

Research on emerging infectious diseases: pros and cons of centralised government controls

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As the world grapples with the constant threat of new pathogens, the role of government oversight in research and response efforts has become a topic of considerable debate in the academic community. In the recently released "SOP [standard operating procedure] for Nipah virus research in Kerala for studies involving human participants / human samples" by the Government of Kerala, the SOP, apart from administrative permission, requires the proposal to be cleared by the Institutional Research Committee at a Government Medical College, and the inclusion of an investigator from a government institution [1]. In these challenging times, it is crucial to weigh the pros and cons of stringent administrative controls to ensure an effective and ethical approach to tackling emerging infectious diseases.

Advantages

Coordination and collaboration

A centralised approach to studying infectious diseases enables better coordination and collaboration between various research institutions, healthcare organisations, and governmental agencies [2]. It can ensure that efforts are streamlined and resources allocated efficiently to address the immediate and long-term challenges posed by emerging diseases.

Rapid response

Centralised administrative control allows governments to respond swiftly to outbreaks by implementing measures such as quarantine, travel restrictions, and vaccination campaigns [3], minimising the negative impact on public health.

Resource allocation

Centralised control can facilitate the efficient allocation of resources, both financial and human, to the areas of greatest need, thereby accelerating the development of diagnostics, treatments, and preventive measures. Such targeted allocation enhances the overall cost effectiveness of research and response efforts.

Standardisation of protocols

Standardised protocols and guidelines set by governmental bodies can help maintain consistency in research

methodology, data collection, and reporting. This ensures that the findings are reliable, comparable, and can be effectively used to inform public health policy.

Ethical oversight

Governmental administrative control can include robust ethical oversight mechanisms to monitor research activities, ensuring the responsible and ethical conduct of studies [4]. This helps protect the rights and well-being of research participants and ensures the credibility of the research outcomes.

Disadvantages

Potential for bureaucratic delays

A centralised administrative structure may introduce bureaucratic delays in the approval and execution of research projects. This delay could be critical in the early stages of an emerging infectious disease outbreak and also lead to inflated research costs [4].

Limited innovation and flexibility

Stringent control can stifle innovation and hinder the flexibility required by researchers to respond to rapidly evolving situations. Scientific research thrives on creativity and the ability to adapt quickly to new information, which could be impeded by overly rigid administrative frameworks.

Risk of misuse of power

Concentrating administrative control in the hands of government raises concerns about the potential misuse of power. Governments may be tempted to manipulate information, restrict academic freedom, or prioritise political considerations over scientific evidence, compromising the integrity of the research process.

Inhibiting international collaboration

Excessive administrative control may discourage international collaboration, thereby hindering sharing of data, resources, and expertise [5]. Given the global nature of infectious diseases, international cooperation is crucial for understanding and dealing with their prevention and control.

Public mistrust

Administrative overreach can lead to public mistrust, as citizens may perceive government intervention as an infringement of individual freedoms. Building and maintaining public trust to ensure cooperation and



compliance is vital for successful public health interventions.

In conclusion, the debate over mandatory administrative control in studying emerging infectious diseases is a nuanced one. While there are clear advantages in terms of coordination, rapid response, and resource allocation, it is equally important to address potential drawbacks, including bureaucratic delays and overreach, and limited innovation. Striking the right balance requires careful consideration of the specific contexts, an emphasis on transparency, accountability, and collaboration between government and the scientific community.

As we confront the challenges posed by emerging infectious diseases, it is imperative to foster an environment that encourages scientific innovation, upholds ethical standards, and maintains the trust of the public.

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References

- Health & Family Welfare Department, Govt of Kerala. SOP for Nipah Related Studies in Kerala for Studies involving Human Participants / Human Samples. Thiruvananthapuram; H&FWD; 2023 Dec 4[Cited 2024 Jan 30]. Available from: https://document.kerala.gov.in/ documents/governmentorders/govtorder0612202311:08:31.pdf
- Ridley RG. Research on infectious diseases requires better coordination. Nat Med 2004;10:S137–40. https://doi.org/10.1038/ nm1153
- Mwaungulu GS, Dwyer KS. Responding to Public Health Emergencies at the Local Level: Administrative Preparedness Challenges, Strategies, and Resources. J Law Med Ethics 2019;47:72– 5. https://doi.org/10.1177/1073110519857322
- Snooks H, Hutchings H, Seagrove A, Stewart-Brown S, Williams J, Russell I. Bureaucracy stifles medical research in Britain: a tale of three trials. BMC Medical Research Methodology 2012;12:122. https://doi.org/10.1186/1471-2288-12-122.
- 5. Yao B. International Research Collaboration: Challenges and Opportunities. *Journal of Diagnostic Medical Sonography* 2021;37:107–8. https://doi.org/10.1177/8756479320976130

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