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# Research disruptions and recovery

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With the pandemic of COVID-19, the routine work of surgeons has been reduced to release resources to critical care and other functions. This is necessary and right, in order to protect the health of our communities now. As a consequence, many of us who undertake clinical research have seen our work suspended. With a rich portfolio of colorectal research, this includes studies such as ROSSINI2, PITSTOP, & MASH, and has delayed the start of other important studies such as ELF 2 and Damascus. When we return to something akin to normality, we shall be looking to re-establish the studies in a timely manner. Funders have generally been flexible with regards to the disruption and have provided guidance on how the disruption might be managed<sup>1</sup>. There is no doubt that they may be asked to provide additional support for studies in progress, which may impact future funding opportunities.

This disruption and pause in work might however provide an opportunity. In order to avoid drowning in the deluge of extension requests that will arrive towards the end of the pandemic, the HRA could allow currently approved studies to extend recruitment commensurate with lost time without need for prior approval. The process of securing approvals to conduct even low risk surgical research in the UK is Byzantine in complexity. Securing central approvals to a change in terms of this research as simple as adding a site can be drawn out affairs. Many of our prior efforts to secure approvals are now at risk of 'timing out', and approvals will need to be sought to refresh or extend recruitment and follow up periods from the central Health Research Authority (HRA).

If the HRA act promptly, additional delays of months for studies which wish to resume recruitment in a period after they were due to have closed could be avoided. Such action would also allow resources to be moved to processing, with the expected surge in requests for new approvals as clinical practice redevelops momentum following the current crisis. In addition, attention could also turn to development of a streamlined process for the set-up of low-risk studies (e.g. observational) to optimise the recovery of our vibrant research community.

Yours faithfully

## References

1. DHSC issues guidance on the impact of COVID-19 on research funded or supported by NIHR <a href="https://www.nihr.ac.uk/news/dhsc-issues-guidance-on-the-impact-on-covid-19-on-research-funded-or-supported-by-nihr/24469">https://www.nihr.ac.uk/news/dhsc-issues-guidance-on-the-impact-on-covid-19-on-research-funded-or-supported-by-nihr/24469</a>, [last accessed 23/03/2020]