Life hack for those who want to earn money, and for those who have expensive insurance

It?s not a secret for anyone how much a private health insurance costs, what you need to get medicaid, and what mental jungle you have to overcome in order to understand where and what insurance covers, and where you still pay.

And while we are healthy, we are not interested in this, and when we are sick, there is no time to go into details.

One of the ways - I want to emphasize, this is only ?one of? the ways to use the existing system on your own hand and in no way is a panacea for everything that can and cannot be cured - studies that attract volunteer patients to work.

Neither the status nor the insurance card is checked with you. You do not require money. Moreover, they pay here - to you.

Although, of course, the subtext ?they use us? is popular in society, not without it.

It is about testing medications in humans. A bunch of associative material immediately comes to mind. The myths that those striving for world domination are eager to change a person at the genetic level, so that they can easily and easily conquer him. A bunch of films about how harmful clinical research is and how healthy they make patients.

No, there will be no research adverts and there will be no positive or negative epithet addressed to them. There will be naked information about how such studies really go, what they give to science, and what to their direct participants.

FAQ

What it is?

Pharmaceutical research has been carried out all over the world for more than half a century and has undergone a lot of technical, ethical and legal corrections in favor of the patient during this time, but what has remained unchanged - yes, in the course of these studies, the drugs are actually tested in humans.

If they had not been tested on people, humanity would have received much more unpleasant surprises than it has already received. People who are tested on the clinical picture or effect of the drug can be roughly called ?experimental rabbits,? or volunteers who help science and extract financial compensation from their activities.

Who is doing this?

A great number of both public and private clinics. The lion's share of such research is carried out in hospitals. The larger the organization, the more research it is able to conduct and the higher the level of diversity of such research. And the cooler the equipment.

Who needs this?

Pharmaceutical companies interested in developing new drugs. Consumers of pharmaceutical companies, because demand creates supply. Wait, this is not the whole list. This is also necessary for patients who have been prescribed ?wrong? for many years, who have tried all possible drugs and realized that nothing helps from their malaise (migraine is especially famous for the lack of a way out), who have nothing to lose and participate in testing the drug for them - The last hope to get at least something that works.

You - me, I - you

This principle in research works to its fullest. You provide your blood, urine, saliva for analysis, answer questions about your well-being very many times, your body is possible (and not the fact that this will happen) is forced to suffer side effects from a new medicine. This is what you give. What they give you: the likely cure for your ailment, medical support in case of a side effect, and ... material compensation.

Why is it paid?

Because you spend your time on this in the first place. And a resource. Your opportunity to be a human unit expressing an opinion that drug developers will be guided by, among others, is a resource. This is a common practice, it is done everywhere.

Sometimes, in order to participate in the study, a person is forced to miss a working day, and sometimes, according to the conditions of the study itself, he needs an accompanying person or a taxi. The clinic compensates for all this, and the patient signs ?received money?.

Who pays for it?

Those who sponsor specific studies. In different clinics, these are different people. The cost of participation in the study of each patient is initially budgeted.

How is this paid?

Also differently. Participation in a depression research program costs, for example, $ 50 per session. The session lasts an hour, and you do not use anything. In fact, a number of other studies are accompanied precisely by taking the drug. In tablets, either intravenously.

Who will find out that you participated in these studies?

None. Under the terms of a completely official contract that you sign, this promotion is completely anonymous. Even in a telephone survey, they will call you your questionnaire code, because the respondents do not know your name and should not know.

The risks

Change in health for the worse and side effects of the drug.

Nobody is hiding this from anyone; a person is always warned about what could theoretically happen to him and is questioned in detail about the sensations during the procedure.

It is to identify side effects (among other things) that research is being carried out.

Are there such cases?

There are. The medical staff is the first to bring you back to life if this happens. The clinic is responsible for everything that happens inside it. If you do not take the drugs according to the research conditions, then we are not talking about side effects.

?What if they put me on drugs??

The FDA controls the entire synthesis process of all tested drugs. Without its green light, research will not begin and the drug will not be delivered to pharmacies.

That is, I can just come here, and they just take me to participate in the study like that?

Not. You will be accepted to participate in the study of a certain disease only if you already have it - and in order to find out, you will be examined beforehand (interviewed, examined). Sometimes your doctor recommends taking part in the study.

How does this happen? The patient complains that nothing helps him, the doctor offers another option - to determine whether the latest developments help him empirically. Participation in the study, of course, is only voluntary.

Who is involved in such research?

Most volunteers are people over 50 years old. However, for the study of migraine, for example, people from 18 years are allowed - this disease is characteristic of all ages, unfortunately.

Different studies require different people; in hospitals there are also pediatric studies. Pediatric oncology, autism, hearing impairment - all this is being investigated, and through the participation of volunteers as well. Parents consent if the child is a minor.

How it's done

Svetlana Netrebchuk, coordinator of one of the clinics conducting the research, describes the situation as follows: ?In Brooklyn, I know 3 more clinics that conduct research - and many hospitals. Hospitals conduct research on the cardiovascular system, surgical surgery - they have decent equipment, they can conduct research during surgery, develop new approach techniques, for example. These are studies with severe patients, the severity of which is determined only by preliminary examination.

We don?t take very serious patients, our profile is diabetes mellitus, Alzheimer's disease, depression and migraine. There is a study for severe diabetics who have no help and need to switch to insulin. We fully provide everyone - with needles, alcohol pads, everything you need. The patient is under our supervision for 24 hours via wi-fi - he is at home, and we see in computers what is happening to him, we see blood counts. There is another study - for those with kidney problems as a result of diabetes. Diabetic-controlled studies are mostly

uninteresting.

I never ask for documents - but on some (not all) studies there is a requirement for a picture ID - any document with a photo so that I see that this is the same person who filled out the questionnaire.

And if you think that you need or would like to take part in such studies, then there is a centralized government site that searches for both the disease and your place of residence. There you will be shown the nearest clinic dealing specifically with your problem. In any country, in our country, in Europe, in Australia, in Japan - wherever you go, research is carried out all over the world. It is not necessary to come to us or to the hospital - the choice is unlimited in anything. You can also go to the website of any individual clinic and ask everything that interests you.

We financially encourage participation in research and call patients volunteers, not because we personally want to, but because research sponsors are interested. This is compensation for the journey (some volunteers come to us from the Bronx, for example), during research, sometimes we need a snack, snacks, car service ... All of this we must pay, and we do it. This is not our idea and not our pocket - it is an inviolable protocol. Each study has a different budget. For example, cognitive studies of Alzheimer's disease require a 5-6-hour stay in the clinic - and compensation there is appropriate. Sometimes you need to do an MRI or scan - for this you need to go and do all this, and many of our patients do not move well. But in a study of depression, for example, visits are short and pay less. ?

What happens next

The FDA decides whether or not to enter the market. Sponsors send all information about the study to the Food and Drugs Administration before the studies begin. Sponsors make a detailed account of what they expect from this medicine, what they expect during the study, what requirements are placed on the composition, etc. The FDA may or may not allow these studies. And only after that the pharmaceutical company is looking for a clinic for the implementation of research. After the study is completed, all data is also sent for processing to the FDA. This is a huge amount of information, a complete database of all possible side effects, data and well-being, and only if all of them are within the normal range - the administration decides to release the drug on the market.

Side effects

Svetlana Netrebchuk, coordinator of one of the clinics conducting the studies, says that side effects are a fairly common case, and this is not surprising: ?First, this is discussed at the first visit, at the screening, we provide the patient with full information in his language (usually it is in English, but if a person does not read English, we always provide in his native language), we always talk about the side effects of this drug. This is discussed immediately, and the person must agree. Everything is written in the starting information for the patient - and what we are going to do at each visit, and the side effects from this medicine. If a person does not give his consent at the first visit, we stop working with him. We do not deceive anyone and do not hide anything from anyone. Our responsibility is to talk about negative points in the first place.

If a person begins nausea, vomiting, headache, fever, individual intolerance of some component - the patient must either call us and say as soon as possible about what happened, or we ourselves see that something is wrong.

In addition, not every person is suitable for research - we are in the strict framework of the criteria for age, gender of the patient, previous illnesses.

Allergies are on this list. And if a person does not fit these criteria or there is the slightest risk of harming him, we will not even take him. We will never endanger a person consciously. We will most likely refuse him on his first visit. But usually, as side effects, we still have a headache or some parallel ailments that are not related to taking the drug - a cold, for example, accidentally caught, or an accident ... If this is still exactly a side effect of the drug, we discuss the expediency of further participation of the patient in the study and we refer him to a narrower specialist who is able to analyze the situation. ?