Avoid these 5 data missteps that create costly delays

During clinical trials, a number of roadblocks commonly hinder efficiency, drive up operating costs and put regulatory approval at risk.

Moving a new drug through pre-clinical testing to approval takes an average of 12 years.

85% of clinical trials experience delays.

1 to 2 of 10,000 drugs that enter pre-clinical trials make it through to becoming licensed treatments.

Developing a medicine that gains regulatory approval costs drugmakers $2.2 billion, double the amount calculated in 2010.

Road Block 1: Trapped by the trickle effect

Quality of metadata is poor due to content complexity.

Poor data quality triggers manual classification and validation processes.

Manual processes create delays in analysis and report writing.

Delays lead to lags in application filing and regulatory approval.

Road Block 2: Data wrangling

Instead of focusing on analysis, data scientists report up to 80% of their time is spent “data wrangling”.

Collecting data

Labeling data

Cleaning data

Organizing data

Road Block 3: Clinical trials documentation

Clinical trials produce massive volumes of documentation, particularly in late-stage phases.

Phase III clinical trials generate an average of 3.6 million data points.

3X the amount collected by late-stage trials a decade ago.

The volume of clinical trial documents captured is doubling every 18-24 months.

80% of healthcare content is unstructured, changing from one study to the next.

Road Block 4: There are many, many sources and formats of data

Sources:
- Researchers
- Manufacturers
- External labs
- Patients
- Healthcare professionals
- Clinical research sites such as hospitals
- Clinical research organizations
- Supply-chain logistics partners.

Data Formats:
- Clinical trial documents
- Online forms
- IoT data from sensors and devices
- Paper-based submissions
- ePRO/eCOA
- EDC
- CTMS
- IVR
- Images
- Labs.

Resulting in:
- Tedious data collecting
- Time consuming data classification
- Diminished value of data

Road Block 5: Human error

High human-touch methodologies are still widely used to classify and verify trial documents.

50% of clinical trials rely on paper-based case report forms (CRFs) to manage information.

This leads to delays caused by:
- Tracking and reporting paper documents
- Misfiled or missing documents
- Manual document exchange

Bring Data Intelligence to Clinical Trials.

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References:
2. Accenture, “Decentralize Clinical Trials to Unlock Value for Patients,” August, 2021
8. Syn Clinical, “Why are We Still Running Paper Trials?” October, 2019

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