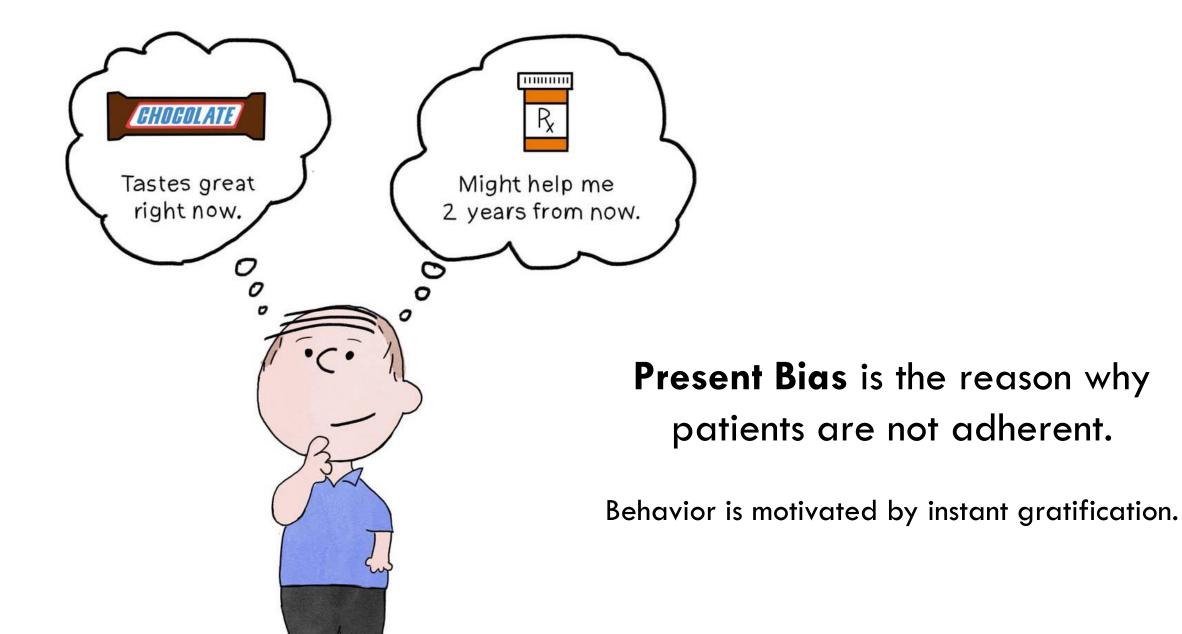
# Better adherence in trials with behavioral economics + artificial intelligence

# La Wellth



# Why do participants become non-adherent?



Previous solutions don't provide the instant gratification necessary to overcome **Present Bias**.

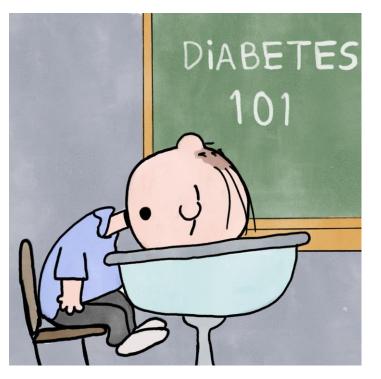
### Reminders

# Education

### **Connected devices**



Reminders just become a nuisance over time

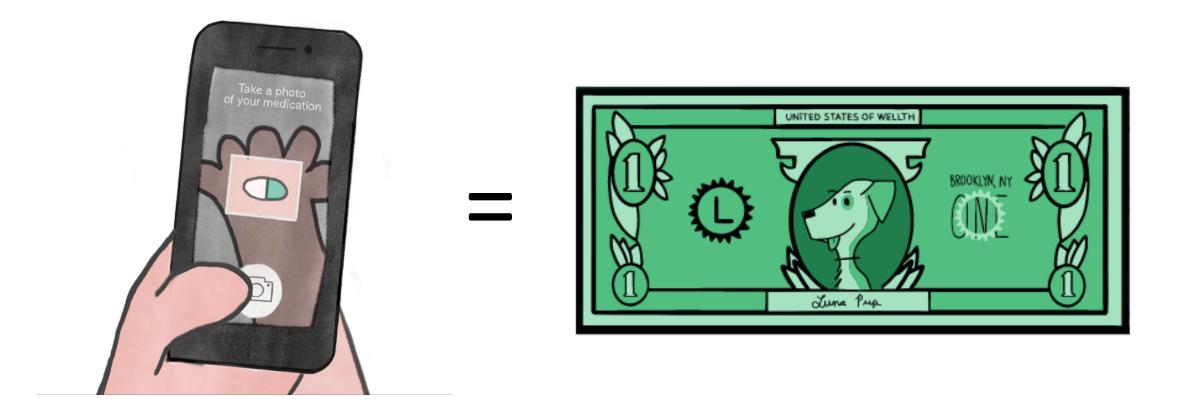




Patients already know they should take their meds.

Devices measure adherence but do not improve it.

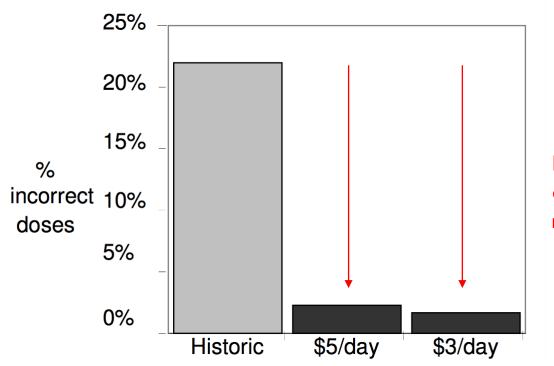
# Paying patients when they take their pills does overcome Present Bias.



This is proven by Behavioral Economic studies and Wellth pilots.

#### **INCENTIVES IMPROVE MED ADHERENCE**

# 1) Financial incentives have been shown to produce drastically better medication adherence



Both intervention groups showed a ~10x reduction to warfarin nonadherence

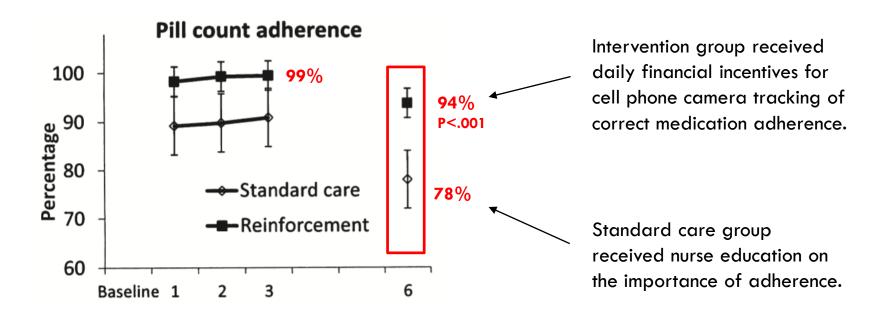
Kimmel et al produced a 10x reduction to warfarin nonadherence with lottery incentives

6

#### MED ADHERENCE LASTS AFTER INCENTIVE GOES AWAY

# 2) Incentives produce lasting improvement to medication adherence after incentive ends

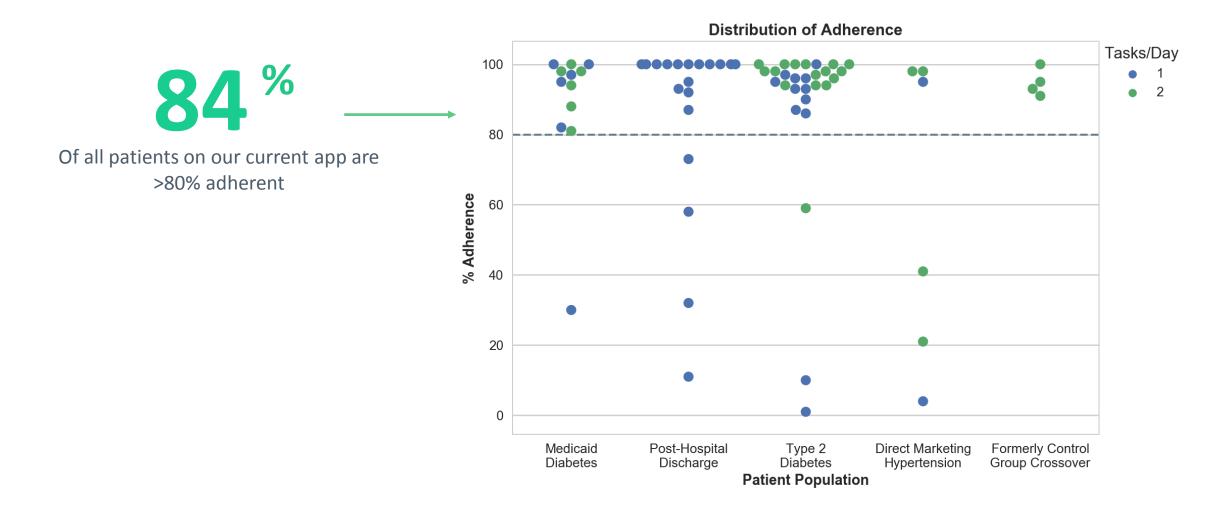
This is a very similar intervention to the Wellth program.



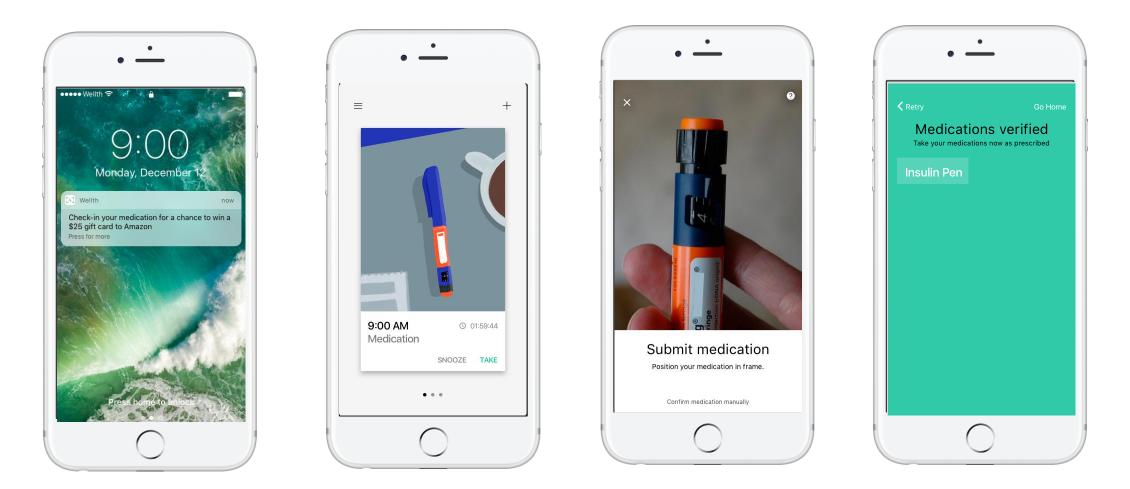
Petry et al. showed significantly better antihypertensive adherence with incentives and cell phone camera verified adherence, the effect persisted at 6 month follow-up after incentive had gone away (94% adherence vs. 78%). Petry et al. (2015) "Reinforcing adherence to antihypertensive

medications." *J Clin Hypertens*. 17.1: 33–38.

# Wellth is able to drive greater than 80% adherence



7



Our Artificial Intelligence can verify compliance with any pill, injectable, or inhaler administered drug

### TARGETED NUDGES

# Wellth becomes a direct channel to send smart nudges to patients to encourage adherence and trial journaling

#### CT WELLTH

now

You are due for a follow up appointment next week. Make sure to return to the trial site!

### C WELLTH

now

Don't forget to make a note in your trial journal today.

C WELLTH

now

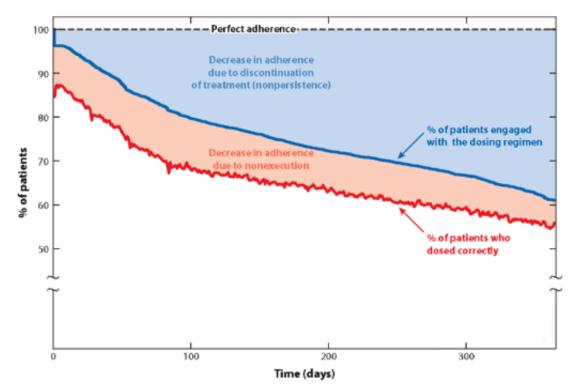
Hey James, we noticed you stopped taking your medication. Is there something wrong?

# 40% of trial participants become non-adherent in first 150 days<sup>1</sup>

#### Impact of non-adherence on your trial:

- Worse clinical outcomes for your participants
- Trial takes longer to complete
- More participants must be recruited
- Significantly higher cost of trial
  - Opportunity cost of delay in going to market

#### Figure 1: IMP nonadherence in Clinical Trials<sup>\*</sup> <sup>[7]</sup>



\*16,907 participants derived from 95 clinical studies ranging from 30 to 1,400 days

1. http://www.appliedclinicaltrialsonline.com/non-adherence-directinfluence-clinical-trial-duration-and-cost

Trial Phase	Estimated Cost Savings Per 1% Improvement in Adherence <sup>1</sup>
Phase I	\$19,036
Phase II	\$50,904
Phase III	\$335,725

# Wellth uses proven strategies from Behavioral Economics to improve adherence.