# Clinical Trials From the Patient's Perspective

What is he or she thinking?

BY GARY D. NOVACK, PHD

s part of educating patients about their ocular conditions and options for treatment, you may be called upon to advise them about participation in a clinical trial for a novel ophthalmic drug or device. In these discussions, it is important to be cognizant of patients' potential concerns.

## THE PHYSICIAN'S PERSPECTIVE, IN BRIEF

The first issue for your consideration is whether the study in question is one for which you are the clinical investigator. In that case, you should examine your ability and motivation to be a clinical trial investigator. The opportunity to participate in the clinical evaluation of a new diagnostic technique, medical device, or pharmaceutical to improve the care of patients with glaucoma is an exciting one. This work could help develop such a product for marketing approval and lead to its more widespread use by a large patient population. Trials involve a trained and dedicated clinical research office staff that can deal with the rigors of the protocol and data collection. The work must be conducted consistent with good clinical practices (http://www.fda.gov/oc/gcp/default.htm).

Rarely does involvement in a clinical trial generate a positive cash flow for the investigator. Compensation comes in other, nonfinancial ways such as the opportunity to be among the first to evaluate novel products and present the data in a scientific forum. It is important to realize that most products do not receive approval for a host of reasons (efficacy, safety, business). An issue to resolve is communication with your medical liability insurer to see if your work on the study is covered or not. Typically, the sponsor provides some coverage.

The author has reviewed the investigator's perspective previously.<sup>1,2</sup> If the investigator is someone other than yourself, consider how the referral will work and how to assure the patient that you are still responsible for his or her care after the study is completed.

#### THE PATIENT'S PERSPECTIVE

## Eligibility

Patients' primary perspective is in terms of their disease. Thus, one of their first concerns may be, "How will this new diagnosis or therapy affect my glaucomatous disease?" The next issue, applicable primarily to treatment studies, is, "Will I qualify for the study?" Here, you must truly believe in the equipoise of the proposed study: that the clinical trial is needed to determine the utility of the therapeutic intervention over the alternative. There are exceptions, notably vehicle-controlled trials. In such studies, the investigator most likely already "knows" that a novel formulation of a ß-adrenoceptor antagonist might be better than its vehicle for a 1-month study. Nonetheless, the opportunity for a new product may outweigh any risks in a given patient.

An issue in the field of glaucoma is that many treatment studies require a washout of ocular hypotensive medications prior to enrollment in order to achieve a valid unmedicated baseline IOP. You must believe that the washout will cause no appreciable harm to the patient. Indeed, there are some advantages to evaluating whether a patient needs to be on all of the medications he or she may currently be using.

For both situations, either washout or the chance to receive the vehicle for up to several weeks, you must explain to the very patient whom you have told "don't miss a drop" that it is acceptable to stop medical therapy for a set period. Obviously, only patients with relatively mild and stable glaucomatous disease should be considered for such studies.

#### Safety

The patient may ask, "Is this new treatment safe?" This is especially an issue for new chemical entities being evaluated in humans for the first time. It will behoove you to have read all of the information from the sponsor, typically provided in a clinical investigator's brochure, to decide for yourself if adequate nonclinical studies have

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been conducted to justify the hypotheses of efficacy. Also look for an adequate margin of safety of the maximal intended clinical dose versus the dose that shows toxicity in these nonclinical studies. In that way, you can assure the patient of the relatively low risk. Typically, documents provided to the patient use the term *investigational product*. If you used the term *experimental product* (equally valid), patients may show more concern.

#### Communication

Patients will observe both the verbal and nonverbal communication from you and your staff about their disease, its progression, and the chance of possible improvement. Thus, everyone in the office needs to be sensitive and careful not to inadvertently cause the patient concern, imply disease severity, or, for patient-masked studies, decode the treatment.

#### Motivation

Patients may wish to enter a study for reasons other than the explicit evaluation of a new agent for themselves. Self-centered reasons include the hope of better care and attention in the office. The trial may give the patient "something to do." Some individuals may choose to participate for altruistic reasons such as a genuine desire to help other patients with glaucoma.

# Continuity of Care

For studies to be conducted by physicians in the same office or at other facilities, patients may be concerned about whether they will continue to receive care from you. As the patient's eye care professional, you will need to clarify that, although he or she is still your patient, another physician will be taking care of the study-related activities. Explain that he or she will return to you for regular care or at the end of the study.

## **Informed Consent**

Patients need to be assured of the standard components of informed consent. This information includes a clear statement about the procedure involved, the expectations of the patients for clinical visits, compliance with medications used and other practices, and their compensation (if any). They should also be reassured that their name will be removed from any document leaving the office. Finally, patients need to understand that they may withdraw from the study at any time.

#### CONCLUSION

Clinical trials can represent a great opportunity for you and your patients. It is important, however, to consider their concerns and motivation for participation as part of their evaluation and any discussion with them of such studies.  $\Box$ 

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<sup>1.</sup> Novack GD. Pipeline: Should you be a clinical investigator for a new pharmaceutical? *Ocul Surf.* 2005;3:168-170.

<sup>2.</sup> Novack GD. The ophthalmologist as clinical investigator. In: Zimmerman TJ, Kooner K, Sharir M, Fechtner RD, eds. *Textbook of Ocular Pharmacology*. New York NY: Raven Press; 1997:171-178.

<sup>3.</sup> Hellman D. Evidence, belief, and action: the failure of equipoise to resolve the ethical tension in the randomized clinical trial. *J Law Med Ethics*. 2003;31:182.