



Как стать страной выбора для размещения мультицентровых клинических исследований

(взгляд международной
биофармацевтической компании)

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October 26th 2022

II Международный фармацевтический форум «GLOBAL PHARM»



Our purpose is clear

At AstraZeneca
we push the boundaries
of science to deliver
life changing medicines.



Vision and Strategy



Bringing medicines to patients faster

Optimize study co-location

Define study site co-location matrix for synergies

Accelerate recruitment

Optimize sites based on speed

Reduce waste

Data driven site selection based off performance predictors

Increase baseline predictability

Data driven recruitment target reliability

Increase patient access and experience

Optimize design

Streamline schedule of assessment based on burden

Assess patient availability

Leverage EHR to assess protocol feasibility

Better retention

Engage patients and sites during trial conduct

Increase diversity

Virtual visits and trials for increase patient reach

Focus in country selection



The future is in our hands



Maximizing Data Driven Feasibility

1 Prevalence*



*ACS encompasses Acute Myocardial Infarction (AMI) with STEMI and NSTEMI, and unstable angina

Executive Summary

1. Risk of ACS is highest in Europe
2. Anticipated Recruitment Rate for RRCT trial is 4 p/s/m
3. UK and Sweden are high performing countries in AMI trials
4. Moderate competition in UK and Sweden
5. Outcome Study in the RRCT setting with 75 sites and a RR of 4 p/s/m will require 24 months for patient recruitment

2 Recruitment Analysis

Anticipated Recruitment Rate is 4 p/s/m

4 Competitive Landscape



5 Recruitment Modeling



Getting to the right balance will require careful country selection to make this happen



 **Science vs Operability**

 **Risk vs Speed vs Cost**

 **New vs Re-use of Standards /
Best Practice**

