

Less than 1 percent of UK public research funding spent on antibiotic research in past 5 years

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Less than 1% of research funding awarded by public and charitable bodies to UK researchers in 2008 was awarded for research on antibiotics, according to new research published in *The Lancet Infectious Diseases*.

The study, which is the first detailed assessment of public and charitable funding to UK researchers focusing on bacteriology and antibiotic research, suggests that present levels of funding for antibiotic research in the UK are inadequate, and will need to be urgently increased if the growing crisis of antibiotic resistance is to be tackled effectively by UK researchers.

According to lead author Professor Laura Piddock, of the University of Birmingham, UK, "The message that antibacterial (ie, antibiotic) drug resistance has become a world health crisis has been brought to global attention by WHO, the European Union (EU), the World Economic Forum, and, most recently, the UK Chief Medical Officer. As a world leader in biomedical research, UK research has an important part to play in tackling this crisis. However, our study clearly shows that the proportion of public and charitable funding for research into new antibiotics, understanding resistance mechanisms and ways of tackling resistance are inadequate for the size of the task."

Professor Piddock and her colleague analysed funding databases for the

UK's main research funding organisations, finding that of £13,8 billion total available research funding, £269 million (1,9%) was awarded to bacteriology projects, and around a third of this (£95 million or 0,7% of total funding) was awarded for research on antibiotics. Additionally, £181 million in EU funding was awarded to antibiotic research consortia including researchers based within the UK, including two EU Innovative Medicines Initiative awards, totalling £85 million.

While this article focused exclusively on research funding for antibiotics, previous studies have shown that funding for other antimicrobials (antifungals and antivirals) is similarly low as a proportion of total funding.

As well as demonstrating that the proportion of research funding given for UK antibiotic research will need to increase, the authors suggest that publically available, subject-specific, funding databases will allow investment in priority areas to be tracked in future.

"Since 2011, most new EU [funding](#) has focused on public–private partnerships with industry", adds Professor Piddock. "However, an increased understanding about antibiotic resistance is needed, not least to inform strategies to both minimise and prevent antibiotic-resistant bacteria arising when new treatments become available."

In a linked Comment, Dr Michael G Head from the Farr Institute, University College London, UK, said "The private sector needs to be more transparent about how much they invest in areas related to antibiotics (generation of new therapeutics being an obvious and particularly important area), so that their data can be similarly analysed in detail. Efforts to document the investments of other countries regarding antibiotic resistance research would be beneficial and would allow funders and policymakers to chart the optimum future direction of research money. Metrics to establish the true burden of [antibiotic](#)

resistance and methods also to assess the likely effect of other types of research are needed; for example, preventive research such as vaccine development will affect future burdens of bacterial infections and resistance."

Provided by Lancet

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