

Reforming clinical research to reduce waste

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Most clinical research is not useful to clinicians. This could change.

Many billions of dollars are spent on clinical research every year, yet much of the knowledge produced is not useful for guiding clinical decision making. Because many of the features that make clinical research reliable as a basis for [clinical practice](#) can be identified, more useful clinical research could easily be produced at the same or even at massively reduced cost, according to John Ioannidis from Stanford University, US, in an Essay published in *PLOS Medicine*.

Waste across [medical research](#) (clinical or other types) has been estimated as consuming 85% of the total cost. In his article Professor Ioannidis outlines the features that make clinical research useful, which include those relating to problem base, context placement, information gain, pragmatism, patient centeredness, value for money, feasibility, and transparency. He argues that reforming clinical research to take these features more directly into account would increase its usefulness to those providing care.

He concludes, "[o]verall, not only are most research findings false, but, furthermore, most of the true findings are not useful. Medical interventions should and can result in huge human benefit. It makes no sense to perform [clinical research](#) without ensuring clinical utility. Reform and improvement are overdue."

More information: Ioannidis JPA (2016) Why Most Clinical Research Is Not Useful. *PLoS Med* 13(6): e1002049. [DOI:](#)

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