Clinical trials grow in complexity

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In the several years that I have been contributing this column to *Middle East Health* magazine I have touched upon a large variety of subjects. Often as not, the triggers for these subjects have come from my daily professional life here at Durbin PLC. I was a little surprised therefore when a customer from the UAE pointed out to me recently that he could not recall my having written on the subject of Clinical Trials yet. A quick check through the archives proved that he was right, and so it's something I'm happy to address now! The supply of comparators and co-drugs for clinical trials has been a successful focus area for Durbin in recent years, and, as trials progressively go global, I'm also aware that this is an area of growing importance in the Middle East as well.

When I began my career as a pharmacist some 30-odd years ago, globalised clinical trials were still a fairly rare thing. Trials then were also very different to the modern double-blind active comparator group multi-centre/country, multi-ethnic group clinical trials that we often see today. Nowadays, companies like my own are asked to supply not only comparators and placebos, but also 'standard of care medicines' and emergency medications to be used alongside clinical trials. At Durbin we've also had requests to supply ancillaries – everything from needles to thermometers, infusion pumps and even fridge freezers!

It is no surprise therefore that with trials becoming more and more complex they have also become a lot more expensive to run. According to a new benchmarking report*, the cost per patient of running Phase III clinical studies of new pharmaceuticals exceeds US$26,000. And by some estimates, the cost of a study represents up to 60% of the total drug development cost. Complexity of the trials has been further compounded by the types of new chemical entities being researched, such as biologics, cytoxics and temperature-sensitive products. In many ways a whole new breed of healthcare professional has been born. These professionals are responsible for the supply, maintenance and successful implementation of the trial protocol. I know that an increasing number of these professionals are located within the Middle East and this is not unexpected when you consider that many global trials now have cohorts and centres located in the region.

Global trials are not just the preserve of secretive laboratories or tertiary research centres, as these days many are conducted within local hospital or healthcare facilities. Most healthcare professionals will therefore be involved, to a greater and larger extent, in the conduct of a clinical trial at some stage of their career. This is a duty and responsibility that we should feel very proud of, because together, we are making a real contribution to improving the health of our patients.

Durbin will be attending the Arab Health Show again this year, and my team and I will be happy to welcome you to our stand to discuss not only your clinical trials supply requirements, but of course any medical supply requirements that you have. We aim to be your *complete* medical resource!

* 'Clinical Operations: Accelerating Trials, Allocating Resources and Measuring Performance', *www.clinicaltrialbenchmarking.com*

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Durbin PLC is a British company based in South Harrow, London. Established in 1963, the company specialises in supplying quality assured pharmaceuticals, medical equipment and consumable supplies to healthcare professionals and aid agencies in over 180 countries. As well as reacting rapidly to emergency situations, Durbin PLC responds to healthcare supply needs from local project level to national scale programmes.
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