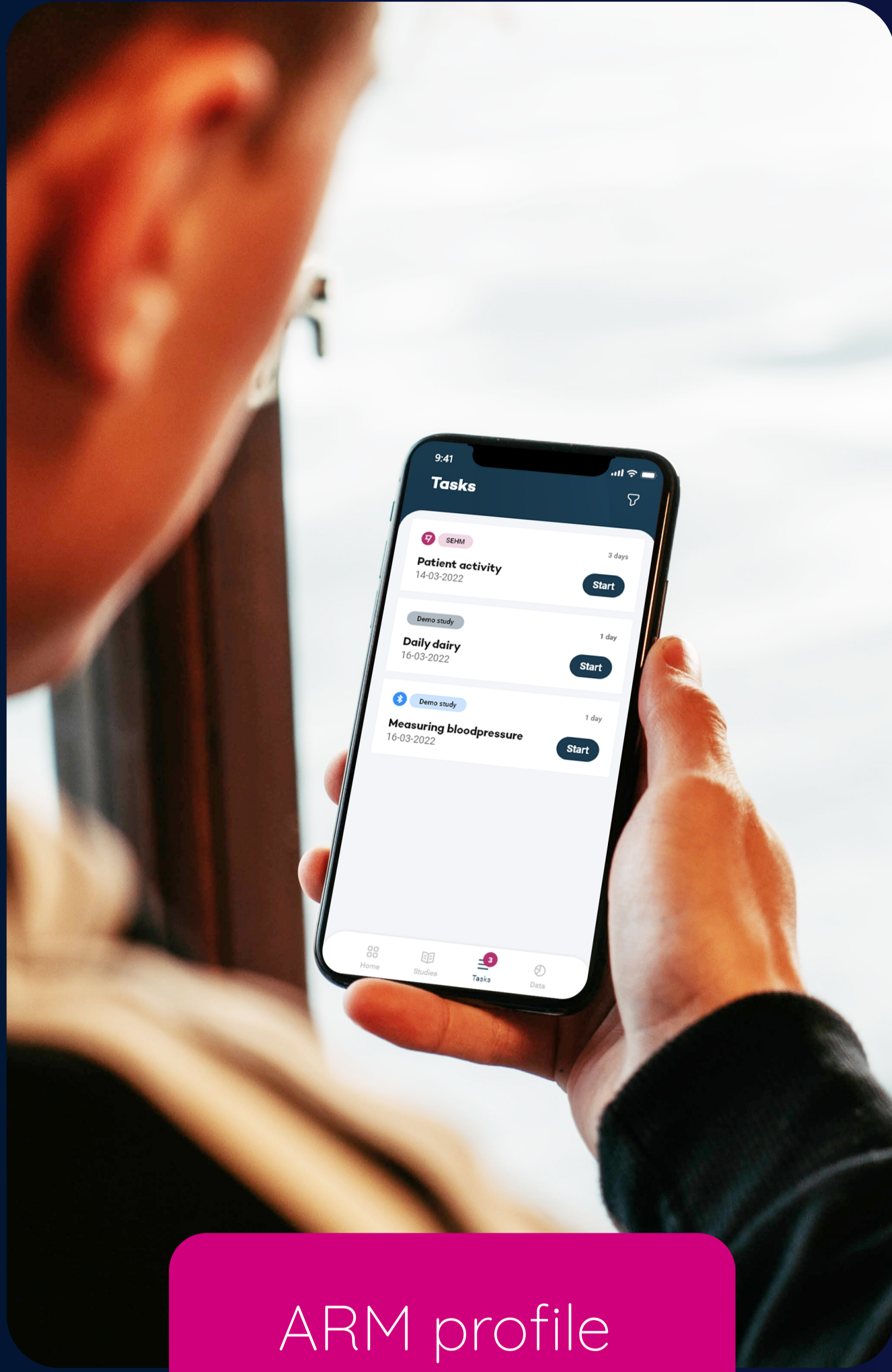
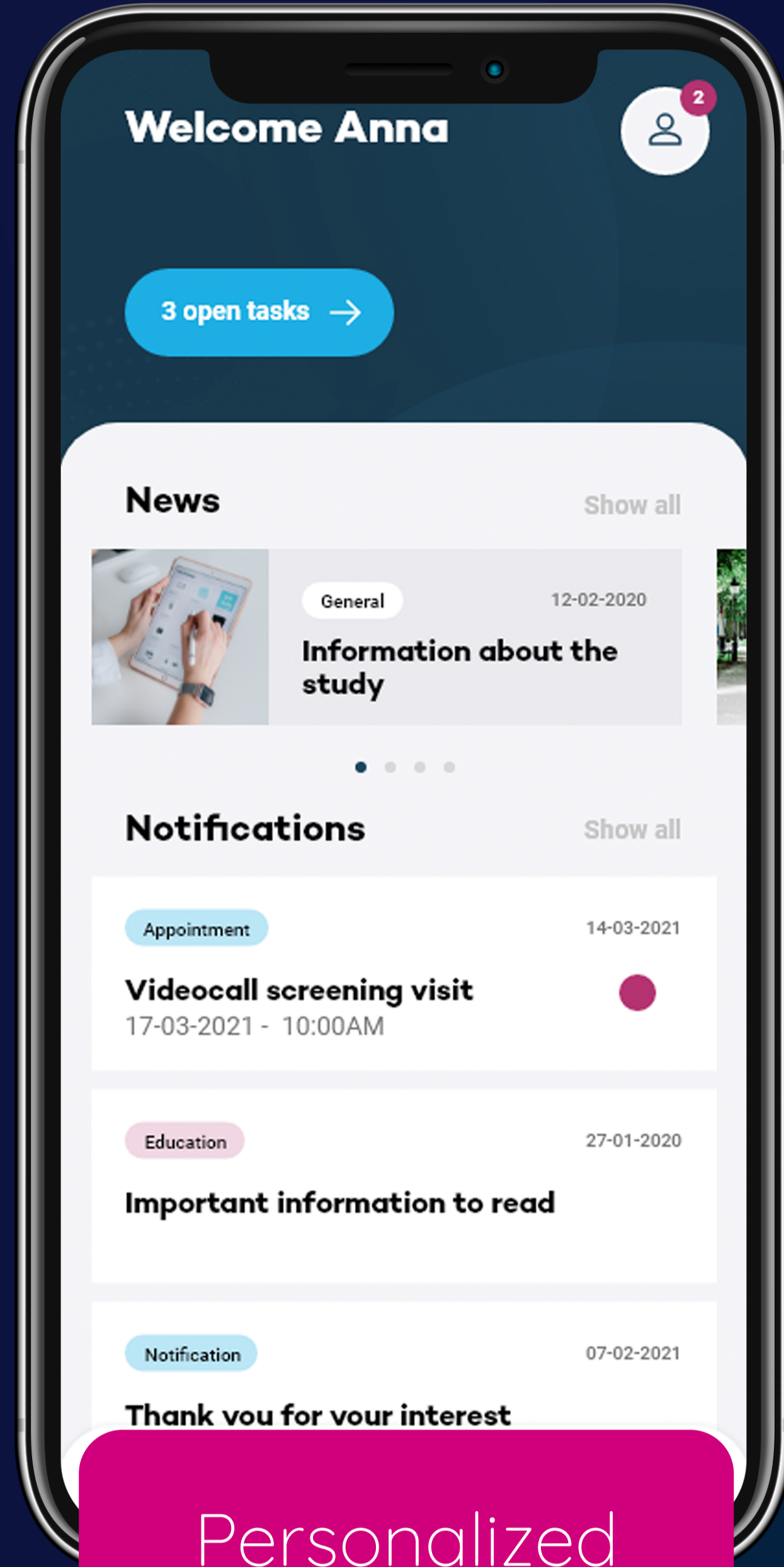




Adherence Risk Management Services



ARM profile questionnaire



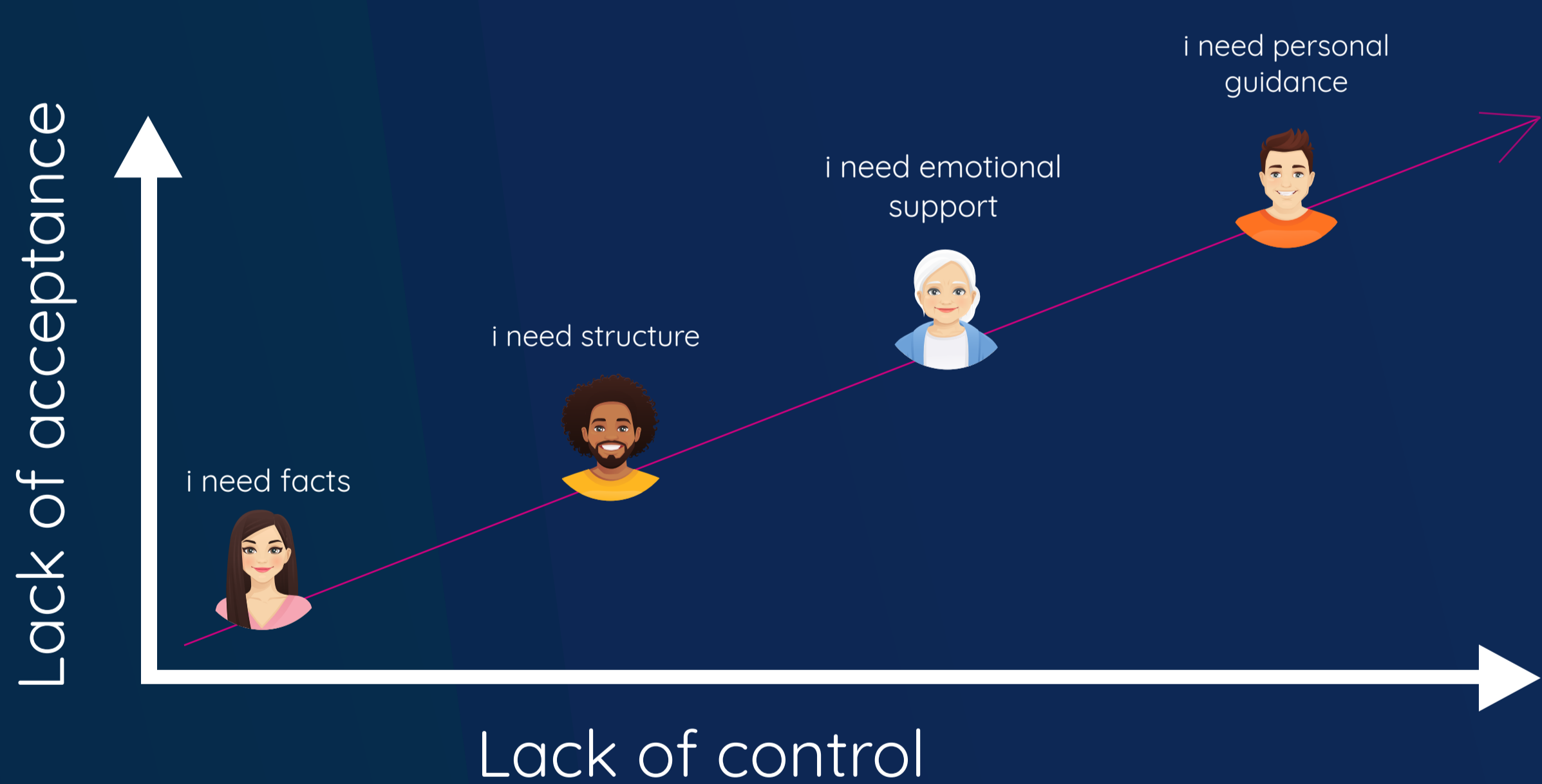
Personalized messaging



Study team ARM dashboard and notifications

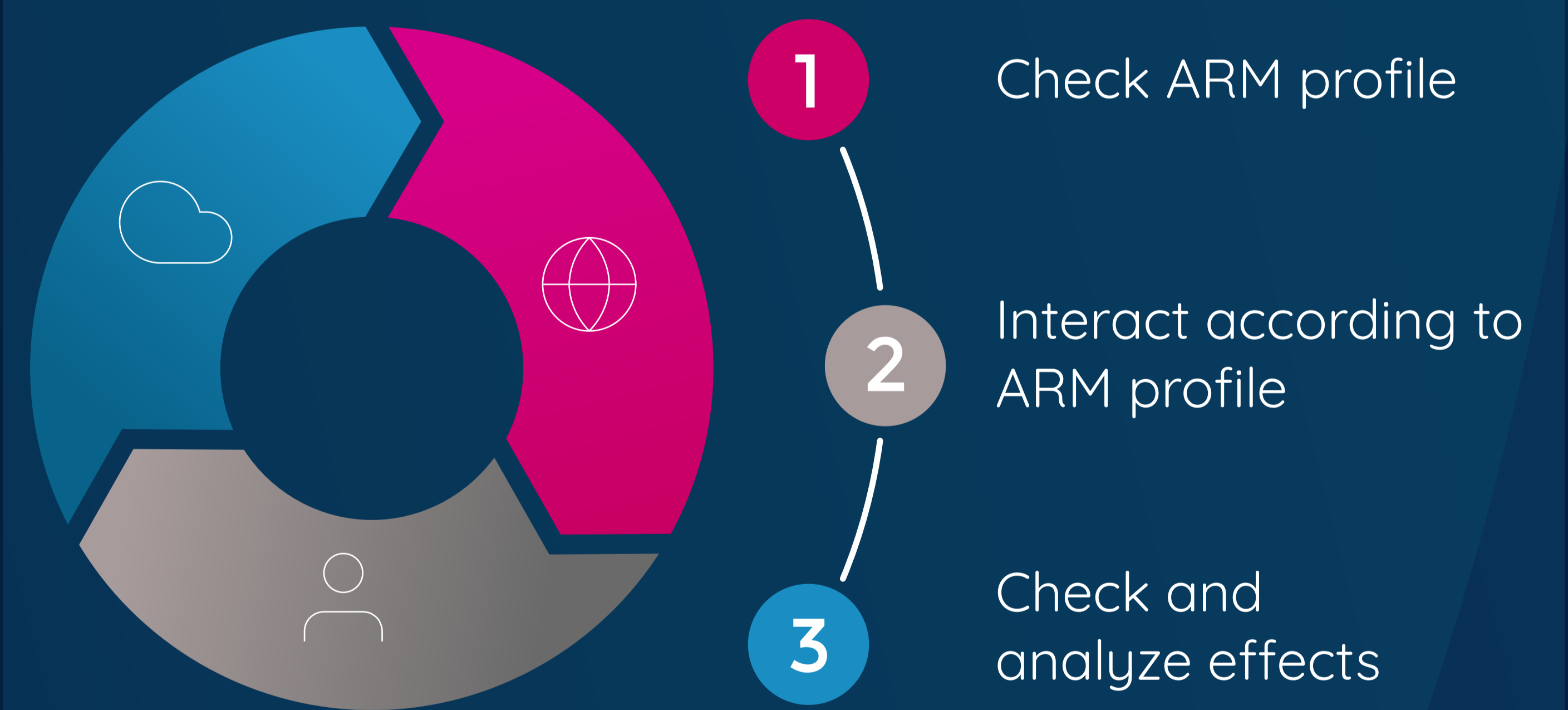
In clinical research, our industry has always been under the impression that non-adherence was not such a major issue. But we were simply ignoring the tell-tale signs. A 30% average and ongoing early drop-out rate is such a sign. And almost 70% of the protocol deviations possibly linked to non-adherence is another sign. Imagine the effects this has on timelines, costs, efficacy, and your clinical dataset!

In 2017 we realized that adherence is very much about human behavior and decided to take a leap forward by developing our Adherence Risk Management (ARM) services based on behavioral science. At the core of ARM is the Subjective Experienced Health Model (SEHM) developed by Bloem & Stalpers. SEHM is disease-agnostic, proven, and easy to use and enables us to provide dynamic, personalized patient support during clinical studies. And at the same time support your sites with actionable information on the adherence status of patients!



ARM preparation

1. Identify the top risk factors of non adherence for your clinical study
2. Develop communications and support package for each ARM profile targeting trial events and risk factors. These packages are designed to motivate improve adherent behaviour.



ARM execution

1. Identify the ARM profile of each patient
2. Push the right information and support to each patient, based on their up-to-date ARM profile. Each patient will:
 - a. Get the right information in the right form
 - b. Get the right level of support at the right time
 - c. Feel acknowledged, appreciated, and treated as an individual again
3. Send alerts to the clinical trial team if and when a patient's ARM profile moves into the high-risk zone.