

The Trials of Trial Discovery

Is Your Registration Hurting Recruitment?

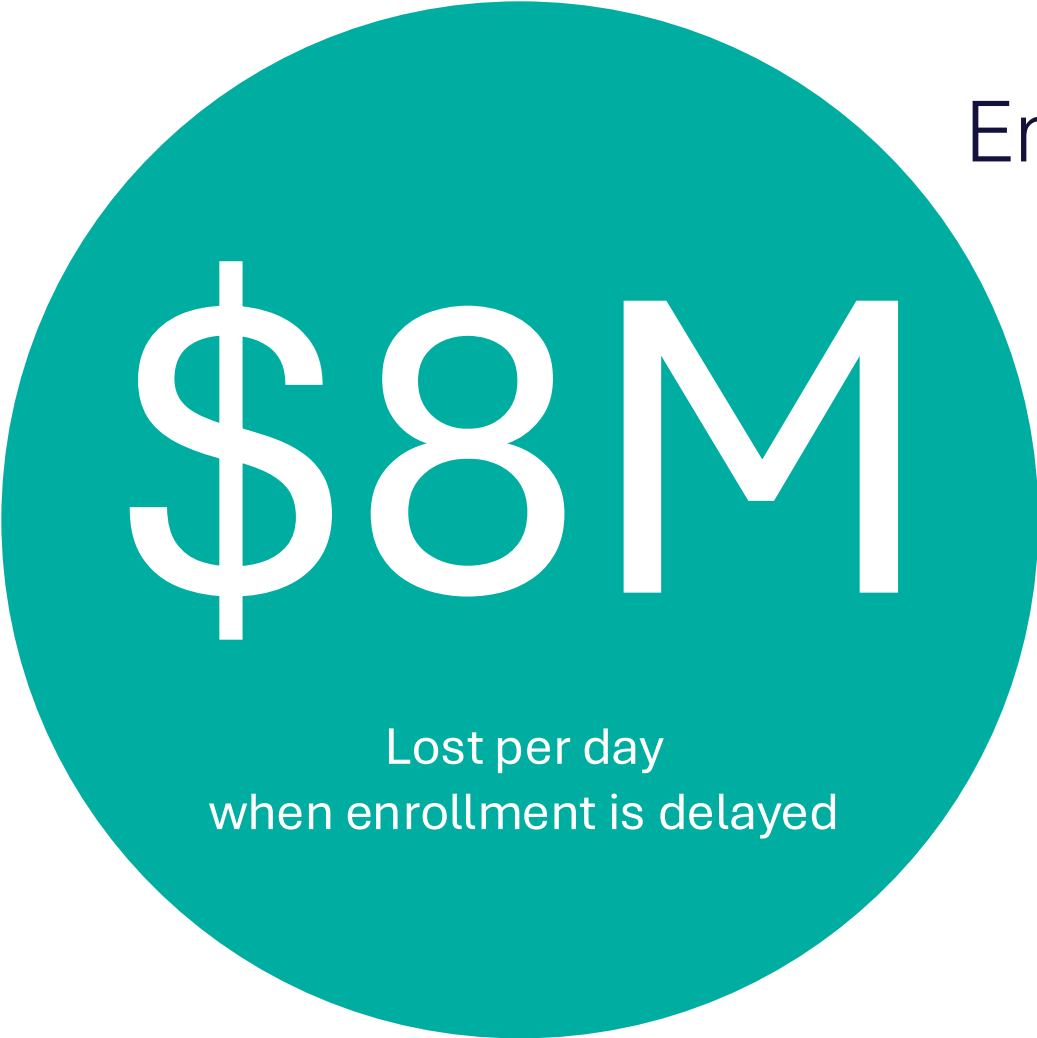
PHUSE US Connect 2026 | Data Transparency Pavilion

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\$8M

Lost per day
when enrollment is delayed

Enrollment delays are expensive...

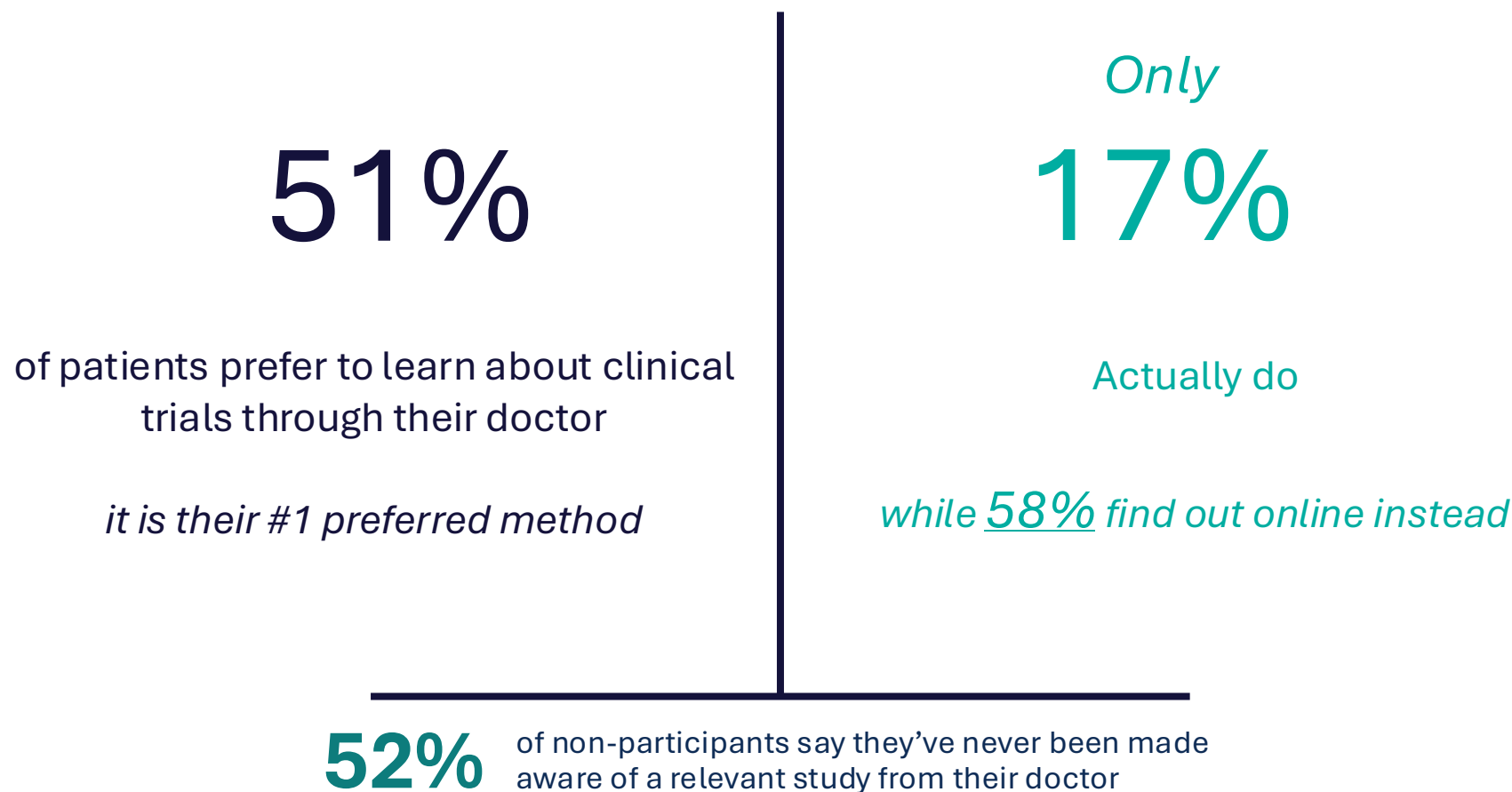
and most trials miss their targets

80%
of trials miss
enrollment targets

20%
of trial budgets
go to recruitment

Patients want physicians to guide them to trials

The conversation mostly isn't happening.



If patients want guidance from their doctor,
why isn't it happening?

CLINICAL
TRIALS

Need participants

PHYSICIANS

Evaluate trials

PATIENTS &
PARTICIANTS

Expect guidance

We asked physicians about their experiences finding and referring clinical trials

Study Overview

METHODOLOGY

Cross-sectional online survey

144 practicing physicians surveyed
91 searched for trials in the past year
16 specialties

Fielded Oct-Dec 2025 via Skipta physician platform

RESEARCH QUESTIONS

Q1 Sources & perceived quality

Q2 Information challenges

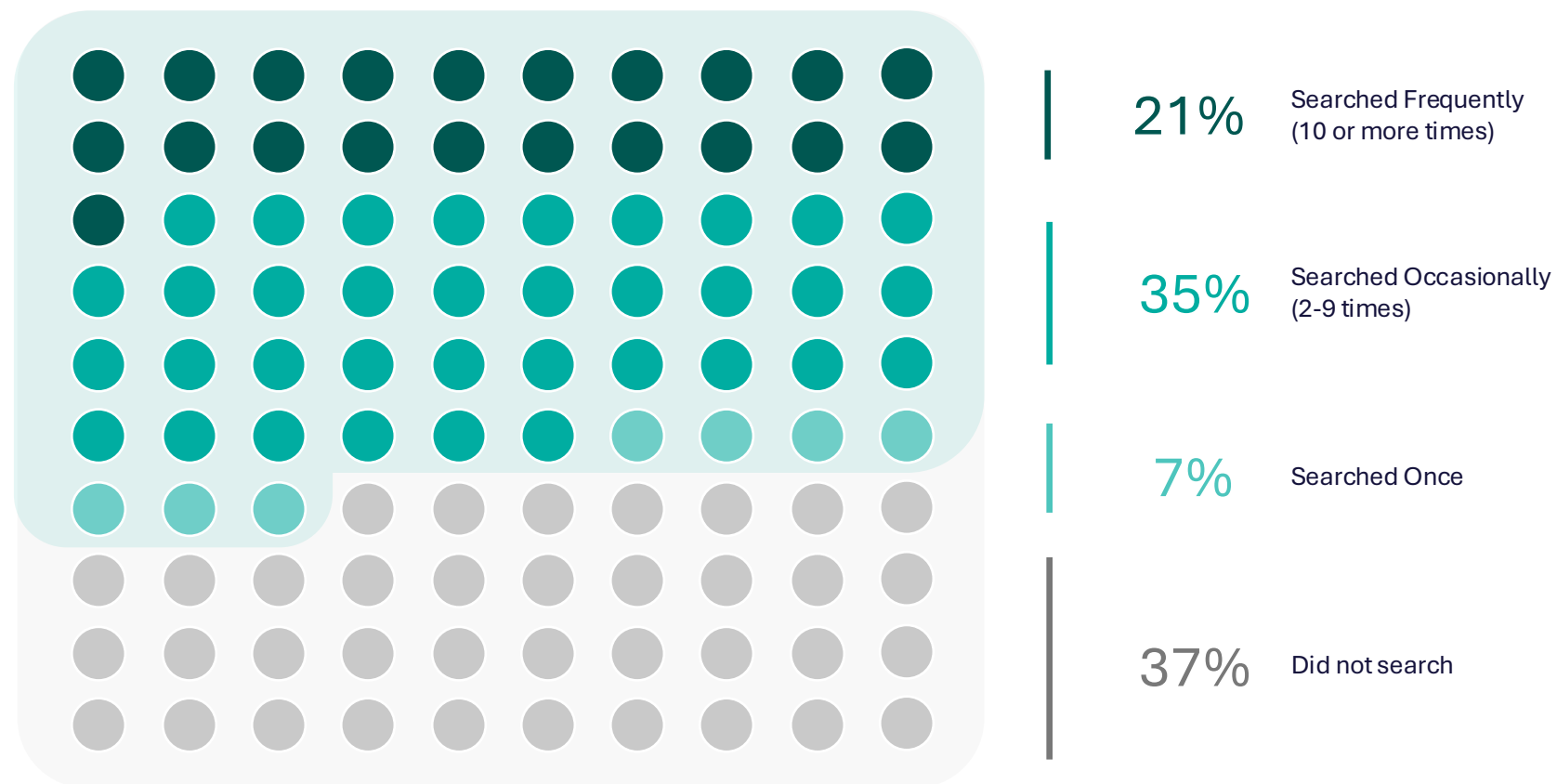
Q3 Impact on referrals

Q4 Data needed for evaluation

Most respondents do search for trials

Even though trial discussions with patients appear limited

63%
Searched for trials
in the past year (n=91)



Many sources. Limited trust

Source	Trust Signal	% Using	% Highly Recommended
Colleagues/Specialists	★★★★☆	93%	37%
ClinicalTrials.gov	★★★★☆	86%	25%
Medical Journals	★★★☆☆	80%	24%
Research Coordinators	★★★☆☆	71%	28%
Specialty Society Websites	★★☆☆☆	75%	13%
Commercial CT Platforms	★★☆☆☆	58%	6%
Pharma Company Websites	★★☆☆☆	60%	3%

Key Insights

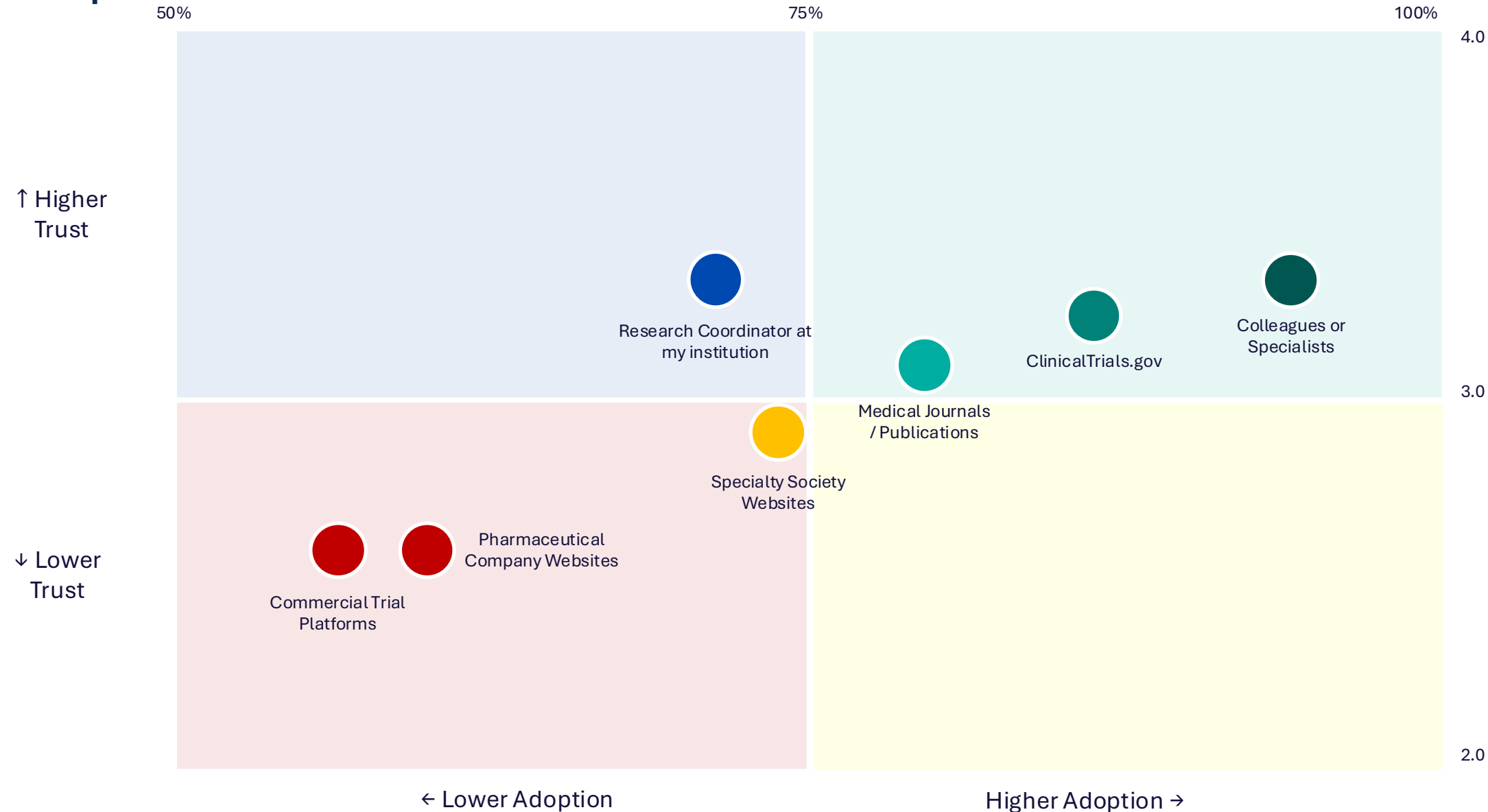
Colleagues rank highest in both usage
AND trust signal

ClinicalTrials.gov has strong reach not
as highly recommended

Commercial and pharma company
platforms are rarely recommended

Trust signal reflects mean perceived quality * % usage

Adoption – Trust Matrix



Searching for trials often doesn't lead to referrals

Most respondents

53%

Rarely or never
lead to a referral

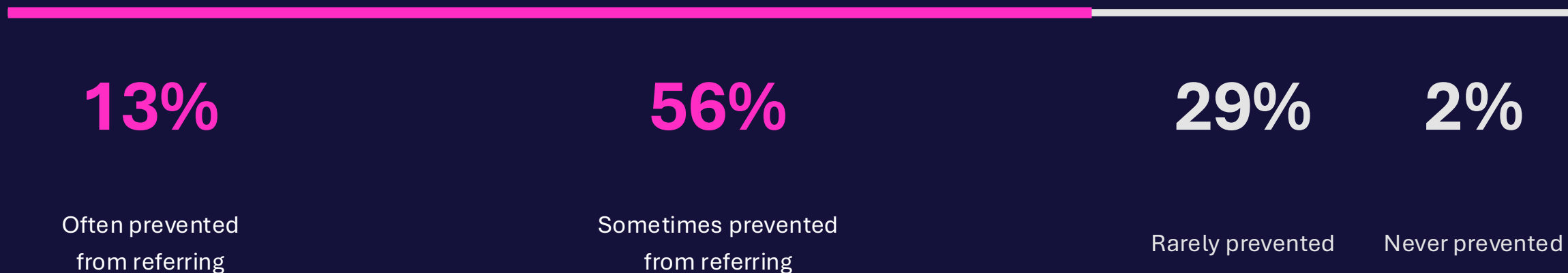
47%

Refer half the time or more

Information barriers are blocking real referrals

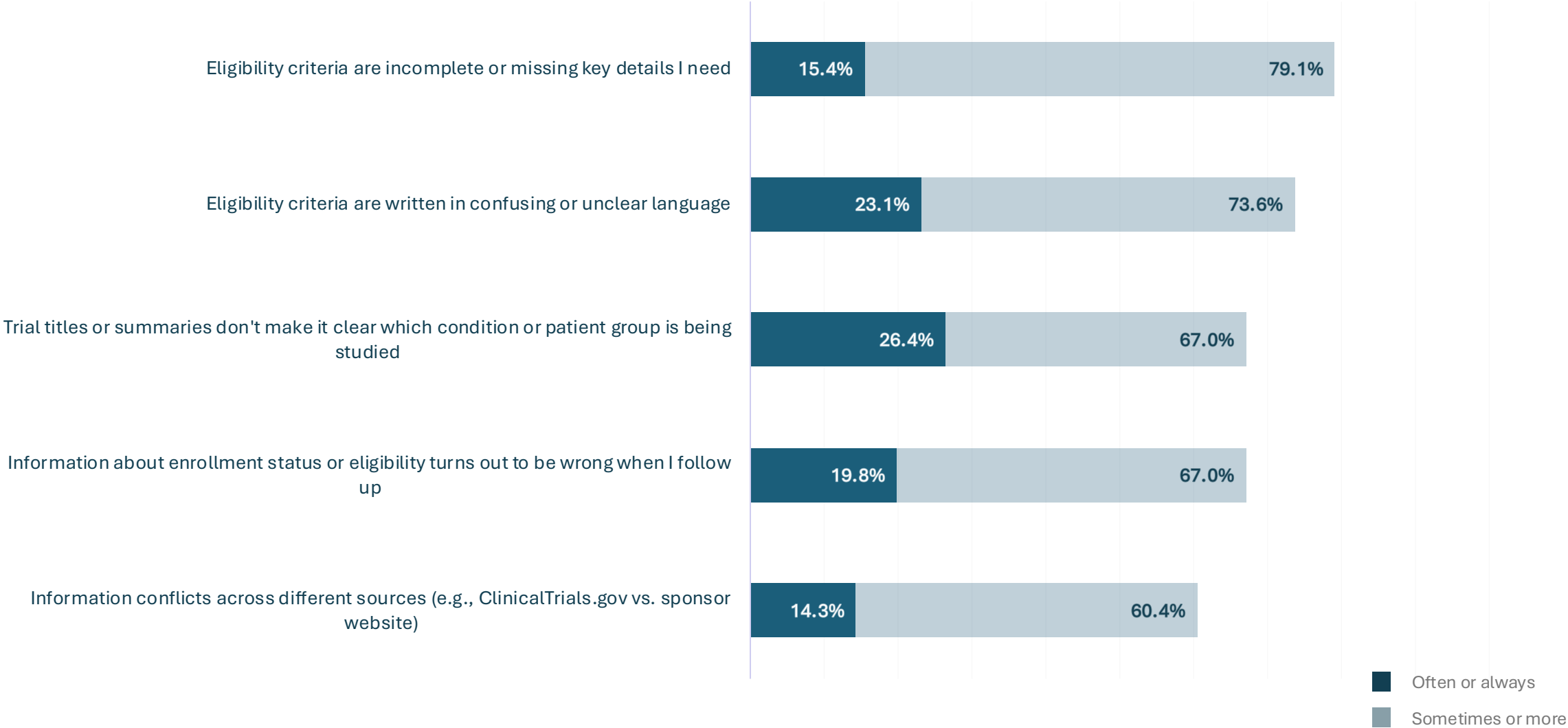
69%

of physicians report that information barriers sometimes or often prevent referrals they would otherwise make.



Physicians encounter reliability problems

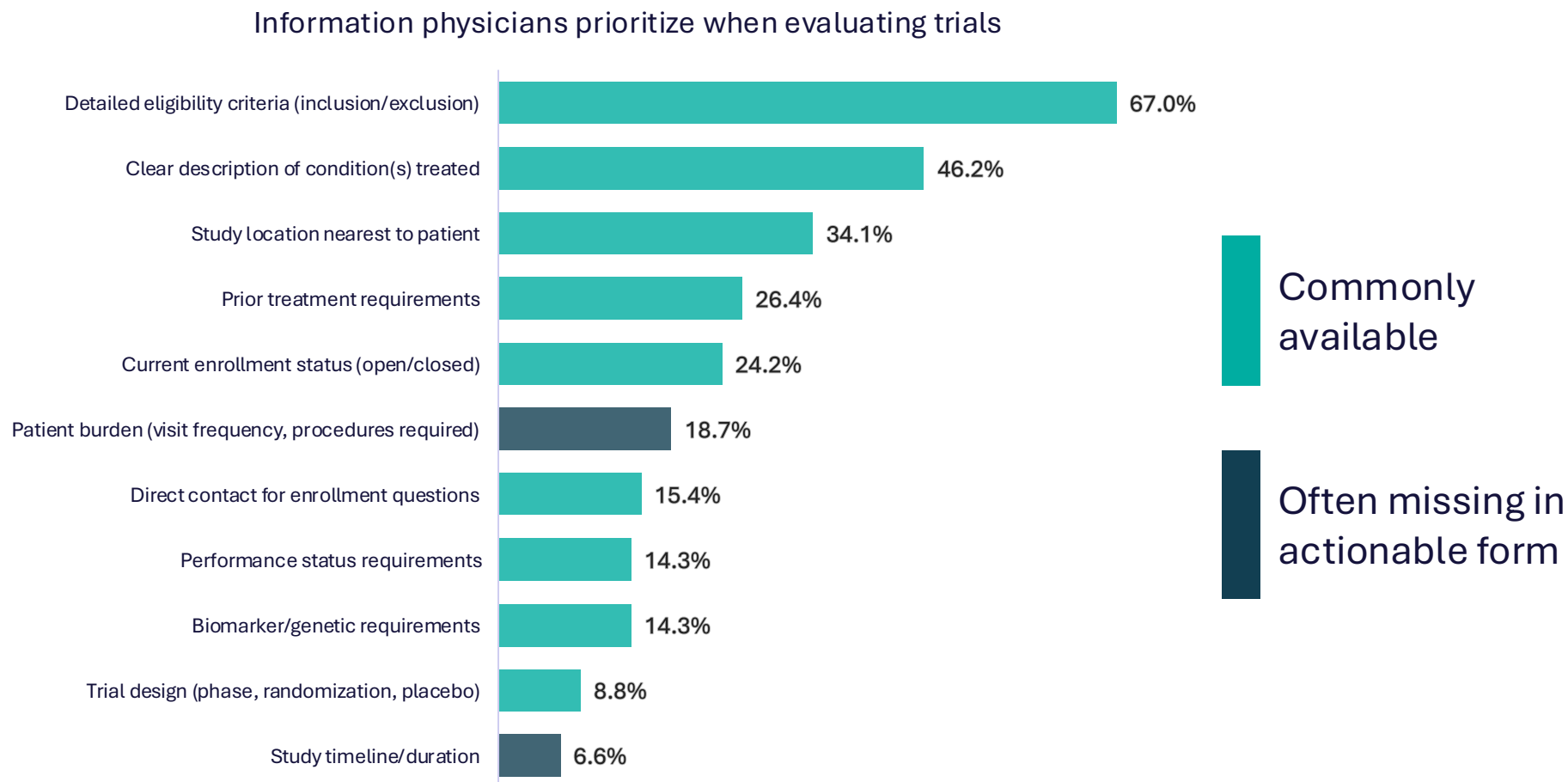
How often physicians encounter information quality problems



How disease wording impacts the trials you find

Search Term	Trials Found
Head and Neck Squamous Cell Carcinoma	2,500
Head and Neck Cancer	6,895
Cancer of the Head and Neck	4,283
HNSCC	1,532
Oral cavity SCC	611
Tongue cancer	152
Squamous cell carcinoma of the tongue	106
SCC of the oral cavity	31
All solid tumors	

When evaluating a trial, physicians look for this content



What disclosure teams can do right now

Five structural improvements that reduce referral friction

1

Informative title

Improves filtering and search relevance

Include condition and population in the title and brief summary

2

Clear eligibility

Enables rapid triage of trial eligibility

Present gating criteria early and clearly and avoid burying disqualifiers

3

Precise conditions

Reduces missed matches in condition-based searches

Use clinical terminology as primary, include plain-language equivalents

4

Correct and current status

Prevents pursuit of closed trials and preserves trust in registry information

Ensure timely submission of status changes and coordination with study teams

5

Actionable referrals

Enables physicians to refer patients directly

Provide contact pathways and consistent cross-platform information

Disclosure teams influence whether trial searches succeed

Better trial information makes physician searches more actionable

Clear and accurate information enables discovery

Thank you

