

Reinforcing collaboration between academia and industry

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Olav Flaten: Disclaimer

- The content of this study and this presentation represent the project, and GlaxoSmithKline has no interest or opinion herein

Study abstract

- Background and Nordic Innovation initiative
- Digital study with in-depth interviews in all five Nordic countries
- "Users" perspective is studied
- 42 % response rate (best from S and N)
- Study showed:
 - SME and Big Pharma companies is dependent on a well functioning collaboration
 - Hospitals' role in the innovation process is important but insufficient
 - Small and "unexperienced" companies need more, and get more help from hospitals
 - Hospital infrastructure needs to improve
 - Cost not an big problem
 - Regulatory agencies not a problem

Background

- **A growing SME landscape in the biomedical area**
- **Several studies and anecdotal reports have demonstrated a suboptimal collaboration between industry and academia, and with hospitals in particular**
- **Existing expertise is important for local innovation**
- **A clearly defined wish in all Nordic countries to support innovation and to commercialize research projects at the universities and at the major hospitals**
- **Nordic Innovation is a Nordic institution working to promote cross-border trade and innovation**
- **Working under the auspices of the Nordic Council of Ministers**
- **Project owner: Innovest AS**
- **Cooperation from all of the Associations of Pharmaceutical Industries and Haukeland University Hospital.**

Materials and Methods:

Nordic study inviting approximately 10 BPs and 10 SMEs in each country

- **Part 1: Quantitative survey:**
 - Digital, anonymous questionnaire with 14 questions
 - 123 invited participants. 52 responses
 - Scores from 1-5 (5 is best). mean of score = continuous data with decimals.
 - Statistical analyses (SPSS v 20.0) for quantitative analysis and comparisons of mean scores.

- **Part 2: Qualitative survey**
 - In depth interview, elaboration of personal experience
 - ~ five per country. n=25 Anonymous treatment of data
 - Confirming or contradicting the digital survey?

 - **Thanks to all the participants!**

Where ARE the obstacles for Clinical Trials in the Nordic countries?

IT IS NOT the regulatory framework.

- Application procedures run fairly smoothly. EU legislation → quick treatment in all countries.
- However: two (sometimes three) different applications is an obstacle
 - Ethical committees, different guidelines in different hospitals
 - Country wise differences in hospital procedures concerning agreements for trials

IT IS IN PART the low number of patients in each country

- Statement from quantitative survey: "working within the Nordic countries as a unity with 25 million patients would increase the desire to perform clinical trials in the Nordic countries" (agreement score: 4.4)
 - However, for many common diseases this is not the case.

IT IS ALSO «Service and organization in hospitals»

- "Lack of urgency" in hospital investigators.
- Hospitals lack time and resources to prioritize clinical trials

Areas for improvement

Suggestions for improvements : from in-depth interviews:

- The hospitals need to create incentives for physicians to participate in clinical trials.
- Applied research as a part of education of students and doctors would increase the understanding of demands in clinical trials and would trigger their interest for applied science and innovation
- Intermittent years dedicated to research in stead of clinical work would allow to focus on clinical trials (and basic research). This would benefit patients and increase research competence
- Allocated study staff, perhaps even sponsored by the pharma-companies is essential to succeed with clinical trials.

Key messages

- **Clinical trials are imperative to clinical practice**
- **Patients will benefit** from physicians and hospitals being familiarized with new drugs and methods
- It is necessary to **create incentives** to perform clinical trials in hospitals
- **Time and resources** must be allocated to prioritize participation in clinical trials
- **Uniformity in the application** process is necessary to speed up the process and make Nordic countries attractive as study sites (The power of ethics committees is strong)
- **We need to do something NOW** or the expertise to perform clinical trials will be lost and cannot be retrieved.

Discussion and Conclusion

- Local and regional expertise and infrastructure in the health care sector is important for innovation and new product development.
- Especially the smaller companies, start-ups, are very dependent on local hospitals
- Innovation potential at the hospitals can be released if infrastructure and respect for applied research is improved
- Study demonstrated system issues at hospital, not direct quality issues
- The system issues are management challenges, not operational challenges
- Confirms previous studies, with better documentation on details
- The report from this study will be given to Nordic Innovation for political follow up
- The report should be considered by hospital managements and owners
- Need for a similar study to look at the hospitals' perspective?