# A novel asynchronous video technology and service to secure protocol compliance in a Phase 2 Major Depressive Disorder trial



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### Introduction

Medication non-compliance, misuse, abuse, and diversion represent significant challenges in clinical trials, particularly for compounds with high abuse potential or those intended for strict protocol adherence. Poor compliance can lead to unreliable data, and underpowered studies, and may compromise both the safety of participants and the validity of trial outcomes. To mitigate these risks, a technology-enabled adherence review service has been employed. This service confirms that each dose is taken as directed by having subjects video record themselves taking their medication and showing the remaining tablets. This vendor, successfully used in the previous CLEO trial, will again be used in the SOLEO trial to minimize misuse, abuse, and diversion, and to confirm daily medication adherence.

# Objective

Sponsor is continuing its use of the technology enabled review service to monitor compliance to trial protocol and to mitigate risk of misuse/abuse/diversion of CLE-100.

# Study Design Methodology

- Participants (n=90) undergo a 28-day double-blind, placebo-controlled phase followed by a 24-week open-label phase.
- Adherence is calculated as the number of confirmed doses divided by the total expected doses; the overall adherence rate is averaged across all participants.
- Patient Retention Rate is the percentage of participants completing the treatment phase.
- **Drug Accountability (DA)** is verified by comparing the displayed pill count on video to the expected pill count, allowing for timely corrections. Although DA is not a primary endpoint, both adherence and DA are assessed daily.

# Video Directly Observed Therapy (VDOT) combined with Human Review

The SOLEO trial employs a vDOT service to confirm both daily adherence and accurate pill counts. This service captures a short, daily video of each participant ingesting their medication and displaying the remaining tablets to the camera. Each video is then reviewed by a trained adherence reviewer for near real-time confirmation of protocol compliance. Any detected deviations are promptly escalated to the trial site for appropriate intervention. Key elements of this approach include:

- Smartphone-Based Recording (BYOD): Patients use their own devices to record a video each day showing themselves taking the dose and displaying remaining pills.
- Near Real-Time Review: Within 12 hours, a trained adherence reviewer evaluates each submission, confirming adherence and remaining count.
- **Prompt Escalation:** If deviations from trial protocol are observed (e.g., double-dosing, inaccurate pill counts, or missed submissions), the site is promptly informed for intervention as is appropriate for each patient.
- Customized Escalation Criteria: Protocol-specific triggers for further follow-up or corrective action are defined in collaboration with the Sponsor and CRO at implementation.
- **Trial Analytics:** Real-time data provides visibility into the performance of each trial site and identifies patients at risk of not meeting adherence targets.

## Expected Outcomes

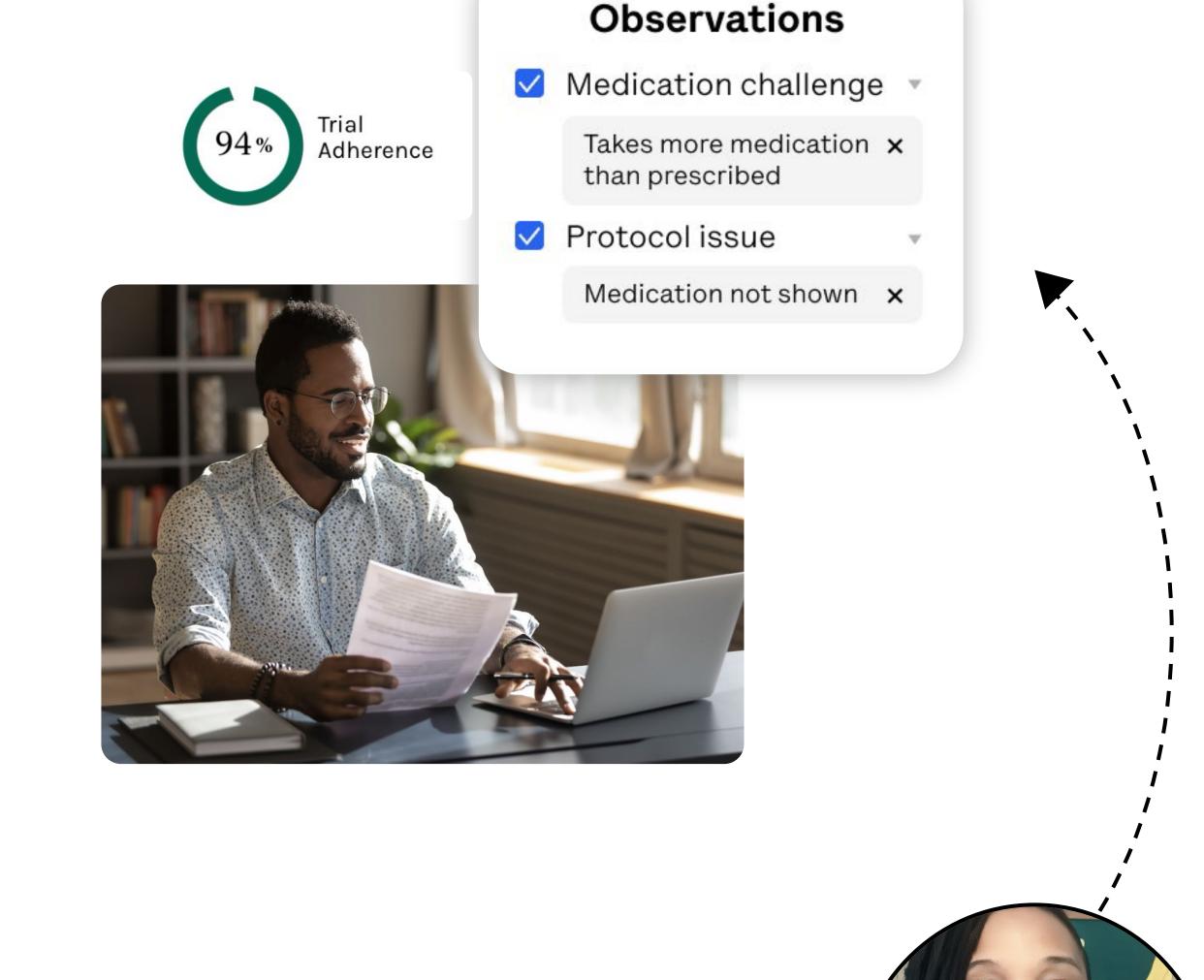
SOLEO began enrollment in 2024 and is ongoing. We hypothesize participants will demonstrate similar adherence rates (97.4% - 98.4%) and higher patient retention rates (89.2% - 94.2%) as the previous CLEO study.

## Conclusions

Pending results, the asynchronous vDOT Service will directly confirm dosing and obtain accurate pill count in near real-time to mitigate misuse/abuse/diversion. Daily human review of each video submission will allow trial sites to correct patient adherence and pill accountability deviations in a timely fashion. Active adherence monitoring with timely patient interventions will increase patient retention and improve compliance.

#### **Trial Sites**

onboard patients. They are notified by vDOT Service team to any protocol deviation that may occur allowing for timely patient specific intervention.



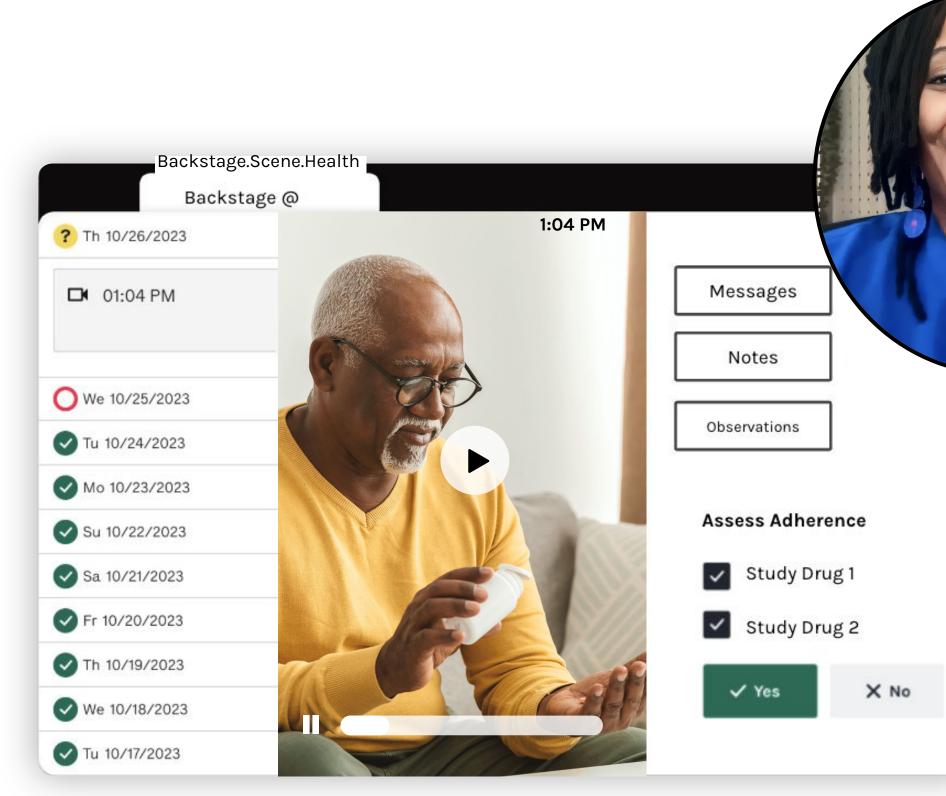
# days days doses adherence adherence\* adherence adherence\* status 549079 62 22 42 32.26% 214.50% 80.00% Active 548462 65 19 62 66.15% 127.40% 80.00% Active 548375 21 63 75 57.14% 87.60% 80.00% Active 548357 38 46 74 73.68% 85.20% 80.00% Active 545152 14 70 79 64.29% 83.10% 80.00% Active 512345 5 79 84 100.00% 78.70% 80.00% Active 577376 7 77 84 100.00% 78.20% 80.00% Active 574645 17 67 82 88.24% 77.90% 80.00% Active 566961 59 25 80 93.22% 48.80% 80.00% Active

#### Sponsor Dashboards

display real-time
adherence trends, trial
site performance rates,
and flags patients at risk
of not meeting adherence
targets.

### Video DOT Service Review Team

reviews every video submission. Any observed protocol deviation is escalated to the trial site team.





Escalations designed with the Sponsor during implementation.

## Trial Participants

record a short video of themselves (BYOD) taking their daily medication, and show their remaining pills on camera to confirm accurate pill count.

