

Harnessing enthusiasm and

The Clinical Research Network supports research across the whole spectrum of disease and healthcare. Areas such as cancer, stroke and diabetes remain high on the research agenda. But what about other medical specialties such as surgery, critical care and hepatology? These and other areas are also packed with research enthusiasm and expertise, which until recently has not been harnessed. The Comprehensive Clinical Research Network Specialty Groups are changing all that - and with impressive results.



Making research happen. Critical care is a challenging area for researchers

Specialty Groups operate on local and national levels and provide a forum for likeminded individuals to come together with the common aim of supporting and advancing research within their specialty. When Specialty Groups were introduced two years ago, many of the 26 groups started out with small research portfolios which, in most cases, was due to a lack of resources rather than a lack of interest. But in some cases it was simply because the research was difficult to do. Since then Specialty Groups have rapidly evolved and now offer leadership and clinical expertise coupled with the resources needed to make research happen.

Critical care is a fitting example. In 2008/9 just under 6,500 patients took part in 14 critical care studies across the entire NIHR Clinical Research Network Portfolio. Whereas the data collected so far for 2010/11 shows an increase to over 33,000 patients participating in 32 studies. West Midlands (South) Comprehensive Local Research

Network experienced a similar rise at a local level. Julie Norris, Lead RM&G Manager, explains:

“The number of patients in critical care studies in West Midlands (South) has rocketed from 48 in 2007/8 to over 2000 in 2010/11. Our Specialty Group work has provided the focus necessary to drive the research forward, but perhaps the most significant results can be seen in our work with West Midlands Ambulance Service where there was previously no research infrastructure or activity at all.

“There is a lot of scepticism around pre-hospital research mainly because it is so new - and getting paramedics research savvy can be challenging. But we’ve shown it can be done and we’re now the lead Network for the PARAMEDIC study which is a major NIHR funded trial and the largest pre-hospital

care study in the UK. With our support the Ambulance Trust has gone from zero to 180 patients recruited in 12 months.”

Professor Gavin Perkins is one of the study’s co-investigators and the local Critical Care Specialty Group lead. He puts the success down to the Network:

“Specialist areas often require specialist support. Investment from the Network via the appointment of a research paramedic working within the Ambulance Service has had a huge impact. It means they can get their colleagues on board as well as identify patients. That engagement with the Ambulance Service is crucial and would not have happened if there had been no resource centrally. It’s that combined with the leadership, coordination and communication that Specialty Groups bring that makes these complex trials possible.”

“with the correct level of support from the Network, we can accomplish a lot”

expertise

Surgery is another complex area for researchers. It spans all areas of healthcare so surgical studies often come under the heading of other medical specialties. Consequently it's a difficult research community to bring together, but by providing specialist support Kent and Medway Comprehensive Local Research Network have made significant headway. Lee Tomlinson joined the Network as a Specialist Researcher to help build and support the surgery research portfolio in the region. She explains how:

"We trawled the national Portfolio database for studies that we could contribute to. We also held two events; one last summer and one in February 2011. Around 25 people attended the first event, but that figure tripled for the second event - so we knew the message was getting through. We showcased research and generated a lot of interest. Surprisingly, many attendees were not aware of their colleagues' involvement in research. Next we had to keep the momentum going and my surgical nurse know-how really helped - knowing how to reach surgeons and anticipating the kind of support they would need. Sometimes I'd find myself hanging around outside operating theatres waiting for the surgeons so that I could speak with them face to face!

"The hard work is paying off now", continues Lee. "Two and a half years ago this Network was only participating in one surgically orientated cancer study. We now have six surgical studies open and two more in the pipeline at two new sites with two new principal investigators. Plus we have a further four at feasibility stage involving three more new investigators. So that's five new consultants on board at four new sites. And what's more, all four NHS Trusts in Kent and Medway are now involved in surgical



Overcoming obstacles. Surgery spans all areas of healthcare which makes it a difficult research community to bring together

research – that certainly wasn't the case before."

Gastrointestinal and General Surgeon, Haythem Ali, is also the Surgery Specialty Group lead for Kent and Medway Comprehensive Local Research Network. He works closely with Lee and contextualizes the achievement:

"It's often hard to put a surgery research question through the research process, and the outcomes are not easily tangible. Plus the Kent and Medway region is unusual because we have no university back-up; there's no professor of surgery to help grow the research base. We just have seven district general hospitals across 50 square miles. Despite that, the Specialty Group mechanism has helped channel our enthusiasm and we've shown that, with the correct level of support from the Network, we can accomplish a lot and build a substantial research portfolio from nothing."

The impact of Specialty Groups is not just felt locally. Lorraine Underwood is a Research Associate for Peninsula Comprehensive Local Research Network. Last year her Network supported a large observational musculoskeletal study which Lorraine showcased at the national Musculoskeletal Specialty Group meeting in September 2010. Six months later, at the subsequent meeting in March 2011, study recruitment figures had soared by over 1000 patients as a result of highlighting the study to the national group members - many of whom had contributed locally.

Lorraine continues to work across a number of Specialty Groups providing support where ever it is needed. When a recent hepatology study presented specific challenges, Lorraine had to call on all available resources:

"The STOPAH study was tricky. The patients involved were seriously ill so it was important that I worked with the Specialty Group lead to make sure the principal investigators knew exactly what they were taking on. Pharmacy was also a big issue and speaking to the director of pharmacy directly was key to unblocking the study. Then we

"the development of Specialty Groups over the last two years has been both successful and rapid"

had to use a 'hub and spoke' system to distribute the drugs from Plymouth to the other sites across Peninsula within a 48 hour window of a patient being recruited. Further complications included storage, temperature control, and organising the courier service to make sure the drugs arrived at the bedside on time."

Despite these obstacles the study is now open to recruitment. Jennifer Black, is a STOPAH Clinical Trial Coordinator at the University of Southampton Clinical Trials Unit:

"Lorraine has been fantastic in coordinating and communicating with the hub and spokes and maintaining the speed of set-up and motivation of those involved. Having that single point of contact is invaluable. Plymouth was the first of 12 hubs to be set up nationally. It was also the first region to get spoke sites open and recruiting."

So are Specialty Groups making a difference?

Although this national initiative is relatively new, the above examples clearly demonstrate that Specialty Groups are having an impact. A recent review panel comprising external input, stakeholder representation and Comprehensive Clinical Research Network representation, concluded that 'in overall terms, the development of Specialty Groups over the last two years has been both successful and rapid.' So whilst there is still much to do, the ongoing enthusiasm, expertise and commitment of the 450 members nation-wide means that we can expect further successes in the future.

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