

Preferences and Attitudes Towards Digital Communication and Symptom Reporting Methods in Clinical Trials [Letter]

Sari Luthfiah¹, Triwiyanto Triwiyanto², Mohammed Ismath³

¹Department of Nursing, Poltekkes Kemenkes Surabaya, Surabaya, Indonesia; ²Department of Electromedical Technology, Poltekkes Kemenkes Surabaya, Surabaya, Indonesia; ³Inamdar Multi-Specialty Hospital, Pune, Maharashtra, India

Correspondence: Sari Luthfiah, Email sarilut@poltekkesdespes-sby.ac.id

Dear editor

We would like to express our appreciation for the insightful study conducted by McDowell et al on digital communication preferences and symptom reporting methods in clinical trials.¹ This research provides valuable contributions to the understanding of patient preferences, particularly in differentiating communication methods for social interactions and clinical settings. The study highlights that while messaging services are predominantly utilized for personal communication, patients exhibit a preference for phone calls when engaging with healthcare providers. Additionally, the findings emphasize the increasing acceptance of digital symptom reporting via smartphones and telehealth platforms, underscoring the potential of digital health technologies (DHTs) in facilitating patient-centered approaches in clinical trials.

While the study offers significant insights, several methodological aspects warrant further consideration. The research does not comprehensively address the potential biases that may arise from variations in participants' familiarity with digital technologies, which could influence their reported preferences. Furthermore, while a range of communication methods is explored, the study does not examine psychological and contextual factors—such as patient anxiety, trust in digital platforms, or prior experiences with clinical trials—that may shape these preferences. Additionally, a more detailed comparison of the effectiveness of different symptom reporting methods in terms of adherence, data accuracy, and patient engagement would further strengthen the study's implications.

To build upon these findings, future research should incorporate a deeper exploration of the psychological and behavioral determinants influencing digital communication preferences in clinical contexts.² A comparative analysis assessing the impact of various symptom reporting methods on clinical trial adherence and data reliability could provide valuable insights for optimizing patient-centered digital health interventions.³ Moreover, the integration of qualitative methodologies, such as in-depth interviews or focus groups, could yield a richer understanding of the factors shaping patient preferences and contribute to the refinement of digital communication strategies in clinical research.⁴ These considerations would enhance the applicability and effectiveness of digital health solutions in supporting patient engagement and trial participation.

Declaration of Generative AI and AI-Assisted Technologies in the Writing Process

During the preparation of this work, the authors utilized QuillBot and SciSpace to refine the language without altering the scientific substance of the manuscript.

Disclosure

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this communication.



References

1. McDowell B, Dumais KM, Gary ST, et al. Preferences and attitudes towards digital communication and symptom reporting methods in clinical trials. *Patient Preference Adherence*. 2025;19:255–263. doi:10.2147/PPA.S474535
2. Cross SP, Alvarez-Jimenez M. The digital cumulative complexity model: a framework for improving engagement in digital mental health interventions. *Front Psychiatry*. 2024;15(September):1–10. doi:10.3389/fpsy.2024.1382726
3. Aapro M, Bossi P, Dasari A, et al. Digital health for optimal supportive care in oncology: benefits, limits, and future perspectives. *Support Care Cancer*. 2020;28(10):4589–4612. doi:10.1007/s00520-020-05539-1
4. Bernuzzi C, Piccardo MA, Marsilio M, Calcaterra V, Zuccotti G, Guglielmetti C. Value co-creation in telemedicine: a qualitative study of pediatricians' expectations regarding telehomecare implementation in an Italian Pediatric Hospital. *J Healthcare Leadership*. 2024;16(November):485–500. doi:10.2147/JHL.S467155

Dove Medical Press encourages responsible, free and frank academic debate. The content of the Patient Preference and Adherence 'letters to the editor' section does not necessarily represent the views of Dove Medical Press, its officers, agents, employees, related entities or the Patient Preference and Adherence editors. While all reasonable steps have been taken to confirm the content of each letter, Dove Medical Press accepts no liability in respect of the content of any letter, nor is it responsible for the content and accuracy of any letter to the editor.

Patient Preference and Adherence

Publish your work in this journal

Patient Preference and Adherence is an international, peer-reviewed, open access journal that focusing on the growing importance of patient preference and adherence throughout the therapeutic continuum. Patient satisfaction, acceptability, quality of life, compliance, persistence and their role in developing new therapeutic modalities and compounds to optimize clinical outcomes for existing disease states are major areas of interest for the journal. This journal has been accepted for indexing on PubMed Central. The manuscript management system is completely online and includes a very quick and fair peer-review system, which is all easy to use. Visit <http://www.dovepress.com/testimonials.php> to read real quotes from published authors.

Submit your manuscript here: <https://www.dovepress.com/patient-preference-and-adherence-journal>

Dovepress
Taylor & Francis Group