# Identifying Research Priorities for Effective Retention Strategies in Clinical Trials

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**For which topic were research priorities identified?**
retention strategies in clinical trials

**In which location was the research priority setting conducted?**
Europe - United Kingdom

**Why was it conducted at all?**
The failure to retain patients or collect primary-outcome data is a common challenge for trials and reduces the statistical power and potentially introduces bias into the analysis. Identifying strategies to minimise missing data was the second highest methodological research priority in a Delphi survey of the Directors of UK Clinical Trial Units (CTUs) and is important to minimise waste in research.

**What was the objective?**
to assess the current retention practices within the UK and priorities for future research to evaluate the effectiveness of strategies to reduce attrition

**What was the outcome?**
a ranking list of 6 research topics

**How long did the research prioritization take?**
No information provided.

**Which methods were used to identify research priorities?**
Delphi; survey

**How were the priorities for research identified exactly?**
Step 1: two surveys: HTA chief investigators surveyed to provide clinical perspective of retention-based strategies used within specific trials, registered CTUs surveyed to identify non-clinical expertise and insights pertinent across a wide range of trial designs, participants also asked to recommend the three most effective retention practices based on their experience of clinical trials. Step 2: 2-round Delphi process to identify which missing data strategies should be prioritized for future research to evaluate their effectiveness, Delphi round 1: list of 67 missing data strategies, participants were asked to rate each strategy. Step 3: Delphi round 2: participants were asked to re-rate.

**Which stakeholders took part?**
Patient representatives, research partners in clinical trials, clinical trial funding boards, chief investigators, trial managers, researchers, lay people. Survey: 50 chief investigators of NIHR health technology assessment (HTA)-funded trials starting between 2009 and 2012 and 33 CTUs registered within the UKCRC network. Delphi: 35 registered CTUs.

**How were stakeholders recruited?**
A cohort of 76 NIHR Health Technology Assessment program (HTA)-funded randomised trials were identified through their website portfolio. The NIHR HTA portfolio was chosen as it represents the largest public funder of current and ongoing trials and the start dates ensured at least 1 year's recruitment following any pilot work or delays obtaining governance approvals. Two-arm, parallel trials were included. Exclusion criteria were pilot studies, patient preference trials, phase 1 and 2 trials, and studies evaluating longer-term follow-up of previous trials and substudies.

**Were stakeholders actively involved or did they just participate?**
Stakeholders were mere participants of the research prioritization process; they were not actively involved in the process.