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Patient centered pharmaceutical development and clinical trials: patient recruitment and retention

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The aim of this work was to investigate the determinants influencing patient recruitment and retention in clinical trials from a patient-centered perspective. Clinical research represents the evidentiary basis for medical innovation and public health protection; however, participant enrollment remains one of the most persistent operational challenges within the clinical development process. Delays in recruitment compromise external validity, prolong timelines, and increase development costs.

Existing literature identifies a multifactorial set of barriers, including patient-level, investigator- and site-level, and logistical constraints. Patient-related determinants such as limited health literacy, perceived risk, mistrust toward research, and competing life priorities have been shown to reduce willingness to participate [1,3]. On the investigator and site side, protocol complexity, administrative workload, and insufficient institutional support hinder adequate engagement, while communication gaps further exacerbate participant hesitancy [2–4]. In parallel, logistical and infrastructural constraints—ranging from travel distance to scheduling burden—contribute to both delayed enrollment and participant attrition [2,5].

This study employs structured questionnaires administered to physicians, current trial participants, and the general population, complemented by in-depth interviews. Quantitative and qualitative evaluation will enable the identification and segmentation of motivational drivers, behavioural determinants, and knowledge gaps. Based on these findings, non-financial, ethically compliant motivation strategies will be developed for investigators and sites, accompanied by patient-facing educational materials to improve public awareness and acceptance of clinical research.

Expected outcomes include an evidence-based framework to enhance recruitment efficiency, improve representativeness, and shorten trial timelines, thereby supporting patient-centered clinical development, improving feasibility and operational predictability, and ultimately facilitating the timely translation of novel therapies into clinical practice.

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