

The Complexity Of GLP-1 Trials

GLP-1 clinical trials hold enormous promise, but for participants, they can be some of the hardest to complete.

Many live with obesity, type 2 diabetes, or mobility limitations, and once treatment begins, side effects like nausea, appetite loss, and fatigue quickly take hold. Mealtimes become stressful, routines fall apart, and social isolation sets in. Optimism gives way to exhaustion. Each required site visit adds another layer of strain - travel, time off work, childcare, or simply the physical effort of getting there, and for many, especially in places where weight management remains taboo, the mental toll can be just as heavy.

It's no surprise **GLP-1 trials see some of the highest dropout rates in metabolic research.** Each early withdrawal isn't just lost data - it's a participant pushed past their limit. Retention depends on more than protocol design. These individuals need access, reaching them where they live; continuity, through consistent, trusted support; and holistic care, addressing physical symptoms as well as mental and emotional wellbeing.

Recognizing these challenges, MRN built a participantcentered approach to help individuals stay the course supporting not just the science, but the people behind it.



Key Case Study Outcomes

- Improved participant retention, with fewer early withdrawals as participants received regular one-to-one guidance from qualified healthcare professionals.
- Better symptom management through nutritional and lifestyle coaching delivered remotely by trained HCPs.
- Enhanced communication with sites, as visit reports were shared directly with investigators in real time.
- Positive participant feedback, with participants reporting the support as beneficial to both wellbeing and adherence.

This model demonstrated how specialized, flexible support can strengthen participant retention and data quality in GLP-1 studies, without adding burden to sites or participants.



How Did MRN Address These Challenges?

In this recent **Phase 2 GLP-1 study**, the challenge wasn't just with recruiting participants, but with retaining them too, due to the complexity of the study. Participants were struggling to stay engaged as side effects and lifestyle adjustments took hold.

MRN introduced a tailored support model designed around continuity, trust, and accessibility. Through **trained Patient Navigators**, participants received consistent, **one-on-one guidance from experienced healthcare professionals via telemedicine**.

These navigators went beyond protocol check-ins, offering nutritional support, symptom management advice, and mental health guidance to help participants navigate the physical and emotional demands of treatment. Each call provided stability at a time when motivation often wavered. This continuity of care helped participants manage side effects, regain confidence, and maintain adherence. Engagement stabilized. Dropouts declined. Data integrity held strong.

Coordinated Care and Oversight

This model also strengthened collaboration between MRN, sites, and investigators. Each telehealth interaction generated clear visit reports shared directly with PIs, ensuring full visibility of patient progress and timely intervention when additional support was needed. The consistency of communication created a stronger link between remote teams and on-site staff, allowing both to focus on what mattered most supporting patients to stay on treatment and protecting data integrity throughout the study.







Looking Ahead: Planning For Phase 3

Following the success of the Phase 2 program, MRN's collaboration with the sponsor and CRO has progressed into planning for **global Phase 3 studies**, **scheduled to launch in 2026**.

The upcoming studies will include **20+ countries**, with MRN working alongside partners to scale patient and site support services. **At MRN**, we work as a collaborating partner. To continue to support participants as well as trial success, the phase 3 program may now also integrate:

- Home Trial Support visits, to reduce travel burden for participants and allow eligible visits to take place in the home.
- Continued remote participant guidance, providing nutritional, lifestyle, and mental health support through trained HCPs.

Deployment will vary by country, depending on local cultural acceptance and regulatory factors, ensuring the approach remains both participant-focused and operationally feasible. By combining in-home visits with remote care, MRN aims to deliver a sustainable, participant-centric model that improves retention, strengthens collaboration with sites, and ensures consistent support for participants throughout their clinical journey.

The success of this GLP-1 program highlights how adaptable participant and site support models can directly influence trial continuity and data quality. By combining remote clinical expertise with participant-specific guidance, MRN has helped create a framework that not only supports current studies but also shapes the approach for future GLP-1 research. As planning begins for Phase 3 in 2026, these learnings continue to inform scalable, participant-centred delivery across an expanding global landscape.



Site Professional Support

Our Site Nurse Support service places experienced and trained research nurses and study site coordinators into sites to overcome resource constraints. Placements can be made at single sites or nursing and project teams can be created to support multiple sites globally across a clinical trial.

Site Professional Support enables each site to focus on the patient as well as facilitating performance of all procedures in a timely manner.

Supported projects are varied and can range from full time resources working on single sites to international teams working across many sites. Our staff can cover all the roles and responsibilities expected of a research nurse or trial coordinator. Services offered range from database review, patient identification and selection, dosing and ongoing trial support to CRF completion and Investigator site file maintenance.

Capabilities In 99 Countries

We work around the world with ease. By using our own teams of professionals supplemented with long term and valued partners, we act as a single, centrally managed provider delivering locally on a global scale.



MRN Site Network

Our Site Network consists of 200+ independent and community-based sites around the globe, centrally managed to run clinical trials. Through our Site Network, Sponsors can access a larger pool of qualified sites and qualified patients.

Sites in our network have access to staffing, training, recruitment and retention tools and technology resources through MRN, enabling more sites to be research-ready. We help sites achieve faster patient identification and recruitment and drive more high value visits to sites - creating more successful clinical trial programs in any community.

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