



This is a repository copy of *Research disruptions and recovery*.

White Rose Research Online URL for this paper:  
<https://eprints.whiterose.ac.uk/159619/>

Version: Accepted Version

---

**Article:**

Lee, M. [orcid.org/0000-0001-9971-1635](https://orcid.org/0000-0001-9971-1635), Brown, S. [orcid.org/0000-0002-0980-2793](https://orcid.org/0000-0002-0980-2793), Moug, S. et al. (2 more authors) (2020) Research disruptions and recovery. *Colorectal Disease*, 22 (6). pp. 643-644. ISSN 1462-8910

<https://doi.org/10.1111/codi.15069>

---

This is the peer reviewed version of the following article: Lee, M., Brown, S., Moug, S., Vimalachandran, D. and Acheson, A. (2020), Research disruptions and recovery. *Colorectal Dis*, 22: 643-644, which has been published in final form at <https://doi.org/10.1111/codi.15069>. This article may be used for non-commercial purposes in accordance with Wiley Terms and Conditions for Use of Self-Archived Versions. This article may not be enhanced, enriched or otherwise transformed into a derivative work, without express permission from Wiley or by statutory rights under applicable legislation. Copyright notices must not be removed, obscured or modified. The article must be linked to Wiley's version of record on Wiley Online Library and any embedding, framing or otherwise making available the article or pages thereof by third parties from platforms, services and websites other than Wiley Online Library must be prohibited.

**Reuse**

Items deposited in White Rose Research Online are protected by copyright, with all rights reserved unless indicated otherwise. They may be downloaded and/or printed for private study, or other acts as permitted by national copyright laws. The publisher or other rights holders may allow further reproduction and re-use of the full text version. This is indicated by the licence information on the White Rose Research Online record for the item.

**Takedown**

If you consider content in White Rose Research Online to be in breach of UK law, please notify us by emailing [eprints@whiterose.ac.uk](mailto:eprints@whiterose.ac.uk) including the URL of the record and the reason for the withdrawal request.



[eprints@whiterose.ac.uk](mailto:eprints@whiterose.ac.uk)  
<https://eprints.whiterose.ac.uk/>

## Research disruptions and recovery

Matthew Lee<sup>a,b</sup>, Steven Brown<sup>b</sup>, Susan Moug<sup>c</sup>, Dale Vimalachandran<sup>d</sup>, Austin Acheson<sup>e</sup>

- a) Department of Oncology and Metabolis, The Medical School, University of Sheffield, Sheffield, UK, S10 2RX
- b) Dept of General Surgery, Sheffield Teaching Hospitals, Sheffield, S5 7AU
- c) Dept of General Surgery, Royal Alexandra Hospital, Paisley, PA2 9PJ
- d) Dept of General Surgery, Countess of Chester Hospital, Chester CH2 1UL
- e) Dept of General Surgery, Nottingham University Hospital, Nottingham, NG7 2UH

Corresponding author:

Matthew Lee

[M.j.lee@sheffield.ac.uk](mailto:M.j.lee@sheffield.ac.uk)

@wannabehawkeye

Tel: 0114 2434343

FU32, The Medical School, University of Sheffield, Beech Hill Road, Sheffield, S10 2RX

Word count: 366

Sir

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 <https://www.nihr.ac.uk/news/dhsc-issues-guidance-on-the-impact-on-covid-19-on-research-funded-or-supported-by-nihr/24469>, [last accessed 23/03/2020]