

Unlocking Success in the Industry-Sponsored Trial Portfolio: The Impact of a Solid Tumor Research Science Liaison Position

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1. Background

In 2023, the University of North Carolina Lineberger Comprehensive Cancer Center (LCCC) established the Research Science Liaison (RSL) position to enhance clinical trial portfolios by increasing engagement with industry-sponsored clinical trials (ISTs). RSLs serve as key points of contact for industry partners, facilitating the exchange of medical and scientific information relevant to Lineberger's clinical and translational research priorities. The primary responsibilities of RSLs include meeting with medical science liaisons (MSLs) and other industry representatives to learn about potential ISTs, presenting relevant trials to disease group leaders, and facilitating trial review and feasibility assessments.

2. Goals

To evaluate the impact of the RSL position, data from 2023-2024 was collected across solid tumor disease groups and compared to baseline data from 2022.

3. Solutions and Methods

RSLs systematically tracked the outcomes of all studies considered at Lineberger, including the stage at which studies were declined. Key treatment IST metrics were examined for 10 solid tumor disease groups: number of ISTs selected, disease group participation in ISTs, the number of unique ISTs that were accrued to, and the number of total patients who enrolled to an IST.

4. Outcomes

Implementation of the RSL position correlated with increases in all IST metrics considered. In 2024 the number of ISTs selected for activation was approximately 2.5 times higher than in 2022 and the number of solid tumor disease groups that enrolled patients to an IST doubled. The number of IST accruals increased by 64 percent from 2022 to 2024, and the number of distinct ISTs that enrolled patients grew by 53 percent.

RSLs also tracked how studies (from all sources) progressed through the consideration process, and how the composition of trials considered compared to trials ultimately opened for accrual. We found that investigators remain selective when considering ISTs during feasibility: ISTs were over-represented in trials considered (84%) compared to trials opened (59%). Trials from large sponsors (>500 employees) comprised a greater percentage of ISTs considered compared to trials from small sponsors (57% vs 43%) but made up a smaller portion of studies selected for activation (42% vs 58%).

5. Lessons Learned and Future Directions

The timelines for trial selection and activation mean that most measurable outcomes of RSL impact are lagging indicators. Additionally, while the observed changes in IST selection and accrual align with the period in which RSLs were hired and gained experience, these trends cannot be solely attributed to the RSL position.

We anticipate that the impact of RSLs will grow as they strengthen and expand relationships with MSLs and LCCC investigators. Thus, we will continue to track key metrics into 2025 and beyond. In the future,

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RSLs will build on established industry relationships by identifying industry-based funding strategies for LCCC investigators.

Figure

