CLINICAL INVESTIGATION

Editor's note: clinical investigation

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Editor's Note: Clinical Investigation

Clinical Investigation, a monthly peer reviewed journal is running successfully since 2011. The journal has evolved with time from previously being Subscription based to an Open Access Journal. The aim behind this transition is to provide quality research to the researchers and scientist without making them to pay for reading and referring the outstanding research outcomes.

Clinical Investigation covers the broad aspects of Clinical study design and methodology, Overviews of the clinical progress of new drugs or drug classes, Clinical progress for specific diseases or therapeutic areas, Healthcare outcomes and pharmaco-economics, Commentary on trials in progress, Drug safety issues and adverse event monitoring, Biomarkers in clinical trials, Clinical trial data management and statistics and other areas justifying the title of the journal. The last two issues of the journal had published Editorial, Clinical trial perspective, Review articles etc.

A review of randomization methods in clinical trials reviews the importance of randomization methods in clinical trials and constant changes which are being proposed. The review successfully covers the major studies related to the choice of randomization technique and concludes that still many researchers are using the established standards of permuted blocks randomization or minimization. The choice of randomization technique is based on the sample size. New randomization techniques must be introduced to overcome the deficiencies of the conventional randomization procedure. The review concludes that future elaboration of randomization techniques will be connected with the development of the maximum tolerated imbalance procedures. However, the process of decision making about the selection of exact procedure assessment of possible risk of bias will be get involved [1].

A new SAS macro for flexible parametric survival modelling: applications to clinical trials and surveillance data review the SAR macro parametric method outcomes in data from cancer surveillance and clinical trials over standard parametric methods. The semi-parametric Cox proportional hazards (PH) is dominating the analysis and reporting of survival data for over four decades. However, the authors compared the results from SAS which are identical to that of Stata using various examples. The authors believed that SAS code will result in more widespread use and publication of flexible survival methods especially in oncology studies [2].

A review of rifapentine for treating active and latent tuberculosis successfully performs the literature review of rifapentine being used in the treatment of active or latent tuberculosis. The review summarizes the data of five randomized controlled trials for latent tuberculosis and seven randomized controlled trials for active tuberculosis. The authors concludes in their literature survey that isoniazid and rifapentine in the dose regimen of once weekly for a period of 12 weeks is an effective short time course regimen for latent tuberculosis. The combination drug therapy is also effective in the continuation phase of active tuberculosis treatment [3].

Randomized clinical trials in US hospices:

challenges and the current state of the art, reviews the randomized trials which have been conducted on US hospices and concludes on their quality and potential bias. Conducting prospective studies in hospices is a difficult task. The researcher concludes that the data for clinical trials conducted on US hospices is low and most of the published studies have a moderate risk of bias. Researchers find several barriers to conduct research on hospices which includes low enrolment, selection bias, gate keeping, limited time in which to conduct a study and ethical concerns. However, several research teams have overcome some of the barriers indicating that it is possible to conduct clinical trials in hospices [4].

References

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