Can innovation help improve the standard of care everywhere?

Research and clinical management of patients during outbreaks: Updates and priorities

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The 3rd Global Research and Innovation Forum

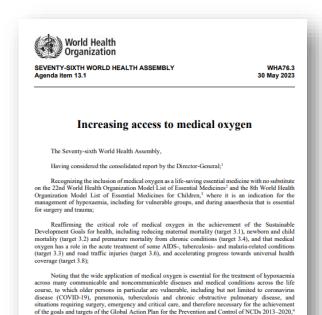






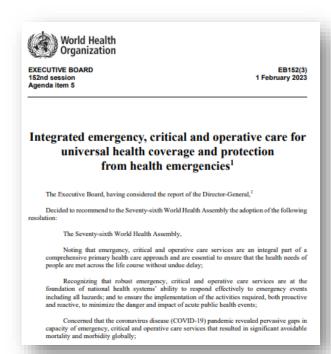
Focusing on improving supportive care

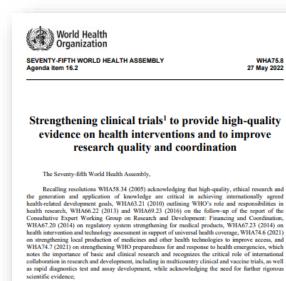
The research that changes the lives of patients is driven by questions centred on clinicians, health systems, and patients.



the End TB Strategy,5 the WHO Package of Essential Noncommunicable (PEN) Disease Interventions

for Primary Health Care6 and WHO Guidelines for Safe Surgery 2009;





Noting the recommendations made by the Independent Panel for Pandemic Preparedness and

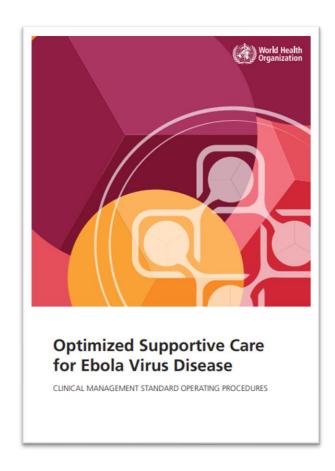
Response in their review "COVID-19: make it the last pandemic" relating to health research and

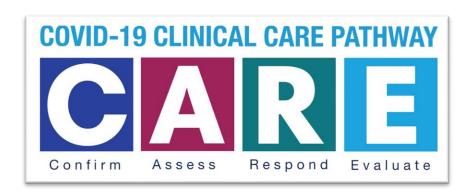


development, including clinical trials;



Focusing on evidence to improve supportive care







Focusing on prioritizing what supportive care elements in what population are important

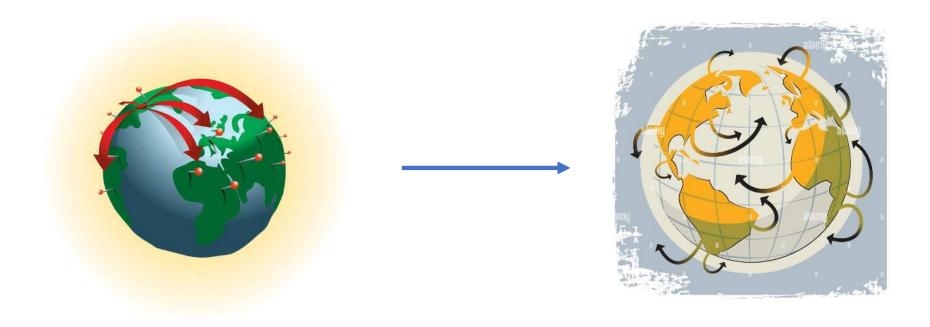
- Transparent prioritization process with true engagement of communities
- Integrating pre-hospital, hospital, and post-hospitalization populations
- Evaluating novel interventions, processes of care, and other care strategies





Building a research infrastructure centred on trust

The research that changes the lives of patients is built on trust and collegiality between the researchers.

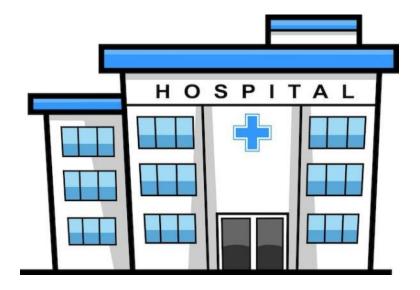




Focusing on research preparedness

The research that changes the lives of patients is done by regions and institutions where they have done research before.







Focusing on merging clinical and research and public health work

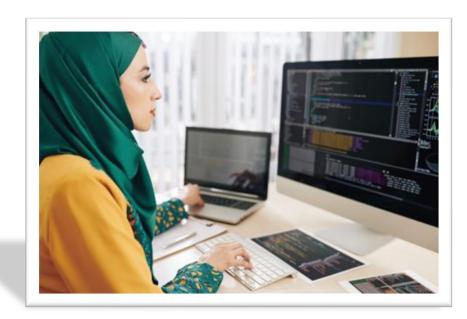
The research that changes the lives of patients is integrated into health systems and public health infrastructure for surveillance





Focusing on research coordination

The research that changes the lives of patients is done using pre-established tools such as outcome sets, common data variables, and standardized risk-assessments





Focusing on research data infrastructure

Having the database and case report forms operational and useful before the next pandemic/outbreak.

World Health Organization		Module 1, page 1
	PARTICIPANT ID ²	
Module 1: Background demographical ar		
This module is completed by □patient □caregiver (in case of children) □health care worker		
Facility name of follow up visit (if applies)		Country
Date of module 1 completion: _D_J_D_J/_	M_ _M_ /_Y_ _Y_ _Y_	Y_)
1.1 Acute episode of COVID-19 information (first episode, in case of re-infection)		
Does the patient have a WHO Rapid Core CRF Participant ID?		
If Yes, report PARTICIPANT ID of CORE CRF IIIIIIII = I IIIIII		
1.2 Demographics		
Sex at Birth: Male Female Not speci	fied	
Age: [][][] years; OR [][] months [][1 days	
Height (Length): [][] cm	• OF WORLD • OF THE STATE OF TH	
Weight: [][][] ka		



Future research priorities







Future research priorities

Optimizing supportive care for acutely ill patients

- Improving <u>access</u> to research in acute care, to improve <u>quality</u>
- Prioritizing questions that are globally relevant for global evaluation
- And prioritizing questions that are locally relevant for local evaluation
- Constantly asking (and answering) research questions for severely ill patients around the world, to
- o i) improve standards of care for the next pandemic; and
- o ii) improve research capabilities for the next pandemic for research on supportive care, health systems, and novel interventions



Big Research idea







Big research idea

Globally representative clinical surveillance and clinical data infrastructure that can immediately pivot to interventional research.



Big research idea

Federated with common variable sets and common data dictionaries, under local control, trial-ready, with international sharing when necessary



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- InFACT Toronto meeting collaborators
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