

# Clinical Trial Analysis Report - New Diabetes Medication

For: PharmaTech  
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## 1. Introduction

This report presents a comprehensive analysis of data from a Phase III clinical trial for a new diabetes medication. The objective of the analysis was to evaluate the efficacy and safety profile of the drug compared to placebo, as well as to investigate the influence of demographic factors and disease duration on its action. The analysis included 200 patients (100 in the treatment group and 100 in the placebo group). Patients were observed for 24 months.

## 2. Methodology

Data were loaded from the *diabetes\_medication\_clinical\_trial1\_3.csv* file. The data cleaning and preprocessing involved handling missing values in the `adverse_event` column (replacing NaN with 'None'), converting categorical columns (group, gender) to appropriate data types, and calculating a key metric: the change in HbA1c level (initial - final) for each patient.

The statistical analyses and visualisations performed were:

- An independent samples t-test to compare final HbA1c levels between groups.
- Repeated measures ANOVA (via an OLS model) to assess changes in HbA1c over time and group-by-time interaction.
- A Chi-square test to compare the frequency of adverse events between groups.
- Analysis of drug efficacy based on gender and defined age groups (using t-tests and ANOVA).
- Correlation analysis between the duration of diabetes and HbA1c reduction.
- Data visualisations: line plot of HbA1c changes over time, box plot of final HbA1c levels, bar chart of adverse events, and scatter plot of HbA1c reduction versus initial HbA1c.

## 3. Key Findings

### 3.1. Efficacy

- **Significant HbA1c Reduction:** The new medication demonstrates **statistically significant and clinically relevant efficacy** in lowering HbA1c levels. The mean final HbA1c in the treatment group was 6.13%, which is significantly lower than 7.69% in the placebo group (p-value < 0.001 from t-test). The mean HbA1c reduction in the treatment group was 2.40%, while in the placebo group it was only 0.72%.

- **Progressive Effect Over Time:** The repeated measures ANOVA analysis confirmed a **significant interaction effect (Group x Time)** (p-value < 0.001). This indicates that the trend of HbA1c reduction in the treatment group is distinctly different and more dynamic than in the placebo group, suggesting stable and progressive drug efficacy over the entire 24-month study period. The line visualisations clearly show the divergence of the lines for both groups over time.
- **Consistent Efficacy Independent of Demographics:**
  - **Gender:** No **statistically significant differences** in HbA1c reduction were observed between males and females in either the treatment or placebo group (p-value > 0.05 for both groups).
  - **Age:** Similarly, analysis by age groups (40-50, 51-60, 61-70 years) showed no **statistically significant differences** in HbA1c reduction in any of the groups (p-value > 0.05).
  - **Duration of Diabetes:** Correlation analysis between the duration of diabetes and HbA1c reduction revealed no **statistically significant association** (p-value > 0.05). These results suggest that the drug is effective across a broad patient population, regardless of their gender, age, or disease duration.

### 3.2. Safety

- **Comparable Adverse Event Rate:** The Chi-square test indicated **no statistically significant difference** in the overall frequency of adverse events between the treatment and placebo groups (p-value = 0.609). This suggests that the new drug does not increase the overall risk of experiencing any adverse events compared to placebo.
- **Most Common Adverse Events:** The most frequently reported adverse events (across both groups combined) were **Fatigue, Nausea, Headache, and Dizziness**. Their frequencies were comparable.

## **4. Recommendations for PharmaTech**

Based on the analysis presented, the following recommendations are suggested for PharmaTech:

1. **Continued Development and Preparation for Subsequent Phases:** Given the strong evidence of the drug's efficacy in lowering HbA1c, both statistically and clinically, it is recommended to **proceed to further phases of clinical development** (e.g., Phase IV) or prepare documentation for marketing authorisation application.
2. **Enhanced Adverse Event Monitoring:** Although the overall frequency of adverse events is comparable to placebo, **detailed monitoring** of the most commonly reported symptoms (fatigue, nausea, headache, dizziness) is recommended in future studies and post-marketing phases. Strategies for managing these symptoms should be considered if they prove to be more bothersome in a wider population.

3. **Broad Application Potential:** The fact that the drug's efficacy does not significantly depend on gender, age, or duration of diabetes is a major advantage. This suggests **broad market potential** and the possibility of using the drug in a diverse range of patients with type 2 diabetes. This should be emphasised in marketing and communication strategies.
4. **Further Research and Optimisation:** In future studies, a more in-depth analysis of subgroups, such as patients with very high initial HbA1c, could be considered to identify any latent effects or optimise dosing. Further long-term studies will be crucial to confirm the durability of effects and safety.

## 5. Conclusion

PharmaTech's new diabetes medication appears to be a **very promising candidate** with a strong efficacy profile in HbA1c reduction, acting consistently across different demographic groups. Its safety profile, in terms of overall adverse event frequency, is comparable to placebo, further enhancing its potential.