EXPLORING STRATEGIES TO SAFEGUARD THE FUTURE OF MULTIPLE SCLEROSIS CLINICAL RESEARCH IN AUSTRALIA

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**Background:** Clinical research plays an important role in multiple sclerosis (MS). Treatment options can be limited, particularly in clinically isolated syndrome and primary and secondary progressive MS. Even in relapsing-remitting MS, existing treatments do not yet provide certainty of clear-cut benefit or outcome because of the unpredictable nature of MS. Clinical trials provide an alternative to standard treatment options and an opportunity for people to contribute to medical research. Emerging treatments aim to improve relapse rates, convenience, and quality of life; and reduce magnetic resonance imaging (MRI) disease activity, disability progression, and side effects. These treatments offer hope to people who are grappling with the challenges and uncertainties of MS. Furthermore, the involvement of Australian centers in clinical trials ensures knowledge of and access to cutting-edge treatments for the future benefit of people with MS. Unfortunately, the future of clinical research is under threat in Australia. The massive cost of drug development, combined with the recent global financial crisis, has forced pharmaceutical companies to carefully select clinical trial centers on the basis of quality, timeliness (of regulatory approval and study start), recruitment capacity, and cost. Australia has a reputation for producing high-quality data, but otherwise struggles to compete, particularly with countries such as India and China. In recognition of the increasing global competition for investment in clinical research, this project explores the threats to Australia’s competitiveness and identifies strategies to improve on our timeliness, capacity, and cost while maintaining quality. Examples include actively supporting Australia’s move to a streamlined ethical review process; collaborating more effectively with sponsors to improve efficiencies; enabling strong early recruitment by identifying potential patients prior to study; building a national, coordinated patient referral network; allocating specific roles to study staff to enhance efficiencies; and allowing flexibility in staffing to match resources to project requirements. These suggestions provide a means of moving forward to ensure ongoing patient access to new and better treatments for MS and to safeguard Australia’s future in clinical research.

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