Madison Clinical Research Unit

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The Labcorp Clinical Research Unit (CRU) in Madison, Wisconsin, is a state-of-the-art, 72-bed purpose-built clinic co-located with Labcorp. The Madison team has 40 years of experience conducting Phase I trials in healthy volunteers, including AME, FIH and complex study designs. Studies requiring real-time cell identification with flow cytometry are also a focus for the Madison clinic. Our staff includes three physicians, five registered pharmacists and more than 50 full-time medical and technical personnel.

The Madison clinic is the global leader in the conduct of radiolabeled clinical studies with three nuclear pharmacists (two are Board Certified Nuclear Pharmacists) including a Radiation Safety Officer to ensure consistent compliance with FDA, NRC/Agreement state and DOT regulations across all Labcorp sites. Real-time radioanalysis (for recovery) is performed on-site to determine exact day of discharge.

The cGMP pharmacy includes two sterile and three non-sterile manufacturing suites, which can manage and handle high-potency and hazardous drugs.

On campus, Labcorp provides services from bioanalytical to metabolite ID and profiling.

Site Features

- Total capacity 72 beds
- Safety monitoring 16 beds
- Participant database 23,434
- Longest continuous in-house stay 142 days
- cGMP pharmacy, including two sterile and three non-sterile manufacturing suites
- Emergency response time < 5 minutes
- On-site Nuclear Pharmacists, Radiation Safety Officer, Radiation Safety Committee and physician-authorized users
- We have conducted more than 382 AME studies over the past 20 years





CRU & Radioanalysis Lab

1 Campus allows for vitrual real-time data and analysis

supporting every effort to achieve a recovery of



A Radioanalysis Case Study

A leading biotechnology client contracted with Labcorp for a human absorption, metabolism and excretion (AME) study using ¹⁴C to determine the excretory pathway and metabolite identification and potential enterohepatic recycling. The Labcorp CRU team in Madison, Wisconsin, gave subjects doses of the radiolabeled drug, then collected samples, analyzed data and reported results each day of the trial – with a target threshold of 90 percent recovery. The sponsor would compare the clinical study results to the preclinical data to make decisions regarding the drug's further development.

Understanding the Challenge

- Accurate and timely collection of samples and data
- Same-day analysis and interpretation of results
- Daily reporting against target of 90 percent recovery
- Scientific expertise to aid decision-making

On-Campus Clinic and Radioanalysis Deliver Real-Time Data and Analysis

A dedicated Labcorp team administered doses of the radiolabeled drug to subjects at the CRU. The staff then collected blood samples plus urine and feces during the two-week study. Rigorous collection techniques allowed for correct assessment of drug metabolites, drug excretion and potential enterohepatic recycling. The clinic immediately delivered samples to the on-campus radioanalysis lab for same-day processing. Data were electronically captured for fast, reliable analysis.

Analysis revealed longer-than-expected circulating levels of the drug in the subjects' blood and plasma, with an increased blood-to-plasma level over time and preferential binding to plasma. Usually, the team sees a recovery rate of 91-92 percent for radiolabeled drugs, but this compound presented a lower rate of 88 percent. The lagging recovery of ¹⁴C suggested that the compound was reappearing in the blood and, as a result, being slowly excreted over a longer time than the sponsor anticipated. Because these results did not match the sponsor's preclinical data, Labcorp experts consulted daily with the client to review results.

With virtually real-time data, the sponsor could draw conclusions quickly, meeting objectives, timelines and budgets. In this case, the client determined that further analysis and development of the drug were needed to complete the puzzle regarding its circulation pattern. Subsequently, Labcorp was able to offer its hAME service – collecting bile samples from the ¹⁴C-drug-dosed human subjects – to assess quantitatively both the importance and extent of the drug's metabolism via the biliary route.

Labcorp helps sponsors determine the best use of radiation for trials, based on our extensive experience. U.S. regulations allow a higher radiation level than other countries, with 60 percent of U.S. studies using 100 μ Ci and about 20 percent using doses between 150 and 600 μ Ci. This allows us to detect even the subtle presence of a ¹⁴C-compound systemically to evaluate enterohepatic recycling in humans.

