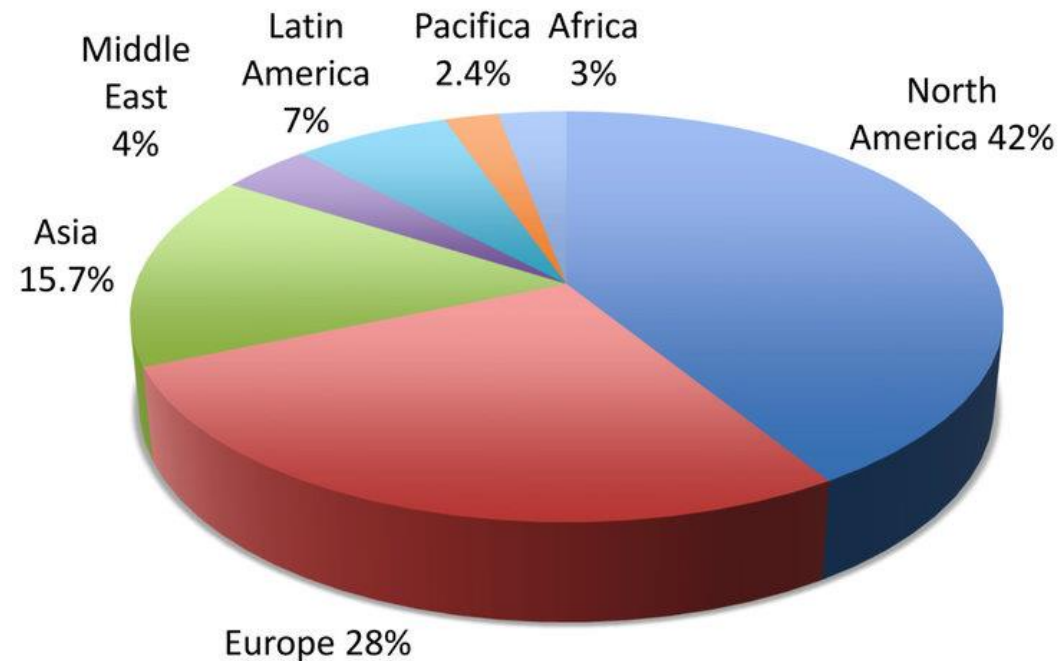
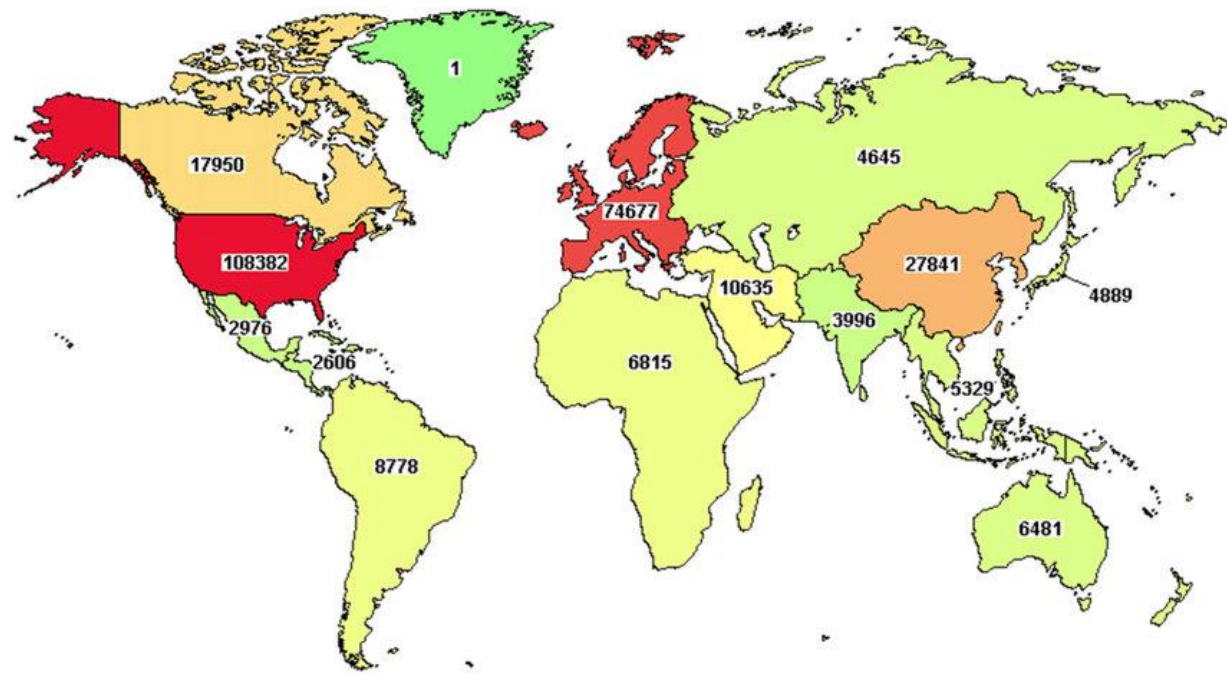




AREVIK STEPANYAN

NATIONAL CENTER OF ONCOLOGY AFTER V.A. FANARJAN

Map of Studies Registered on ClinicalTrials.gov 2018



Patient Recruitment Challenges

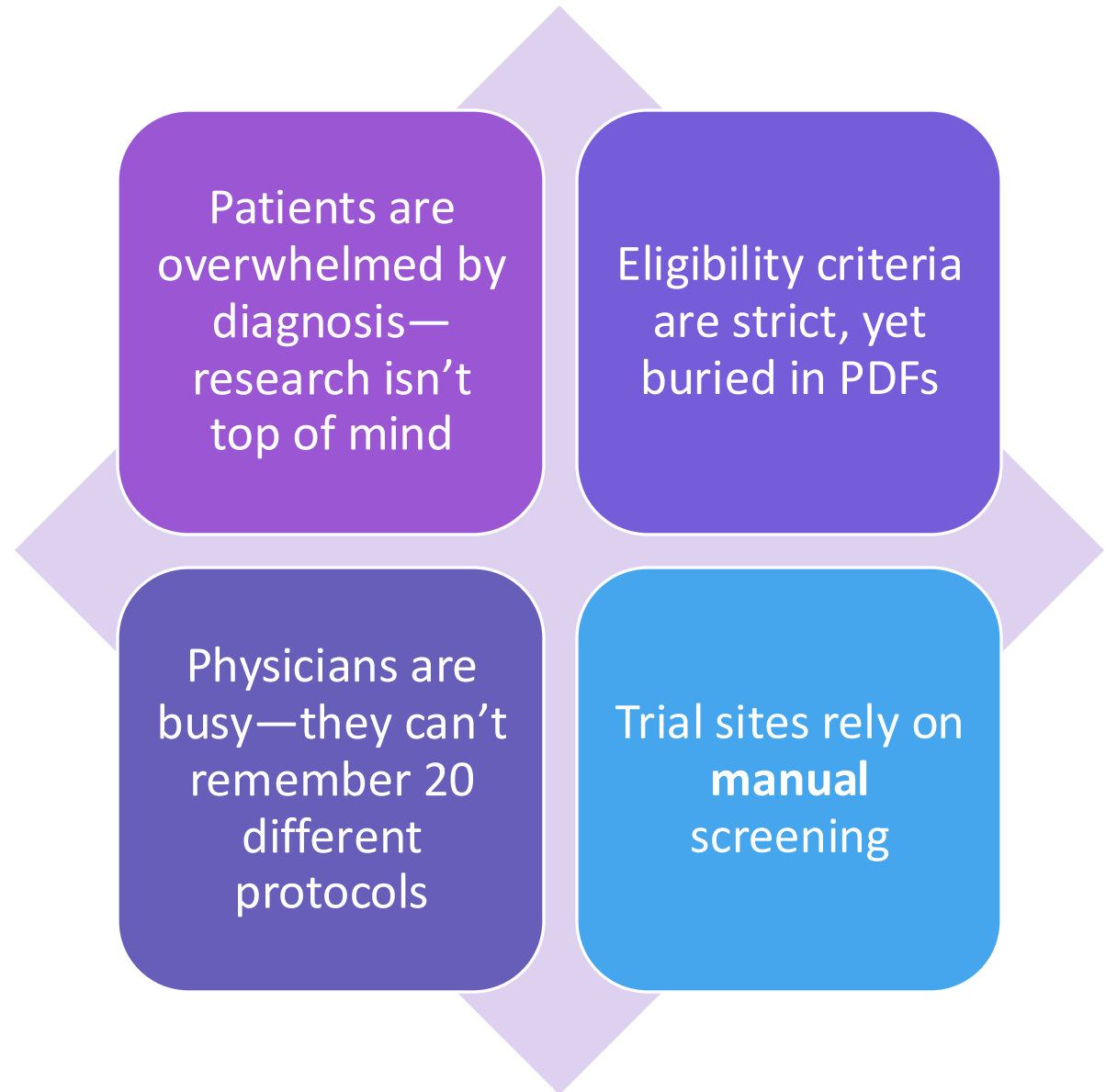
- High dropout rates.
- Difficulty in meeting enrollment timelines.
- Limited awareness among patients.

Patient Adherence Challenges

- Complexity of trial protocols.
- Long-term commitment required.

The Challenges in Oncology Trials

Why This Happens



Global Best Practices Are Emerging



Integrating hospital data systems (HIMS) with trial platforms



Using AI for real-time patient matching



Digitally supporting patients throughout the trial

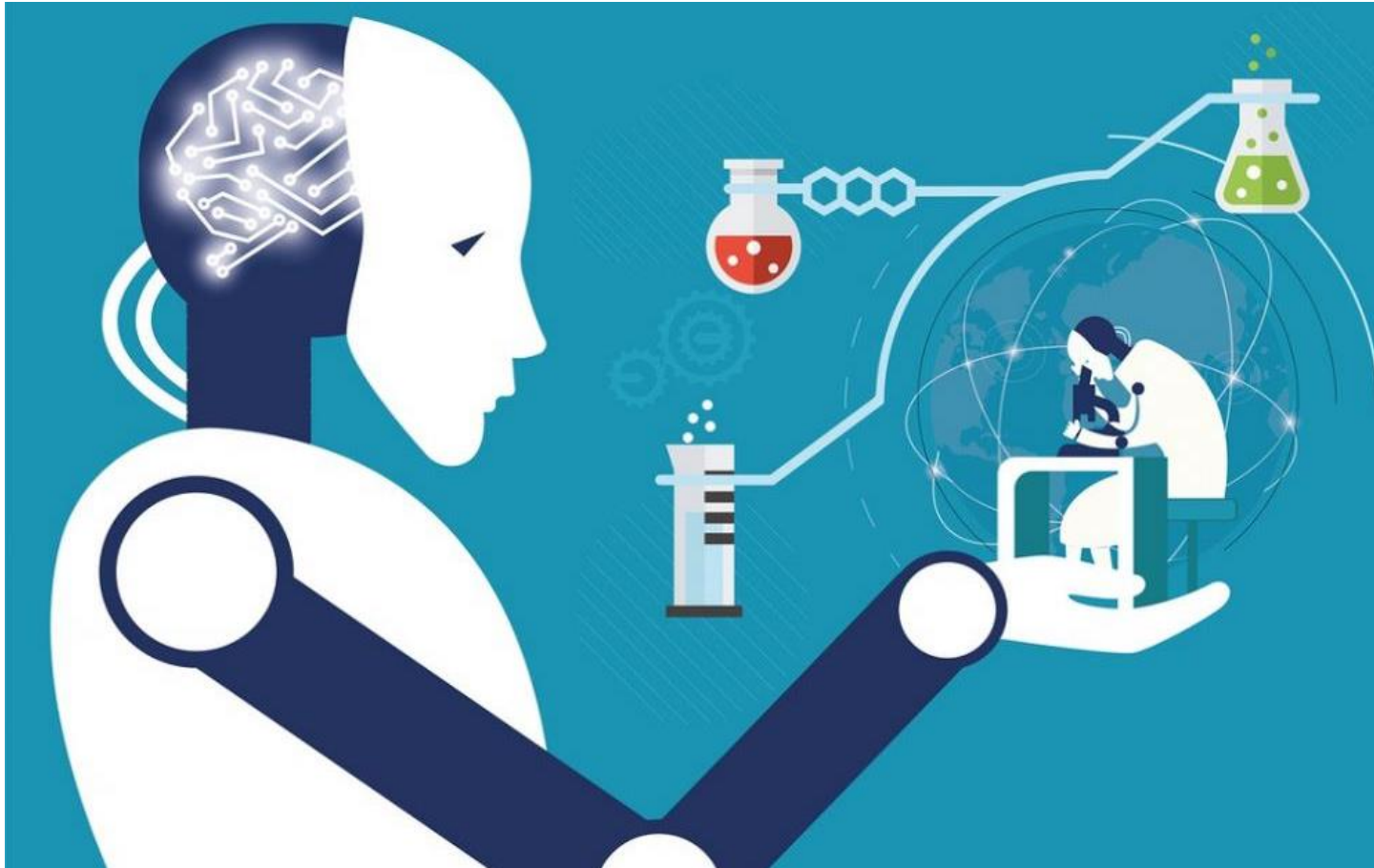


What Happens Without Integration

Building an Integrated System

- Linking HIMS and eCRFs so patient data flows directly into trial systems
- Embedding eligibility logic into the system—so the system flags patients, not people
- Using dashboards for coordinators to see potential matches across departments
- **Using More than 15 systems at once for trial management**





The AI Advantage

Faster Recruitment

Higher Enrollment Rates

Patient Identification

Reduced Screen Failures

EHR Screening Efficiency

Supporting Adherence Digitally

**Mobile
apps**

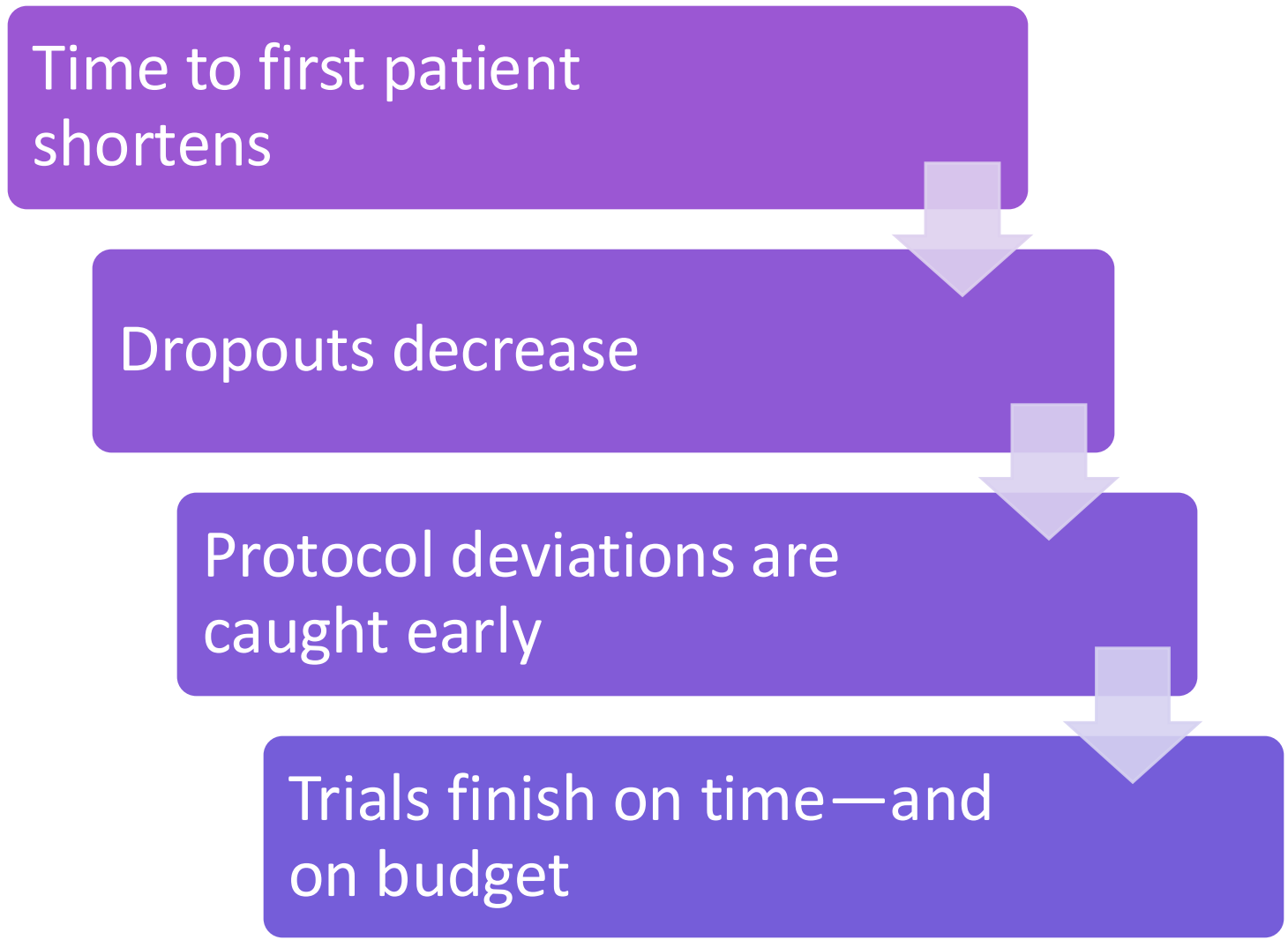
Telehealth

**Patient
diaries**



What Makes
Implementation
Successful

Time to first patient
shortens



```
graph TD; A[Time to first patient shortens] --> B[Dropouts decrease]; B --> C[Protocol deviations are caught early]; C --> D[Trials finish on time—and on budget];
```

The diagram consists of four purple rectangular boxes arranged in a descending staircase pattern from top-left to bottom-right. Each box contains white text. Light purple arrows point downwards from the bottom of one box to the top of the next box below it. A vertical line is positioned to the right of the boxes, separating them from the title text.

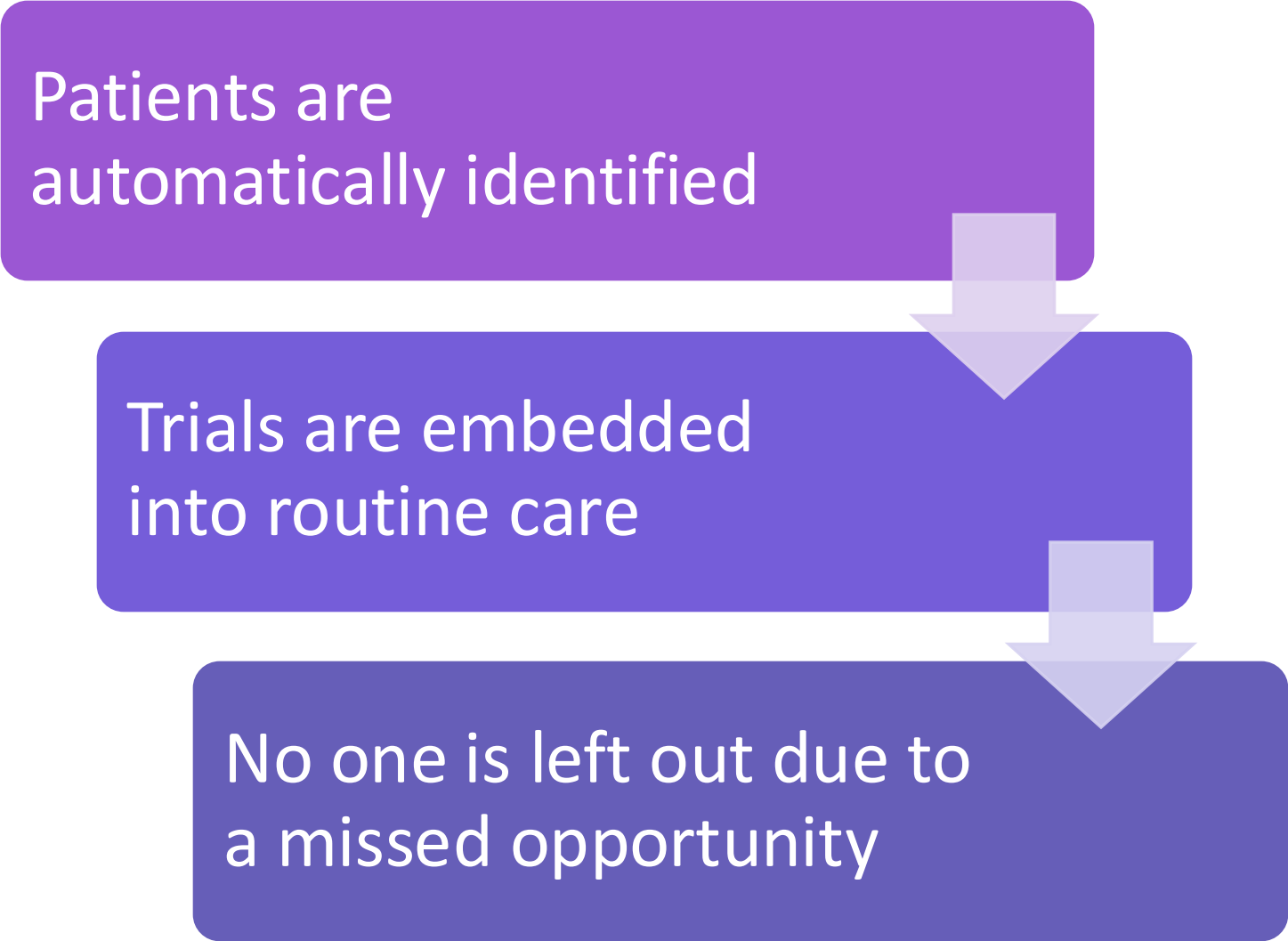
Dropouts decrease

Protocol deviations are
caught early

Trials finish on time—and
on budget

The Big
Picture
Impact

Patients are
automatically identified



```
graph TD; A[Patients are automatically identified] --> B[Trials are embedded into routine care]; B --> C[No one is left out due to a missed opportunity];
```

Trials are embedded
into routine care

No one is left out due to
a missed opportunity

Imagine the
Future

But what if you don't have AI yet?



Introduce decision trees for initial eligibility screening



Integrate them into tumor board meetings



Encourage sponsors to incentivize intensive screening efforts at the site level



Patients shouldn't
have to find the trial.
The trial should find
the patient.

A faint, light-gray illustration of a group of eight medical professionals (doctors and nurses) standing in a row, holding various medical equipment like stethoscopes and charts, serves as a background for the text.

Thank you

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