



# "Underpinning Research in Scotland" NHS Research Scotland (NRS) Diabetes Network





# **Networks & Specialty Groups**

#### DIABETES

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Cancer

Dementia & Neuroprogressive Disease

Diabetes

Mental Health

**Paediatrics** 

**Primary Care** 

Stroke

Specialty Groups Cardiovascular

Age and Ageing

Gastroenterology

Hepatology

Ophthalmology

Respiratory

Reproductive Health
Critical care
Genetics
Infectious Diseases
Oral and Dental

Dermatology
Haematology
Metabolic & Endoc

Musculoskeletal Health

Metabolic & Endocrine

Renal



#### Mission of the Diabetes Network

# Increase the quantity and quality of clinical research activity and Diabetes Care in Scotland





Position	Name	WTE
Lead clinician	Rory McCrimmon	0.1
Network Manager	Anna Barnet	
Register Manager	John Kerr	1
Administrator	Alison Abubaker	1
Computer Programmer 1	Michael Bluett	/ 1
Computer Programmer 2	University of Edinburgh	1

Position	Name	WTE
Research Nurse (Tayside)	Jackie Lindsay	0.8
Research Nurse (Tayside)	Lisa Stewart	0.2
Research Nurse (Fife)	Karen Gray	0.2
Research Nurse (Forth Valley)	Margaret Duncan	0.2
Research Nurse ( Highland )	Wendy McKinnon	0.2
Research Nurse (Ayrshire and Arran)	Karen Allan	0.2
Research Nurse (Lanarkshire)	Bernie Welsh	0.4
Research Nurse ( Primary Care Initiative	Gill Reekie 0.2fte 04-11 '16, 100%fte 12-03 '17	0.2
Edinburgh	John McKnight/ Lesley Stevens	1.1
Grampian	Sam Philip/ Lynn Murray/ Julie Toye	/1.1
Glasgow	Robbie Lindsay/ Hilary Peddie	1.1
New research nurse post (Lothian)	Band 6 nurse Kirsty Kennedy	0.4
New research nurse post ( Glasgow )	Band 6 nurse	0.4



#### Recruitment to commercial (target increase of 10% per annum)

#### 4.1 Total commercial recruitment number

Commercial recruitment						
2012/2013	2013/2014	% change	2014/2015	% change	2015/2016	% change
564	2381	322%	3071	29%	255	-92%

2016/17: 542 patients in total recruited to commercial studies (taken from number of new patients recruited each month)

4.2 Commercial recruitment by NRS Node current financial year, and two preceding financial years.

Nodes	2012/2013	2013/2014	2014/2015	2015/2016
North	32	103	27	18
East	28	435	868	50
South East	467	1401	2030	22
West	37	442	146	165
Totals	564	2381	3071	255



# Some of the new trials that will be starting soon...

#### IABETES

				Access of
TRIAL/FUNDER	Number patients required	Sponsor	Subject	CI
OPTION NIHR	392	University of Shefield	Optimal pathway for treating neuropathic pain	Prof Solomon Tesfaye
PONTIAC2 ROCHE	2400	University of Vienna	Prevention of cardiac events in diabetes patients	Prof Martin Huelsmann
MEDI013 MEDIMMUNE	40	MedImmune	Phase II trial of new GLP-1/glucagon co- antagonist	Prof Rory McCrimmon
LENS NIHR	1060	University of Oxford	Fenofibrate in diabetic retinopathy	Prof David Preiss

Scotland is joining NIHR trials but we would like to see more trials organized from Scotland



#### **Recruitment to non-commercial** (target increase of 10% per annum)

3.1 Total non-commercial recruitment number

Non-commercial recruitment						
2012/2013	2013/2014	% change	2014/2015	% change	2015/2016	% change
983	786	-20%	906	15%	477	-47%

2016/17: 109 patients in total recruited to non-commercial studies (taken from records of number of new patients recruited each month)

3.2 Non-commercial recruitment by NRS Node for current financial year, and two preceding financial years.

Nodes	2012/2013	2013/2014	2014/2015	2015/2016
North	91	151	38	28
East	730	332	356	168
South East	87	152	2	54
West	75	151	510	227
Totals	983	786	906	477



#### **Academic studies**

- Wellcome Trust Genetic Consortium Case Control study (over 15,000 patients T2D recruited to this study)
- **REMOVAL** Metformin in T1D
- SUMMIT IMI funded (biomarkers T2D) EURO 48M
- **DIRECT –IMI funded patient stratification in T2D EURO 27M**
- **UNITED** Using pharmacogeNtics to Improve Treatment in Early onset **Diabetes**
- MASTERMIND Understanding individual variation in treatment response in T2D
- **Retro Master Retrospective cohort of extreme responders to second and** third line Type 2 diabetes therapy
- SDRN Type 1 bioresource –12 sites, >6000 patients



# **Epidemiology papers for 2018**

2018			
Type 2 diabetes, socioeconomic status and life expectancy in Scotland (2012-2014): a population-based observational study.	Diabetologia	Wild SH	Walker J, Colhoun H, Livingstone S, McCrimmon R, Petrie J, Sattar N, Wild S; Scottish Diabetes Research Network Epidemiology Group. Diabetologia. 2018 Jan;61(1):108-116. doi: 10.1007/s00125-017-4478-x. Epub 2017 Oct 26.PMID:29075822 https://link.springer.com/article/10.1007%2Fs00125-017-4478-x
Incident ischaemic stroke and Type 2 diabetes: trends in incidence and case fatality in Scotland 2004-2013.	Diabetic Medicine	Read SH	Read SH, McAllister DA, Colhoun HM, Farran B, Fischbacher C, Kerssens JJ, Leese GP, Lindsay RS, McCrimmon RJ, McGurnaghan S, Philip S, Sattar N, Wild SH; Scottish Diabetes Research Network Epidemiology Group. Diabet Med. 2018 Jan;35(1):99-106. doi: 10.1111/dme.13528. Epub 2017 Nov 6. PMID:29044687 http://onlinelibrary.wiley.com/doi/10.1111/dme.13528/abstract;jsessionid=BD1B099FA20AAD99C0FCF6D612F0CE29 .f01t02
Diabetes and pregnancy: national trends over a 15 year period.	Diabetologia	Lindsay RS	Mackin ST, Nelson SM, Kerssens JJ, Wood R, Wild S, Colhoun HM, Leese GP, Philip S, Lindsay RS; SDRN Epidemiology Group. Diabetologia. 2018 Jan 11. doi: 10.1007/s00125-017-4529-3. [Epub ahead of print] PMID: 29322220 https://link.springer.com/article/10.1007%2Fs00125-017-4529-3
Interaction between variants in the CYP2C9 and POR genes and the risk of sulfonylurea-induced hypoglycaemia: A GoDARTS Study.	Diabetes Obes Metab	Pearson ER	Dujic T, Zhou K, Donnelly LA, Leese G, Palmer CNA, Pearson ER. Diabetes Obes Metab. 2018 Jan;20(1):211-214. doi: 10.1111/dom.13046. Epub 2017 Aug 25. PMID:28656666 https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5724509/



# Scotland – a unique place for diabetes research



- Total Scottish Population 5,373,000
- People living with diabetes: 291,981 (as of Dec 2016). 5.4% of the population
- 88,018 people with diabetes were diagnosed within the previous 4 years.
- All patients nationally are registered onto a single clinical system; the SCI-Diabetes electronic health record.



















#### **Scottish Health Statistics**

The website of ISD Scotland Better Information, Better Decisions, Better Health













### **Clinical Research Facilities**

#### Scottish Network











HOME MY DIABETES INFORMATION LOCAL SERVICES INVOLVEMENT REGISTER ABOUTUS NEWS FEEDBACK

#### Welcome to My Diabetes My Way

The NHS Scotland interactive diabetes website to help support people who have diabetes and their family and friends.

You'll find leaflets, videos, educational tools and games containing information about diabetes. You can now also use this website to view your own up-to-date diabetes clinic results, to help you manage your condition more effectively.





#### My Diabetes

Sign up to gain access to your own test results, clinic letters and your treatment plan

Login

Register



#### Information

Find information to help you understand and take control of your diabetes.

**Explore** 







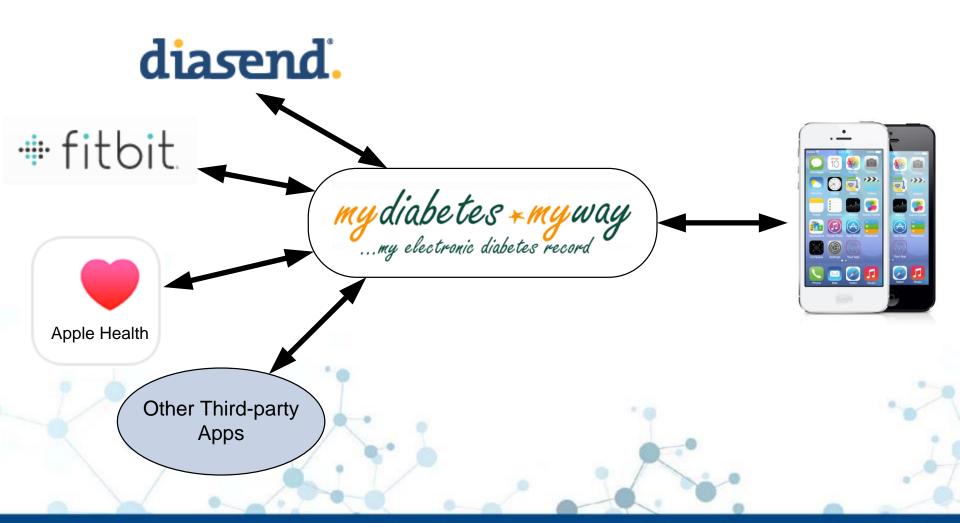


# My Diabetes My Way

- Currently ~30,000 unique email addresses
  - With consent to contact
- 1/3 of all type 1 patients registered
- Collection of home data
  - Blood glucose
  - Continuous glucose monitoring
  - Insulin pumps
  - Activity monitors (steps count, heart rate, calories)
  - Mobile app (due March 2018) / device data link



# **Device Linkage**





# Why is Research Important?

- 'If we want to improve the lives of people living with diabetes we are dependent on top quality research' (Dr Brian Kennon Lead Clinician Diabetes MCN for GGC)
- UK policy framework for health and social care research 2017:
  - 1.1. '...the UK Health Departments are committed to an environment where patients, service users and the public are given and take, the opportunity to participate in health and social care care research...'
  - Research is a core function of health and social care
  - It is essential for our well-being and for the care we receive
  - Research should improve the evidence base, reduce uncertainties and lead to improvements in care.



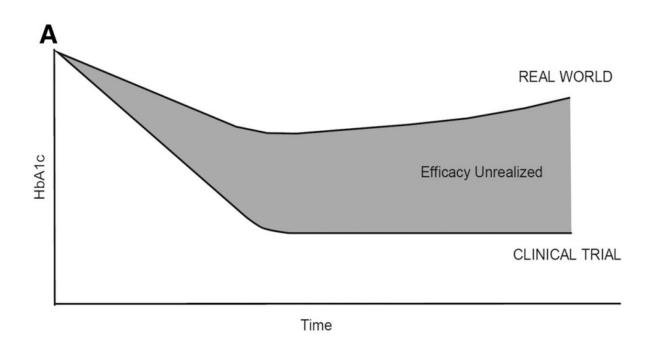
### Good for us/Good for patients too

- We all "know" the public support research
  - 97% said they want the NHS to support research
- How "involved" do people want to be?
  - 72% would like to be offered opportunities (1)
  - 9 out of 10 people would be willing to take part in research if they were diagnosed with a medical condition (2)
  - 80% would consider allowing a researcher confidential access to their medical records (1)
  - 88% would be happy to be asked to talk to researchers about their family history or give a sample of their blood (1)

<sup>1</sup>2011 psos MORI research for the Association of Medical Research Charities (AMRC)

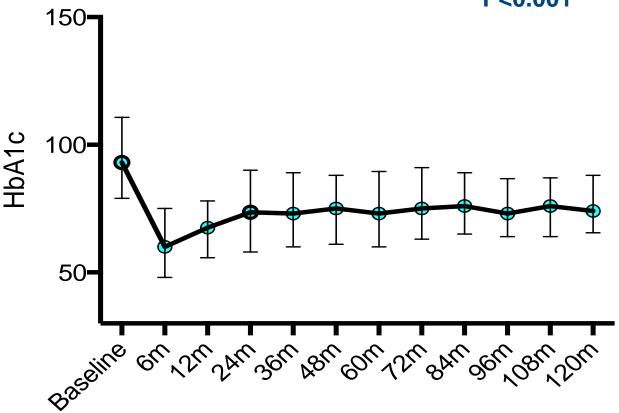
<sup>2</sup> 2014 survey commissioned by the NIHR CRN

# Real world outcomes



# HbA1c over 10 years for Type 1 diabetes diagnosed between 2000-2005 (N=103)

Correlation between HbA1c 24 vs. 120 months P<0.001\*\*



Time (months)



# Where we want to go next

- Increase the % of diabetes patients who are participating in research > 1%.
- Bring more commercial research opportunities to Scotland provides great opportunities for patients to access the latest medicines and devices.
- Support non-commercial trials to reach their objectives.
- Engage with the SDG to put together research proposals for the questions that matter most to Scotland's diabetes community.



# **Grant writing teams**

- Link to the SDG and Diabetes UK Study Groups
- Create forums for exchange of ideas, proposal development and grant writing
- Encourage cross border opportunities and collaborations
- Use the Network and SDG to drive NIHR funded trials to answer clinically relevant questions

How do we prioritise Scotland's diabetes research priorities?

Discuss



# Any questions?

