

UNLOCKING THE POWER OF PRIMARY CARE IN CHRONIC DISEASE RESEARCH

85% OF CHRONIC DISEASE CARE
IS DELIVERED THROUGH PRIMARY CARE
AND COMMUNITY-BASED SETTINGS



INDUSTRY MUST EVOLVE BEYOND TRADITIONAL MODELS TO BETTER SUPPORT INVESTIGATORS AND REACH PATIENTS

Research that extends into primary
care and community settings
meets patients where
they are.



TRADITIONAL RESEARCH SITES



PRIMARY CARE INTEGRATION



BROADER PATIENT ACCESS

CLINICIAN ENGAGEMENT IS THE MISSING LINK IN TRIAL ACCESS

Personal physicians play a critical role in patients’
decision making and attitudes toward participation
in clinical trials but often face significant
barriers to getting involved.



Primary care
physicians are
uniquely positioned
to expand trial access,
**but need support,
tools and
awareness.**



ACTIVATING PRIMARY CARE

Support that meets clinicians where they are.



TRAINING & EDUCATION
TO PRIMARY
CARE PROVIDERS



COMMUNITY
GROUPS AS
TRUSTED PARTNERS



RESEARCH
PARTNERSHIPS



EQUITY
& BIAS
MITIGATION

GLOBAL CONSISTENCY, REGIONAL ADAPTATION

Primary care models
vary significantly by
region in structure,
regulatory environment
and research readiness.
Access to flexible
resources enables this.



ESTABLISHED PARTNERSHIPS



NEW SITE DEVELOPMENT



EMBEDDED DIVERSITY

ENABLING PRIMARY & COMMUNITY CARE INTEGRATION

Primary care
settings need
tailored infrastructure
to overcome
common
challenges.



HIGH BURDEN



MODEL MISMATCH



FULLY-ENABLED SITE

HOW PPD SELECT MAKES IT WORK

We can support
three flexible rolls
with centralized
support.



REFERRAL PARTNER



SUB-INVESTIGATOR



FULLY-ENABLED SITE

FROM PILOT TO SCALABLE ECOSYSTEM

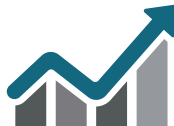
Our experience and
resources combine
network connectivity
and site capability to
enable real-world
delivery.



GLOBAL PRIMARY CARE
RESPIRATORY PILOT



NATIONAL PRIMARY CARE
ENGAGEMENT IN THE UK



BUILDING AT SCALE

We bring chronic disease trials closer to patients with the expertise,
infrastructure and support to activate primary care at scale.