

CEO's message

There are precious few good things about this pandemic, but one of them is widespread public appreciation of clinical trials. While the last 12-18 months have been horrific on many levels, it's fair to say that science – and the scientific process - knocked it right out of the park with the speed, and quality, of its response to COVID. Public support for clinical trials in Ireland reflects that. We surveyed Irish people at the end of 2020 and found 1 in 2 people would take part in a clinical trial. That's huge.

But yes - surprise, surprise - the pandemic has hit cancer trials in Ireland, just as it has hit everything else. Overall, the number of patients getting on trials fell by 45% for the first quarter of this year, versus last year - and in the whole of 2020, not a single patient was recruited to a lung cancer trial. That's sobering.

Why?



Eibhlín Mulroe, CEO, Cancer Trials Ireland

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Because it means some patients aren't getting treatments that might help them. Simple as that. Patients who are our mothers, fathers, brothers, sisters, friends, neighbours. Every single one of them matters. That's the difference between getting the newest treatments in development, and not.

That's why doctors run trials in the first place - for their patients. Sure, they might publish results in medical journals - and that's good, it has benefits for them, their teams, the hospitals and universities they work out of, and even the country and its reputation as a good place to do research. But the heart of the thing is patients – and trials are often driven by sheer commitment from our doctors.

The government doesn't pay doctors to do trials. It doesn't mandate in their contracts that they 'must' do research. In fact, when Cancer Trials Ireland was founded back in the 1990s (it was called ICORG then) it was fuelled mainly by passion. Back then, doctors in Ireland looked around the world and saw patients in other countries were getting options to survive cancer and that wasn't happening here.

So the first step to getting these life-saving treatments into Ireland was (and still is, to this day) opening cancer clinical trials here. In so doing, Irish patients got new treatments. Not everyone did, or could, but these trials help build the case nationally, and internationally that everyone should

(or, yes, should not) get the treatment, and while the argument is made, lives are saved. Again: fathers, mothers, daughters - the people we hold nearest and dearest.

Over time, the small numbers of people saved add up to big numbers: over the last two decades, nearly 31,000 patients (30,770) were enrolled on almost 800 (786) cancer clinical trials. Not every one of these people was in a drug study, not everyone received a 'new' drug, but they all made a difference to the health care and medical treatment of future generations. So I'm writing to you today to say that if you, or a loved one, is dealing with a cancer diagnosis – as so many of us will in this life – talk to your doctor. Ask him or her about clinical trials as an option.

In the meantime, allow me to dispel a common misconception about cancer clinical trials. You might worry about joining a trial and ending up taking a 'placebo', and end up with nothing. That's not the case in most cancer trials in Ireland. No cancer trial ever compares how a new treatment works against 'nothing' – there is no value in that. New treatments get compared to the very best available treatment there is. Ultimately, if the government is going to pay for a new treatment, it has to be verifiably better than the best available ('standard of care', it's known as) or they aren't going to pay for it. So, if you're on a cancer trial, you are highly likely to receive the best available treatment – at

a minimum.

Then there is the level of care and attention you get, it's above and beyond the already excellent care in our cancer units. Your doctor and your care team are never more than a phone call away. You have many more appointments as the team monitors your progress, and this increased level of care alone contributes to better patient outcomes, even when a patient is on the placebo arm of the trial (which, you will recall, means they are receiving the best treatment ordinarily available). In fact, there's even some evidence to suggest that patients treated in hospitals where trials are taking place have better outcomes - that clinical trials raise everyone's game.

Cancer Trials Ireland believes in celebrating International Clinical Trials Day because we believe in research and we believe we can do more for Irish cancer patients. We need the decision makers in health and politicians to support our efforts and your voice will help us. So tell your family, tell your friends. Spread our message of hope.

If you're interested in clinical trials as a treatment option, talk to your doctor. Just ask. If it's in cancer, you can look at our website and see all the cancer trials that are available - but first and foremost, talk to your doctor.

For everyone else, today is a day to applaud the achievements of science and the scientific process. If you haven't got your COVID jab yet, the day you do, spare a moment to think about how it got there – through clinical trials. Trials may not be as dazzling as space travel, but the things they help us achieve are no less impressive.

Eibhlín Mulroe,

CEO, Cancer Trials Ireland

