To the Editor: Why Should Busy Clinicians Take Time to Participate in Clinical Research?

Todd H. Davies, PhD

Author Affiliations:

1. Marshall University, Huntington, West Virginia

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Corresponding Author:

Todd H. Davies, PhD
Director of Research Development & Translation
Department of Clinical and Translational Sciences
Marshall University Joan C Edwards School of Medicine
Huntington, West Virginia
Email: daviest@marshall.edu
Health disparities in rural areas have been documented.\textsuperscript{1,2} Recent evidence shows that critical access hospitals witnessed worse outcomes in patients with acute myocardial infarction, congestive heart failure and pneumonia.\textsuperscript{3} The unique circumstances of a rural hospital or clinic, particularly in Appalachia where the mountainous terrain limits access, often prohibit these institutions from benefiting from new therapies which are usually developed in urban areas. Participation in clinical trials is one way to improve patient care in rural areas while developing procedures and therapies appropriate for the specific population.

Clinical trials provide a way to evaluate controlled and usually randomized interventions and produce objective observations on the best therapy for the patient and the patient population as a group. This research is the gunwale of evidence-based therapy, and provides clinicians with unbiased information needed to assist them in complex medical decisions. Participation in research allows the clinician investigator to become immersed in a specific area of medicine in a way that cannot be duplicated by simply reading the literature. In addition, investigators and their staff have opportunities to meet other researchers from across the country and around the world and these meetings are often more productive when centered on a specific area of interest or collaboration.

For hospitals and clinical organizations as well, clinical research is a boon. Having clinicians participate in trials provides on-site experts who can accelerate the adoption of newly approved therapies. Experimental drugs, devices and other therapies studied in clinical trials are the cutting edge of care and a way to provide patients with the most advanced therapy available. While new therapies are not always the best therapies, evidence is starting to mount that shows improved patient outcomes in facilities that regularly conduct clinical research.

Several studies in the United States and Europe demonstrated positive findings in regard to improved patient outcomes from clinics and hospitals that participate in research.\textsuperscript{4,5} Two studies in particular highlight the principle of better patient care through participation in clinical trials. In the first study, 174,062 patients with non-ST segment elevation acute coronary syndrome were reviewed from 494 participating hospitals. Short term mortality decreased significantly from hospitals that did not participate in research (5.9%) to hospitals that participated in trials (4.4%). The decrease in mortality was even greater at those sites with high enrollment activity (3.3%).\textsuperscript{6} These data are particularly telling when one considers that only about 3% of the patients with non-ST segment elevation acute coronary syndrome were actively enrolled in a trial in the research hospitals. A second study of 165 German hospitals demonstrated a 1.6-fold higher risk of death in patients with ovarian cancer in non-research hospitals even after adjusting for FIGO (International Federation of Gynaecology and Obstetrics) stage and hospital size.\textsuperscript{7} Similar findings have been published in breast cancer,\textsuperscript{8,9} lung cancer\textsuperscript{10} and alcohol abuse\textsuperscript{11}. It has been suggested that outcomes are better for patients even if they are in the placebo arm of a clinical trial.\textsuperscript{12}

Clinical research, at its core, is about creating access to novel treatments, educating the clinical community about the cutting edge of medicine and providing the best possible care to the patient population as a whole. The entire community, patients and practitioners, benefits from clinical research.
References


