

## **Physician Referrals: The Power of the Physician/Patient Partnership**

**By Sarah Mandracchia**

Clinical researchers often overlook the important impact a patient’s clinical care team has on his or her treatment decisions, including whether to participate in a clinical research study. Since patients are at the center of their clinical care team, patient-centricity demands their involvement. If a clinical trial is the best option for a patient, his or her physician should make the referral, but it happens far too rarely.

Many investigators have failed in their attempts to obtain patient referrals from other physicians because they have not first built a strong, trusting relationship with the patient’s physician. With such relationships in place, many physicians have had good experiences referring their patients for clinical trials. In a recent BBK survey of referring physicians, 98% of physicians expressed their willingness to continue referring their patients to clinical trials in which they were not the investigator.

### **Obstacles**

Physicians are more likely to invest the time and effort to refer patients for a clinical trial if the referral process is quick and easy, and if the study fairly compensates the physician for their time (but not for referrals *per se*). The investigator might provide (or reimburse the cost of personnel for) labor-intensive tasks like chart reviews.

Physicians are no strangers to working with other physicians in the care of a patient. These networks require trust. Similarly, investigators cannot expect other physicians to refer patients for clinical trials unless those physicians are confident they will not lose their patients as a result. In other words, referring physicians must know the investigator will not take their patients or refer them to competitive physicians. In addition, when an investigator enrolls a patient without a (potential) referring physician, the investigator can strengthen relationships by referring those patients, when appropriate, to physicians who provide referrals. Ideally, the clinical trial will not just utilize but also strengthen these referral networks.

### **The Role of the Study Sponsor, CRO or Patient Recruitment Firm**

The study sponsor, CRO or patient recruitment firm can facilitate patient referrals in the following ways:

- Foster referral relationships between investigators and local physicians. Coach investigators on how to approach, reassure and motivate physicians who might provide referrals. Provide educational materials that investigators can provide to other physicians.
- Provide educational materials about each study opportunity to referring physicians so they can evaluate their patient population for potential referrals. Physicians are motivated to help; they just need the right tools. They need informative but streamlined educational materials that highlight how their patients might benefit, key eligibility criteria, physical location, and a simple call to action.
- Support investigators in their communications with referring physicians to maintain engagement before, during and after a clinical trial. Keep referring physicians up to

date on pending studies, on their patients' progress in ongoing studies, and on the results from completed studies.

- Advise investigators and referring physicians on how to involve their study coordinators, nurses and other personnel in the referral process. If the physician is willing but his or her staff is not, pay attention to their needs.
- Create a database of physicians willing to refer patients to clinical trials. Investigators might not know which physicians in their local communities are open to referring patients to a clinical trials, so arrange the introductions.

Sponsors, CROs and patient recruitment firms cannot create referral relationships; they can only the investigators in doing so. It is therefore essential that the investigator appreciate this support and how he or she will benefit.

### **Conclusion**

Patient referrals are best seen as the role of a patient's clinical care-givers working together in a patient-centric network to benefit the patient, not the physicians, and not the investigator. With this perspective in mind, sponsors, CROs and patient recruitment firms can be accepted into the network for their supporting but important role in enhancing the value of the network to patients who can benefit from participation in a clinical study.

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