



MEDIDATA DETECT


PROACTIVELY IMPROVE DATA QUALITY AND REDUCE TRIAL RISK




THE RISKS OF DATA QUALITY ISSUES


**17%**
trials are delayed by 3 months due to data quality issues


**24%**
applications that require one or more resubmissions before approval¹


**52%**
resubmissions that had inconsistent study results¹


**435 days**
median approval delay after a first unsuccessful submission¹

THE IMMEDIATE IMPACT OF CSA AND MEDIDATA DETECT TECHNOLOGY


**20%-40%**
reduction in number of edit checks

**83%**
reduction in case review time by Medical Monitors

**20-30**
minutes vs. 2-3 hours
review time per case


**5 days**
vs. ~4 weeks from LPLV to Database Lock for critical studies

TRANSFORM DATA MANAGEMENT TO REDUCE RISK, CYCLE TIME, AND COST




Identify studies with potential misconduct and drill down diagnostic findings from study to country to site to subject level.


Through statistical algorithms and tests, Medidata Detect uncovers data errors, trends, and anomalies and helps you **perform root-cause investigations and proactively take corrective actions.**

**Reduce Edit Checks**


20%-40% reduction in number of edit checks
Pattern recognition and outlier detection reduce pre-programmed edit checks
Reduce costs of requirements gathering, logic development, programming, validation, project management

**Automate Data Review**


50%-55% of data reviews automated by CSA
Flag data errors, trends, and anomalies
Compute KRIs for early indication of clinically significant trends

**Reduce Custom Reports**

Leverage pre-set data listings, summary tables, patient profiles, scatter plots, and box plots
One central system for multiple review outputs (PPs, outlier detection, listings, KRIs, etc.)
Shorten reviews, cycles and time by weeks

**Faster Database Lock**

30 days to 5 days database lock reduction in critical studies
Reduce LPLV to DBL cycle time resulting in earlier filing of NDA
Decrease number of database unlocks after initial database lock

**Reduced Study Risk**

80% of studies with site differences
Reduce risk of submission delay by submitting cleaner study
Limit risk of additional regulatory review

1. Sacks LV, Shamsuddin HH, Yasinskaya YI, Bouri K, Lanthier ML, Sherman RE, "Scientific and Regulatory Reasons for Delay and Denial of FDA Approval of Initial Applications for New Drugs, 2000-2012." JAMA.2014;311(4):378-384. doi:10.1001/jama.2013.282542

WHY MEDIDATA IN NUMBERS

Visit medidata.com/en/products/detect/ to learn more.

6.5M
Trial Subjects

780K+
Sites

14,000+
Total Complete Trials

70+
Study Therapeutic Areas

