Patients … Find them, Treat them, Keep them

www.themrn.co.uk

MEDICAL RESEARCH NETWORK
Welcome to the Medical Research Network

The Medical Research Network (MRN) is a unique clinical trial support organization offering nursing focused patient recruitment & retention solutions globally for clinical trials. Headquartered in the UK & with a North American operation, the MRN offers Site Nurse Support and Home Trial Support services across the globe.

Optimised trial site performance
The MRN is the world’s leading provider of home healthcare in clinical trials, having conducted in excess of 10,000 home care visits; taking the trial to the patient makes participation more convenient and appealing for the patients and boosts recruitment rates considerably (from 60% upwards).

This ease of participation also significantly improves patient retention, consistently above 95%.

For trial sites with resource constraints, the MRN also offers a Site Nurse Support service, placing experienced research nurses and/or coordinators into the sites to ensure enrollment and retention targets are met.

At the MRN it’s all about patients... finding them, treating them, keeping them.
Why use the MRN

The MRN is the only truly global provider of nurse led CTSO services in the world.

Our partnering model ensures we can find, train and manage research nurses in a huge range of countries, working with both large and small partners.

Our approach is customized for each study.

Our unique Site Support teams are carefully trained and managed for each study, providing site support in a consistent and professional way to meet the site and Sponsor requirements.

No other provider works this way.

Our Home Trial Support teams are also carefully trained and managed for each study, carrying out entire trial visits in the patient's home, reporting the trial data back to the site.

Value Proposition

Allowing a number of trial visits to be conducted in the patients' home makes the trial considerably less onerous for the patient and can have a significant impact on recruitment rates; depending on how many visits and the length of trial, recruitment rates can be increased by 60% or more. Once patients are recruited to the study, our experience has shown that patients remain on study too. Our retention rates have never dropped below 95%, ensuring fewer dropouts and a timely end to recruitment for the study.

With many trial sites being under resourced and unable to apply the time required to their studies, placing a dedicated research nurse or coordinator into the site makes sure the your trial is getting the focus is needs.

Visions and Values

To accelerate patient recruitment and increase patient retention in every clinical trial.
Home Trial Support

Our unique homecare service offers the patients up to 50% of trial visits in the home, eliminating the need to travel to site as often; this can increase recruitment rates by up to 60% and maintains retention above 95%. With less on site visits to conduct, the site staff will also have more capacity to enroll greater patient numbers!

Site Nurse Support

Our Site Nurse Support service places experienced research nurses into sites to manage trials; this enables each site to focus on patient identification and selection, as well as facilitating performance of all procedures in a timely manner. Placements can be made at single sites, or nursing teams can be pulled together to support sites across whole countries or trials.

MRN–RAPID

MRN–RAPID is driven by social media analysis software developed by PA Consulting, with whom MRN have an exclusive collaboration. It can access the 500 million social media interactions made every day, which provide a huge database of activity about a trial, target patients and the individuals they interact with in the digital environment. It’s an unrivalled tool for the efficient planning of optimal patient recruitment within your programmes.
Today home healthcare has evolved into a more commonplace strategy for maximising recruitment and retention rates, offering the ultimate patient centric experience to a clinical trial. Homecare visits to patients can be used for almost any clinical trial visit where a medic is not required and the equipment is portable. Simple blood draw visits are by far the most common, but at MRN we specialise in offering something much more complex.

MRN has developed its MRN-COMPLEX offering with this in mind. COMPLEX is made up of our Paediatric Trials, IMP Administration, Global Studies and Rare and Orphan Drugs specialisms, which combine to give our clients the most comprehensive home healthcare service available.

Taking homecare to the next level

The MRN was established to offer patients the option of having clinical trial visits conducted in their own homes; this was a revolutionary approach to running clinical trials which has steadily become welcomed and embraced by the pharmaceutical industry.

Combining specialisms in the home

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Paediatric Trials

Enrolling children into clinical trials is one of the most pressing, but also the most difficult tasks facing therapeutic R&D teams. Children, perhaps more than any other group, need medical care to cause as little disruption as possible to their education & everyday life, and to instil a sense of security. We provide home healthcare at home, school or college as long as simple, basic facilities are available. We can also conduct visits in the evenings or at weekends. Recruitment rates will improve and retention rates are high with home healthcare in place, making the trial more achievable in the time frames expected.

IMP Administration

MRN are world-class experts in highly specialised complex drug administration in the home. IMPs are carefully assessed by our medical and nursing team, through review of the Investigator Brochure and discussion with the R&D and medical teams. We assess the condition of the patients expected from the protocol design, as well as overall patient exposure and side effect rates, in initial doses and then recommend which visits might be best conducted in the home and which in the Clinic. We create a home healthcare treatment regime that is attractive to both patients and investigators, which when offered to patients during the consenting process, leads to dramatically increased recruitment rates.

Truly Global Studies

Home healthcare reduces the impact of the trial on the patient’s life - a totally patient centric approach that allows them to consent to participate in trials more easily. Delivering these services for large multinational trials is one of MRN’s specialities. MRN has the largest network of nurses globally, covering over 45 countries, in this sector. MRN use unique bespoke IT systems – MRN TEC and MRN SMART – to allow us to start up large teams of nurses quickly and efficiently, tracking all their visits remotely in real time.

Orphan & Rare Diseases

Trials for orphan & rare drug indications are notoriously difficult to recruit into. However, Home Healthcare is widely deployed for commercial orphan disease products, drastically improving the quality of life for the patients. Offering the same level of service to the patients in trials will significantly improve recruitment, by making them accessible to patients who may otherwise have to give up a homecare service and travel huge distances to the sites. We can also place research nurses on site to work with the PI and their teams to manage the workload and ensure quality standards are maintained.
Case Histories

Patient Recruitment

The MRN offered homecare services across 11 countries & 60 trial sites, covering a total enrolled patient number exceeding 800. Global recruitment was achieved in less than 5 months. Homecare visits conducted for 50% of trial visits and MRN conducted in excess of 450 visits per month.

Site Support Teams

A site support team was set up regionally to conducted database searches for patients across 18 sites in a cardiology study. The service ran for 12 months and was successful in boosting patient identification rates by 300%.

A global site support team was set up to manage patient titrations of a complex IV parenteral therapy over 3 years and across Europe, Asia and Australia. Multi-lingual nurses worked in sites across multiple countries to ensure consistency of patient and site compliance.

Patient Retention

The MRN conducted home based IMP infusions on a long term follow on project in the UK. Spanning more than 3 years in total and with patients receiving visits every 2 weeks, the homecare service maintained retention at 98%.

The MRN conducted home based IMP infusion and central pharmacy compounding and home delivery of IMP for a 2-year study in USA, UK and Australia, providing infusions every 2 weeks. During this study, the MRN maintained retention at 100%.

Taking the trial to the patient
**Geographics**

The MRN stratifies its geographical coverage:

- **Tier 1**
  Countries where we have worked or are currently working and therefore have proven experience

- **Tier 2**
  Countries where we have nursing suppliers in place and know the services are viable, but where we do not have any experience as yet

### Tier 1 Countries
- UK
- France
- Germany
- Austria
- Spain
- Sweden
- New Zealand
- Belgium
- Portugal
- Poland
- US & Canada
- Thailand
- Australia
- Republic of Ireland
- Denmark
- Switzerland
- Norway
- Greece
- Italy
- Czech Republic
- Turkey
- Hungary
- Puerto Rico
- Brazil

### Tier 2 Countries
- Finland
- Ukraine
- Latvia
- Estonia
- Lithuania
- Philippines
- Singapore
- India
- Israel
- Columbia
- Malaysia
- South Africa
- Japan
- Chile
- Belarus
- South Korea
- Romania
- Peru
- Slovakia
- Georgia
- Argentina
- Russia
- Mexico
- Panama

**Optimised trial site performance**
The MRN is leading the field in the development of innovative tools to truly globalize the delivery of homecare in clinical trials. Working to challenging timelines, across numerous continents and time zones, requires robust automated systems to maintain both control and quality.
A unique, custom-built web based training portal, customized per project, to ensure rapid and certified training to global nursing teams. All training is conducted in local language, at the nurse’s convenience, and covers both study specific procedures and ICH GCP.

A unique, custom-built web based patient scheduling and project management system, offering real time tracking of patient visits globally. All patient data acquired in the home is recorded via electronic pen technology, ensuring rapid transfer of data back to site and immediate date/time stamping of visit completion.

A unique set of in house tools designed to maintain quality and compliance in a highly regulated environment; MRN COMPLY consists of a number of modules:

- Clinical Governance
- Regulatory Compliance
- Quality Management System
Return on Investment

Our models demonstrate the impact of the service in sites covering between 10% and 75% of patients, assuming 40% of visits can be done in the home. The model incorporates a speed up of recruitment and improved retention based on real experiences, a reduction in total number of sites, reduced travel expenses and site fees, plus the expected MRN fees.

The model presented covers a study requiring blood sampling only. Infusion or injectable studies typically give greater speed up.

Model – Infusion / injection service

The trial is for a novel infusible or injectable for a specific form of poly-arthritis administered every 2 weeks over 12 months. Recruitment is expected to be a challenge taking 18 months in 15 countries with 60 sites, aiming for 150 evaluable patients with a 12% drop out rate.

Model predictions:

Total study outsourced cost £5.7 million
Speed up – by percentage of patients covered – in months and as a percentage of total study duration:

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Speed Up (months)</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>10%</td>
<td>1.75 months or 5.8%</td>
<td></td>
</tr>
<tr>
<td>20%</td>
<td>3.86 months or 12.9%</td>
<td></td>
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<tr>
<td>50%</td>
<td>6.43 months or 21.4%</td>
<td></td>
</tr>
<tr>
<td>75%</td>
<td>8.20 months or 18.7%</td>
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The cost of the study would be between 94% and 99% of the original cost without the service, i.e. COST NEUTRAL.
Management Team

Graham Wylie

Dr Graham Wylie is Chief Executive Officer of Medical Research Network (MRN), a position he has held since 2006 following a management buy-out of the clinical trials division of Healthcare at Home. He is currently striving to further develop MRN's strategy of international growth, differentiation and quality, building on 5 years of growth.

Helena Baker

Helena Baker is VP, Global Operations and Nursing at Medical Research Network (MRN) with responsibility for ensuring all nurses deliver the appropriate level of service. She also manages the development of an International Nurse Training and Development Program, to ensure all nursing is delivered to a consistent standard, across the globe.

Stuart Redding

Stuart Redding is VP, Business Development and Marketing at Medical Research Network (MRN) responsible for global sales activities, development of marketing materials, budgeting and proposals. Currently, Stuart is focusing on developing new business opportunities from MRN's clients’ desire to be innovative and more patient-focused, as the market for patients becomes more competitive.

Paul Bodfish

Paul Bodfish is VP, Corporate Services at Medical Research Network (MRN) holding responsibility for finance, contracts, quality management, vendor management and technology. He ensures projects are delivered on-budget, with consideration for increasing market pressure, ensuring that MRN can deliver their unique services globally.

Simon Mouncer

Simon Mouncer is Vice President of Finance, Technology and HR. He is responsible for all day to day financial and IT operations and ensures that MRN adopts appropriate HR policies and procedures. Simon also has a key strategic role ensuring that solid financial foundations and other infrastructure is in place to underpin growth plans.

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