



NORTH WEST  
BREAST RESEARCH  
COLLABORATIVE



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RESEARCH  
COLLABORATIVE

# Collaborative Research: What?, Why? and How?

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Jennifer Law ST7 Colorectal surgery

# Outline – Research

- Who cares?
- Barriers
- Options for research
- What else can we do?
- Description of research collaboratives
- Successes
- Associate PI scheme
- Get involved



# Who cares about research?

- CQC Annual report – characteristics of ‘well-led’ organisation
- “A growing body of evidence is now demonstrating that research-active hospitals have better patient outcomes” – Royal college of Physicians
- Patients treated in clinical trials have better outcomes (regardless of treatment modality)
- Evidence-based medicine – adding to the body of evidence
- “You must be competent in all aspects of your work, including management, research and teaching” – GMC, Good medical practice



# But there are many barriers...

- Lack of interest
- Time pressures
- Lack of access
  - Awareness of current studies
  - How to start?
  - Research skills
- Lack of recognition
- A lot of work for potentially not much output
- Funding
- High volume, high quality research really difficult (Lancet, 1996, Horton)
- Trainees
  - Moving jobs
  - Lack of ownership



# What are the options?

- Local, small studies ←
- Local patient recruitment – on delegation log for larger study ←
- Local principle investigator (PI)
  
- Steering committee member
- Formal research degree – MD/PhD ←
- Chief investigator (CI)
- Academic career – University
  
- Related opportunities: Journal reviews/editor, funding panels ←

# Surgical research

- Case series
- Few RCTs
- Expensive
- Difficult to perform

THE LANCET

**COMMENTARY**

**Surgical research or comic opera:  
questions, but few answers**

*See pages 989, 995, 1000, 1004*

**Surgical Trials Initiative**



Royal College  
of Surgeons  
of England

# So.... Then what?

- Research Collaborative
  - Like-minded
  - Central steering committee
  - Local recruitment, local PIs
- 2007 – West Midlands research collaborative
  - Trainee led with consultant input
  - Links to trials units





# And it worked.....

## Impact of wound edge protection devices on surgical site infection after laparotomy: multicentre randomised controlled trial (ROSSINI Trial)

*BMJ* 2013 ; 347 doi: <https://doi.org/10.1136/bmj.f4305> (Published 31 July 2013)

Cite this as: *BMJ* 2013;347:f4305

21 UK hospitals  
760 Patients



Randomized Controlled Trial > *BMJ*. 2017 Apr 18;357:j1455. doi: 10.1136/bmj.j1455.

## Dexamethasone versus standard treatment for postoperative nausea and vomiting in gastrointestinal surgery: randomised controlled trial (DREAMS Trial)

45 UK hospitals  
1350 Patients







So everyone did it.....

**OPSOC.**  
OLDER PERSONS SURGICAL OUTCOMES COLLABORATION



- SSRRG
- NOSTRA
- .....
- YSRC
- MeRGS
- Welsh
- Barbers
- WMRC
- EMSAN
- EESURG
- LSRG
- Kent
- group
- SPARCS



**NATIONAL RESEARCH COLLABORATIVE**

# North West Research Collaborative

- Established in 2012
- Surgical trainee led with consultant supervision
- Widening access to research
- Committee
- Separate committees for each study
- Spread the responsibility

# Some of our successes



- RCT
- 433 patients
- 50 sites



- Observational
- 937 patients
- 49 sites



- International RCT
- UK & Australia
- 840 patients
- 34 sites

# Onto bigger and better things

GlobalSurg CovidSurg network

122

Countries

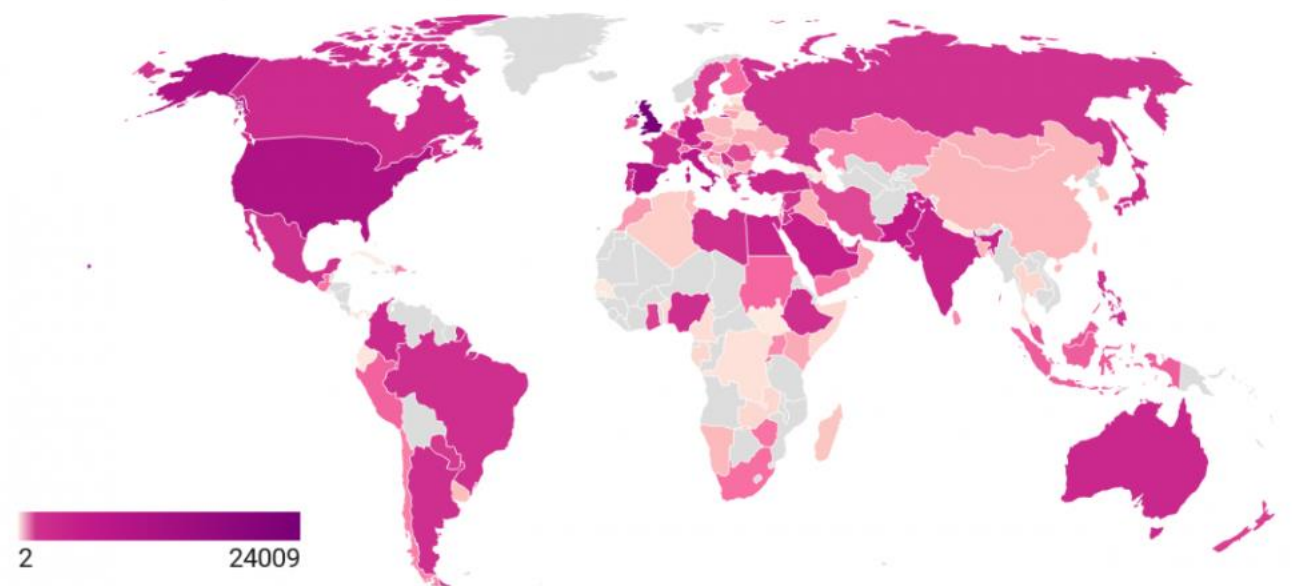
1677

Centres

142815

Patients

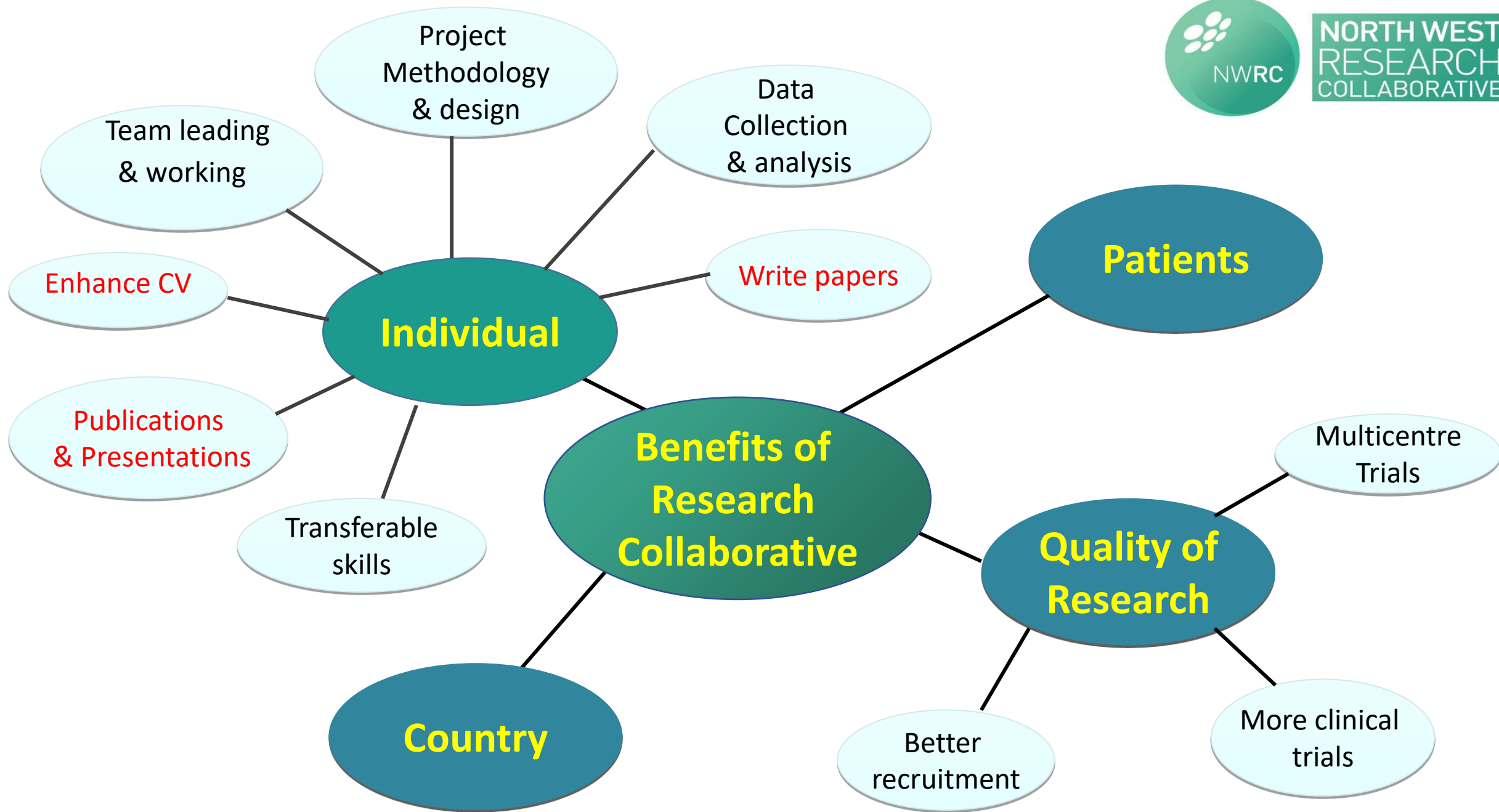
## GlobalSurg CovidSurg Week patients





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# Cautions

- You get out what you put in!
- Authorship





# Cautions

- Some studies don't lend themselves well to research collaboratives



- Complex studies can't be done this way



**Intervention 1** - 2% alcoholic chlorhexidine skin preparation [SKIN PREP]

**Intervention 2** - Iodophor-impregnated incise drape [DRAPE]

**Intervention 3** - Gentamicin-impregnated collagen sponge [SPONGE]



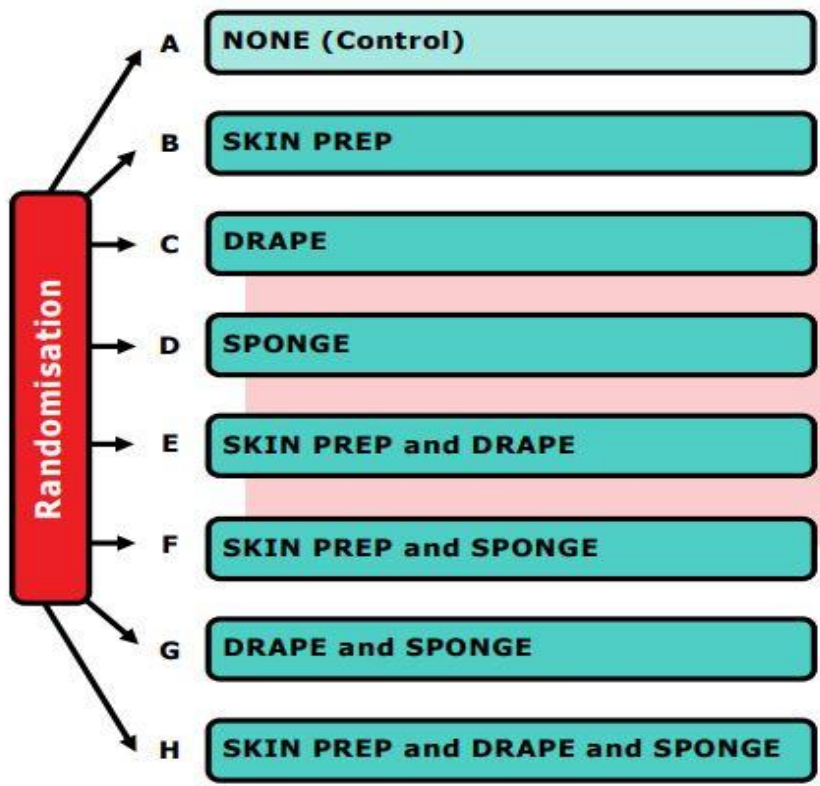
Allocation ratio - A : B : C : D : E : F : G : H = 2 : 1 : 1 : 1 : 1 : 1 : 1 : 1

End of Pilot at 214 patients

First interim analysis at 1890 patients

Second interim analysis

Final analysis



Stage 1

Stage 2

Stage 3

Stage 4

4 interventional arms dropped

0, 1, 2 or 3 interventional arms dropped



Randomisation will cease to arms demonstrating a lack of effectiveness or lack of benefit compared to the control arm.

# Get involved

- Associate PI scheme
- NWRC – JOIN US!
  - Attend a meeting
  - Follow us @NWRCsurgery
  - Email us [nwrCsurgery@gmail.com](mailto:nwrCsurgery@gmail.com)
  - Collaborate with us
- National specialty collaboratives – there are too many to list – find yours...
- Set up your own group

# Associate PI Scheme

- Open to any healthcare professional
- Work alongside PI at local site
- Willing to contribute to the study for 6 months
- Specific studies – but 486 currently registered, and you can encourage them to register
- Experience about how studies run at a site level, patient recruitment, data collection

THANK YOU!

Any questions?