

**DEPARTMENT OF COMMUNITY AND PREVENTIVE MEDICINE
RESEARCH PROPOSAL**

**Identifying Barriers and Solutions to Clinical Research Recruitment for
Neurodegenerative Disorders**

David Shprecher, DO

Risk of chronic disease, particularly neurodegenerative diseases such as Alzheimer disease or Parkinson disease, increases dramatically with age. Cumulative lifetime risk for Alzheimer disease is 10% in men and 20% in women, and lifetime risk for Parkinson disease is 7% overall. Given worldwide advances in life expectancy, the number of individuals with these diseases is expected to grow substantially in the next two decades. There is no known treatment that halts neurodegenerative disease. Motor and cognitive disability imposed by these and other diseases of aging pose a significant barrier to participation in research. Academic centers are frequently located in urban centers serving a broad catchment area, and thus travel burden upon patients and their caretakers may further discourage clinical research enrollment. In-home assessments by a clinical researcher can facilitate participation in clinical research but may not be practical when covering a large catchment area. One alternative method, telemonitoring, includes the recording and transmission of medical information at the patient's home without direct involvement of local medical staff. This avoids transfer of travel burden to research staff but may be limited by availability of internet computing hardware or skills, and absence of health care professionals at the home. With telemedicine, trained medical personnel present a patient to a remote specialist using a video transmission. This mitigates lack of certain clinical or laboratory assessments but adds some travel burden as subjects still need to travel to the telemedicine site. Remote assessment methods would need to be validated before they could be employed in clinical research. In order to determine whether resources should be allocated for these efforts, information is needed about the potential benefit of remote assessments for clinical research recruitment efforts.

Specific Aims:

1. To determine how availability of telemonitoring or telemedicine assessments influences the willingness of subjects and/or care givers to participate in clinical research. This will be done using a prospective survey of patients with Parkinson disease seen at the Movement Disorders Division of the University of Utah Department of Neurology.

Hypothesis 1: Availability of either of these accommodations will improve the likelihood of clinical research participation.

2. To examine the influence of travel burden on clinical research participation. Travel burden will be quantified using one-way travel time, in minutes, as a continuous variable.

Hypothesis 2: Travel burden will have a significant inverse relationship with the likelihood of clinical research participation.

Committee Chair:

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Committee Members:

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Friday, June 5, 2009

9:00am – 9:30am

Helen Wood Hall, Room 4W301

EVERYONE IS WELCOME