohort)
  - Life expectancy ↑5.5 years
Making the Case

• New & Unique Research Capacity
  • Many clinicians participating in research for the first time
  • Most remote from academic centres

• Multiprovincial Network
  • Alberta (SPOR)
  • BC (SPOR)
  • Manitoba (MCHP)
Methods

- Randomized registry trial with admin data outcomes
- 8750 Participants (approx. 3-4 years)
- Event Driven (406 PO)
- Quarterly reporting
- Cochrane IDSMB
- Volunteer Docs
- MOA 25¢/letter
- Online consent
Methods

- Key Outcomes
  - Mortality / Morbidity
  - Independence
  - Costs
- Safety Outcomes
  - Fractures
  - Vision
  - Cognition
Patient Engagement

- 10 member Patient Working Group
- Redrafted all materials
- New Objective
  - Can diuretics be taken at bedtime without causing or worsening nocturia?
Current Status

- 219 AB Docs have mailed
- 0.62 office mates
- 1655 randomized pts
  - 66.7 yrs
  - 36.3% rural
  - 19.4% physically frail
  - 23.3% ≥6 total Rx
- 79% online consent
- 68% online follow-up for 6 months onward
- Saskatchewan?

- 100 letters mailed per clinic (expected 200)
  - Telus pushing EMR query to 50% of Docs
  - Alberta Health providing patient lists
  - CPCSSN Central Query

- 4% ➔ 8% recruitment rate (expected 12%)
  - Remove consent / single page
  - Habit social media campaign
BedMed Social Media Campaign
How this relates to YOU...

- Remove the consent forms from mailouts
- Most pts choose online follow-up
- For physicians, an in person pitch is needed
- Pilot for patient response
- Evolve recruitment info (RCT within the RCT)
Time Trial

- UK Clinical Research Networks (paid physicians)
  - NIHR Clinical Research Network
  - Scottish Primary Care Research Network
- >8000 physicians \(\Rightarrow\) 21,116 pts / 16 months
- Internet based interactions only (younger)
- BID medication users excluded
- 2.7% response to GP letter, 4.1% Biobank
- Social media unhelpful
BedMed-Frail

- Long Term Care Facilities
  - Institute for Continuing Care Education and Research (ICCER)
- ≥ 30 Clusters of 50-100 residents
- 40 participants per cluster (1200 patients total) over roughly 2-3 years to observe 368 primary outcomes
- Hinges on a waiver of consent