

Clinical trials: Benefitting the Patient and Science

You're a patient, and your health care provider has talked to you about taking part in a clinical trial – research to see how care can be delivered better. Trials can last weeks to years. You could do them at home or need to make regular trips to a clinic. The study could involve taking new medicine or simply giving feedback about how to manage the cost of your health care. It's a lot to consider.

Pros and Cons

Leah Watson is clinical research coordinator at OSF HealthCare Saint Anthony's Health Center in Alton, Illinois, which [recently started clinical trials at Moeller Cancer Center](#). Watson says when thinking about participating in a clinical trial, you should first evaluate the pros and cons as they relate to you.

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Leah Watson, clinical research coordinator at OSF HealthCare Saint Anthony's Health Center

“Pros would be obviously, hopefully, curing [a patient's ailment], or at least giving [the patient] a longer life or less progression of disease. Some cons that we're seeing: our patients aren't willing to give personal data. A lot of times they don't want to share about their financial history or run a soft credit check. And some of those do require those different things for trials.” (:25)

Watson says she understands how patients may be wary of trying a new drug that may not help them.

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Leah Watson, clinical research coordinator at OSF HealthCare Saint Anthony's Health Center

“Side effects can be a big thing, especially with something quote-unquote new that's never been done or used in a different way. You just never know what type of side effects may arise, and everybody's different. So one person may get some, and another person gets a whole different set or none at all. So it's just a luck of the draw type of wait and see situation.” (:19)

Who's taking part?

[Dr. Manpreet Sandhu](#) [pronounced *mahn-PREET // SAN-dew*], a medical oncologist and hematologist at OSF HealthCare, says clinical trials are not for everyone simply because each has eligibility criteria, like age or the progression of your disease. She says around 90% of cancer treatment is evidence-based, meaning providers are using something that's been tested and approved.

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Dr. Manpreet Sandhu, medical oncologist and hematologist at OSF HealthCare

“It's only those less than 10% [of] patients – and in some institutions even less than that – that go on clinical trials because most of cancer treatment, we already know what the evidence is and what to do and how to treat such patients. But in those cases where it's a unique situation, it's a rare disease, or if patients have run out of options, standard options, that's where clinical trials come [in]to play.” (:26)

Future of clinical trials

Health care providers took a different spin on clinical trials during the COVID-19 pandemic, when many people worked and got medical care at home. For some, work-from-home and telemedicine may be the new normal. So instead of multiple trips to a doctor's office to check progress, a clinical trial could involve logging symptoms on a smartphone app, speaking information into your smart speaker, or even having sensors – known as ambient intelligence – track your behavior.

Some health care professionals may be wary about the security and reliability of at-home data, but they seem primed to embrace the shift. A pair of surveys done before and during the pandemic found a big jump in pharma and contract-research organizations' plans to take trials virtual.

And the change stands to benefit patients, too. Study results released by the Center for Information and Study on Clinical Research Participation found 70% of patients live more than two hours from a clinical trial site. These travel barriers often impact underserved populations, which means these groups are underrepresented in clinical trials.

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Dr. Manpreet Sandhu, medical oncologist and hematologist at OSF HealthCare

“Things were available to us, but we never really used them prior to COVID. Same thing with telemedicine. We never really heard about telemedicine. We had computers. We had internet. We started thinking more broadly in terms of how we can use technology to serve applicable areas where patients could have the convenience of not having to come in and fill a form or answer their questions. Or do their visit with the research nurse or the doctor over [an] internet source.” (:32)

The bottom line

The bottom line, according to Watson and Dr. Sandhu, is – like any other health care decision – to talk to your provider and your loved ones about whether a clinical trial is right for you. OSF HealthCare also has resources related to clinical research on its website.