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Enrolment strategies to increase enrolment rate in the PARTNER study.

The number of partnerships enrolled in the study so far is insufficient in order for the study to succeed in getting all 1650 pairs in within 2011 and recruitment rate therefore needs to increase.

To reach the goal, it has become clear that large volumes of patients have to be screened to identify sero-different couples who meet study criteria and who wish to participate. This has to be done with minimal input from clinicians in a busy clinical setting

We also need to develop a strategy that will circumvent the reluctance of some patients to discuss their sexual behaviour with their clinic doctor. To achieve both these aims a strategy has been developed to enable clinic patients to be screened quickly and effectively

“High throughput screening”

Clinicians ask as many patients as possible who are on ART in their routine clinics whether they have a sero-negative partner. If the patient has a sero-negative partner the doctor should then ask if they are willing to speak to a member of the research staff about the PARTNER study. The doctor only needs to give brief details about the study to the patient at this point i.e. it is about condom use and HIV transmission in sero-different partnerships.

The doctor will then create a list of contact details of patients interested in the study to give to the research staff. The research staff will then contact the potential participant and discuss with them when they last had unprotected sex, and offering the study to those fulfilling entry criteria.

Another option would be to refer the patient immediately to the research staff to discuss the study if they are available in clinic at that point.

This will enable the screening of a large group of patients because it involves low workload to the clinicians and initially the question of unprotected sex does not need to be introduced to the participant by the clinician. The discussion around eligibility for the study will take place with research staff that is more remote from clinical care.