# Digital, Decentralized, and Democratized: New Approaches to (Long COVID) Research

The PaxLC Trial Team

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## The PAX LC Trial

US IND Number: 164417
ClinicalTrials.gov ID: NCT05668091

#### **Principal Investigator**

Dr. Harlan Krumholz

#### **Study Design**

A decentralized Phase 2, 1:1 randomized, double-blind, superiority, placebo-controlled study on non-hospitalized highly symptomatic adult participants with Long COVID.

#### Aim

To determine the efficacy, safety, and tolerability of 15 days of nirmatrelvir/ritonavir compared with placebo/ritonavir.

#### Rationale

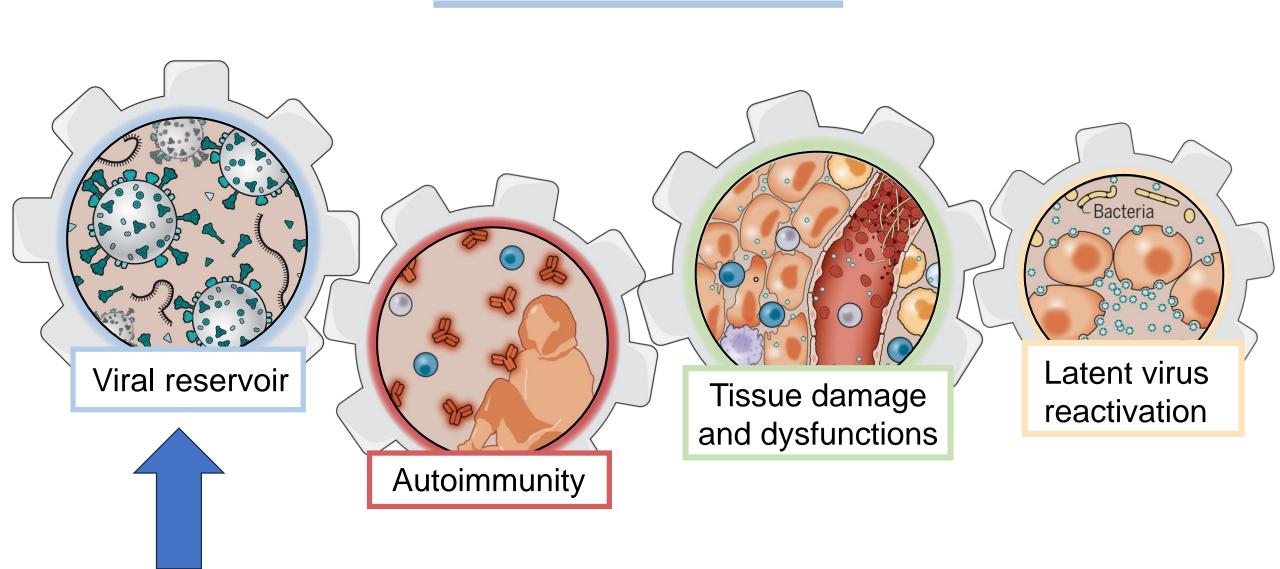
A plausible mechanism for PASC is viral persistence. PAXLOVID, which includes nirmatrelvir (PF-07321332), an antiviral agent that targets the SARS CoV-2 3- chymotrypsin–like cysteine protease (Mpro: also referred to as 3CLpro or nsp5 protease), and ritonavir, a human immunodeficiency virus (HIV)-1 protease inhibitor and CYP3A inhibitor.

#### **Outcomes**

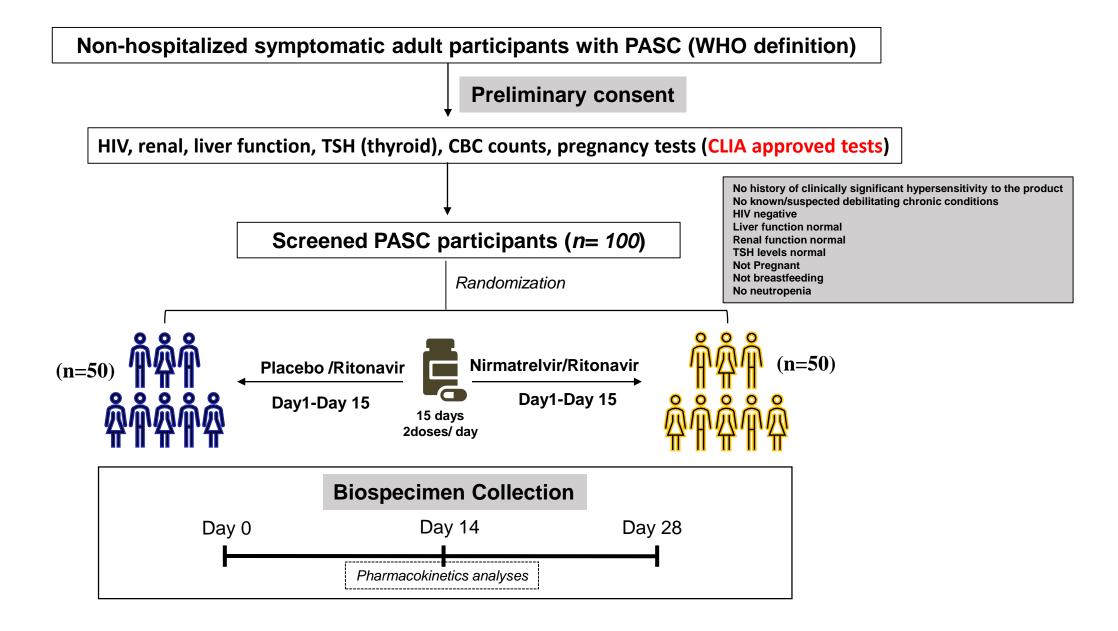
- Primary outcome is the PROMIS-29 Physical Health Summary Score at Day 28 (2 weeks after the end of the trial drug treatment).
- Secondary outcomes will include other health status measures.
- Exploratory outcomes: immunophenotyping to explore the effects of treatment on immune signatures and immune markers of response.

**Number of Participants: 100** 

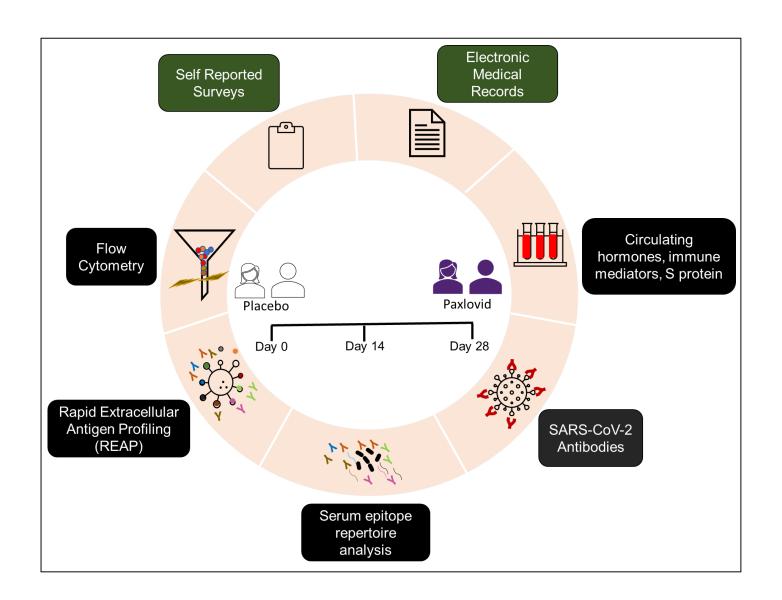
## Four possible root causes of long COVID



## Decentralized study design



## Deep immune phenotyping



#### Disclosure

Harlan Krumholz is a co-founder of Hugo Health, a digital health company that enables people to gain agency over their health data and provide permissions for sharing. Hugo Health is being used in the PaxLC study.







# Center for Infection & Immunity

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This talk describes our strategies to implement digital, decentralized, and democratized approaches to multidisciplinary research.

Our approach seeks to address the deficiencies of traditional research studies, which can tend to be <a href="https://hierarchical.siloed.slow.expensive">hierarchical, siloed, slow, expensive</a>, and inconvenient.

We believe that research can improve by simultaneously leveraging <u>advances in</u> <u>technology and culture.</u>

# Our studies must be <u>convenient</u>, <u>meaningful</u>, <u>respectful</u>, <u>efficient</u>, <u>rapid</u>, <u>and fair</u>.

The research optimization requires <u>partnership with participants</u>, including involvement in study design and workflow, data collection and analysis, and data and results sharing.

Participants should have access to investigators and the results of the studies.

So, we have developed an approach that is digital, decentralized, and democratized.

### **PaxLC Trial Goals**



Meet or exceed the standards of traditional trials



Optimize rigor, access, convenience, efficiency, and speed



Support meaningful participant partnership

## PaxLC brings together many innovations.



Online screening



Digital medical record review



e-Consent



Home-delivery of medications



Local clinical blood draws



Home-based biospecimen collection



Online diaries and surveys

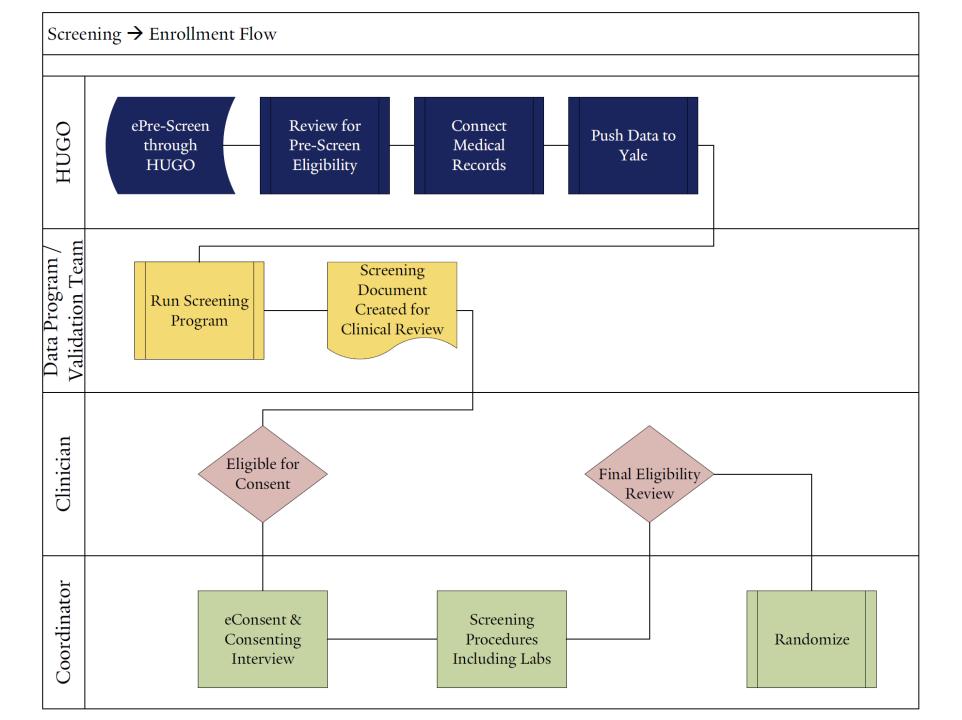


Digital medical record outcomes



Participantcentricity, and return of results





Thank you.

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