PICS 2020: Working Towards Expanding Access and Inclusivity

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Internship Description

• Mainly worked with Dr. Correa
  • Epilepsy Bioinformatics Study for Antiepileptogenic Therapy (EpiBioS4Rx) trial
  • Public Engagement Core (PEC)
    • address barriers and facilitators to clinical research participation
  • Expanding access & ensuring inclusivity
Overview

• Selected Projects
  • Systematic Review: Use of remote consent in Intensive Care Unit (ICU) clinical research
  • Advocacy writing
• Summary of other summer work
• Reflections
• Next steps
Systematic Review: Remote Consent in ICU Research Studies

- **Systematic Review:** Identify, evaluate, and summarize findings of all relevant studies on a topic
- **Our Topic & Purpose**
  - Analyze the use of remote consent in the ICU for clinical research participation
    - telephone/smartphone, video
- **Relevance**
  - Expand access to clinical trial participation
    - include a broader sample through remote technologies (Bunnell et al., 2020)
  - COVID-19 pandemic
    - remote consent may support continuation of clinical research (Rai & Frei, 2020)
Systematic Review: Remote Consent in ICU Research Studies

• Initial Search Process
  • Databases searched: PubMed, Embase, Web of Science
  • Inclusion criteria
    • Remote consent obtained in:
      • ICU or emergency/prehospital setting (receive critical care within 48 hours)
    • Studies conducted after December 1999
      • 50% U.S. pop. has access to internet
    • No restrictions on age, sex, language, and region (i.e. worldwide)
  • Worked with an Einstein College of Medicine librarian
Search Modifications & Planned Workflow

• Modifications
  • Time restriction: (2005 – present)
    • 68% U.S. pop. has access to internet
  • At least 50% access across racial groups

Figure 1: Workflow Diagram
<table>
<thead>
<tr>
<th>Title</th>
<th>Author, Year</th>
<th>Target Medical Condition</th>
<th>Remote Method</th>
<th>Remote Recruitment Rate</th>
<th>Remote Consent Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valuable Studies: Data Extraction</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td><strong>Telemedicine-guided remote enrollment of patients into an acute stroke trial</strong></td>
<td>Wu, 2015</td>
<td>stroke</td>
<td>audiovisual</td>
<td>66.67% (6/9)</td>
<td>66.67% (6/9)</td>
</tr>
<tr>
<td><strong>The Deferred Consent Model in a Prospective Observational Study Evaluating Myocardial Injury in the Intensive Care Unit</strong></td>
<td>Honarmand, 2016</td>
<td>myocardial injury</td>
<td>audio</td>
<td>92.5% (37/40)</td>
<td>92.5% (37/40)</td>
</tr>
<tr>
<td><strong>Physician-investigator Phone Elicitation of Consent in the Field: A Novel Method to Obtain Explicit Informed Consent for Prehospital Clinical Research - (FAST-MAG)</strong></td>
<td>Saver, 2006</td>
<td>stroke</td>
<td>audio</td>
<td>100% (20/20)</td>
<td>100% (20/20)</td>
</tr>
<tr>
<td><strong>Simultaneous Ring voice-over-Internet Phone System Enables Rapid Physician Elicitation of Explicit Informed Consent in Prehospital Stroke Treatment Trials - (FAST-MAG)</strong></td>
<td>Sanossian, 2009</td>
<td>stroke</td>
<td>audio</td>
<td>34.6% (18/52)</td>
<td>34.6% (18/52)</td>
</tr>
<tr>
<td><strong>A Telestroke Network Enhances Recruitment into Acute Stroke Clinical Trials</strong></td>
<td>Switzer, 2010</td>
<td>stroke</td>
<td>audiovisual</td>
<td>100% (19/19)</td>
<td>10.5% (2/19)</td>
</tr>
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Advocacy Writing: Teleneurology

• Telehealth use during Covid-19
  • Many institutions have turned to telemedicine (Hollander & Carr, 2020)
  • Covid-19 has shown acute neurological complications (Asadi-Pooya & Simani, 2020)
    • long term effects? → importance of continued remote follow up
• Important to consider pre-existing socioeconomic and infrastructure disparities
  • particularly in Bronx populations (Stringer, 2014)
    • 21% of residents do not have a computer at home
    • 13% do not have a subscription to internet access
  • internet/smartphone access limited in Black & Hispanic populations
Advocacy Writing: Teleneurology

• Collaborated with other authors to raise awareness about this issue
  • *Access to care matters: Remote Healthcare Needs in the Bronx During Covid-19*
• Call to actions
  • Expand and provide open access to telehealth training for neurologists
  • Screen for and address needs of patients facing socioeconomic insecurities
    • technological resources, broadband internet services, digital literacy
  • Ensure telehealth services are permanently covered by insurance providers
Additional Projects: Access and Inclusivity

• Advocacy pieces:
  • Remote Clinical Exposure Experiences: Fortifying the Medical Educational Pipeline During Covid-19 and Beyond
  • Expanding paid sick leave as a public health tool in the Covid-19 pandemic

• PEC projects: Stakeholder involvement in focus group and questionnaire design
Reflections

• Grateful to work on issues facing my own community
  • Was able to deeply explore and consider disparities familiar to me
• Developed academic & professional research and communications skills
  • Database searching, article review, scientific writing
• Enabled personal development through career planning
Next Steps

• Continuation of these projects and my partnership with Dr. Correa
• Find new methods of involvement & advocacy to address these issues apparent in my community
• Integrate these issues/ perspectives into my professional plans (medical school and beyond)
Acknowledgements

I would like to thank Dr. Correa, the many research collaborators I had the opportunity to work with, and Dr. Binder for all their guidance and help this summer.
References


