



# Powerful Partnerships

How industry-sponsored research supports dietetic practice



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## Making research real for dietitians

When people think of research, they often imagine the walls of academia or the labs of pharmaceutical giants. But for many NHS dietitians, research can start much closer to home; in clinics, community settings and even patient living rooms. Increasingly, one of the most accessible pathways into research for dietitians is through industry-sponsored projects.

Having worked closely with the NHS and dietitians on a number of these studies over the past 10 years, I've seen the immense potential that can be unlocked when healthcare professionals and industry collaborate. To bring this to life, I sat down with Lisa Green, a practising NHS dietitian, who has served as a Principal Investigator (PI) for multiple industry-sponsored research studies. Through our conversation, we explored how industry-supported research provides more than just funding but enhances clinical practice and professional growth, bringing tangible benefits to NHS Trusts and, most importantly, to enhancing patient care. For ease of following the conversation, Lisa's comments are in *italics*.

## What does the journey of a new nutrition product look like?

Before we explore the benefits, let's demystify what actually happens when a new Food for Special Medical Purposes (FSMP) is developed, be this for paediatrics, adults or a disease-specific products, they all go through the same journey.

From concept to clinical use, it's a long road from lab to community:

- 1. R&D:** Companies first invest in designing the product formulation and composition, based on clinical need, scientific rationale and importantly in accordance to Delegated Regulation No 2016/128 (composition, labelling and notification requirements).<sup>1</sup> It can take several years before a final recipe is agreed on and ready for patient testing.
- 2. Clinical trials:** The industry sponsor develops a research protocol (and supporting documentation) and submits it for NHS ethical approval. Once approved by the Health Research Authority, each participating NHS Trust must then secure local R&D approval. Once secured, patient recruitment can begin. As a requirement of NHS ethics, clinical trials must be performed in line with Good Clinical Practice. The sponsoring company will usually provide site training to support proper trial conduct. Again, this is lengthy, typically taking 3-5 months to secure NHS ethics approval and then 1-6 months to secure local R&D approval (though this differs widely between NHS Trusts).
- 3. Contracts:** To support clinical trial governance, contracts are set up with NHS Trusts outlining recruitment targets, timelines and accompanying reimbursement fees for both R&D (set up, management and close down) and dietetic departments (per-patient recruitment, monitoring, adverse event reporting), ensuring transparency and alignment.
- 4. Data collection & analysis:** Supporting dietetic teams are responsible for patient recruitment and therefore data collection. Depending on the trial design, patient group and application type,<sup>2</sup> time to complete patient recruitment varies. Once completed, anonymised data is analysed by the sponsor, compiled into a dossier, and reported to the Advisory Committee on Borderline Substances (ACBS) for Drug Tariff consideration.
- 5. Dissemination:** To build awareness, the data is often shared via posters, conference presentations, and peer-reviewed publications, listing NHS collaborators as co-authors.

Lisa remembered being surprised at how complex, but collaborative, the process was. *"You don't realise how much goes on before a product even reaches a trial, and locally, I didn't even know our R&D team existed until we were approached,"* she told me. *"Now I can't believe how much they do behind the scenes to support us."*

## Getting started

Many dietitians express a desire to get involved in research but lack a clear pathway. Industry-sponsored studies can offer a supportive and structured first step into the world of research. Lisa's first experience was with a small, community-based project. She and her team were initially cautious.

*"It felt like a safe and supportive introduction to research,"* she said. *"We worked closely with the sponsor and our Trust's R&D. I always wanted to get involved in research, and this was the perfect entry point."*

But the structure and support helped to build confidence.

*"We had training, clear protocols and people we could go to with questions. That made all the difference"*

## Supporting personal and professional growth

Beyond the immediate clinical skills, taking part in research offered something more: personal and professional growth.

Lisa has served as PI for more than one study, a role that, at first, felt daunting.

*"Being a PI for more than one project meant being organised, meeting deadlines and communicating clearly. I developed critical appraisal skills and a much deeper understanding of research methodology,"* she said.

That experience didn't just stay on paper. It changed how her team approached and delivered care.

*"We're now more confident that the care we provide is evidence-based and genuinely improves outcomes,"* Lisa shared. *"We're quicker to assess new studies and adapt our practice accordingly."*

Taking part in research became a catalyst for curiosity and clinical confidence.

## Departmental benefits

Industry-sponsored research also brought tangible benefits to Lisa's service.

*"The per-patient reimbursement allowed us to buy equipment, wheelchair and hoist scales, things that make a huge difference in access to care,"* she said.

Even seemingly small improvements made a big impact.

*"We could finally print patient leaflets in colour. It might sound trivial, but it really boosted how professional our resources looked and how patients engaged with them."*

In many cases, the funding also covered training, resource development and attendance at conferences, opportunities that can be out of reach for under-resourced teams.

*"For a small community service like ours, this kind of support wouldn't have been possible otherwise."*

## Raising dietetic profiles

Then came the unexpected ripple effects: visibility, credibility and recognition.

*"Our Chief Executive knows who I am now,"* Lisa laughed. *"We've had posters displayed at internal events, and I've presented at both local and regional meetings. Research raised our profile, no question."*

And it wasn't just internal. External sponsors also took notice.

*"One company gave us an award for being the first site to recruit. They were so impressed with our data quality and organisation."*

That reputation led to further invitations for future studies. The momentum was real, everyone was recognised, and seeing your name in print or on a Conference poster can be an empowering moment.

*"Every single person on the team was listed as an author on our publications. It was so rewarding, and it made us all feel part of something bigger,"* Lisa said. *"We've had our work published and presented at national and international conferences like ESPEN. That visibility is incredible, not just for me, but for our team and Trust."*

## Putting patients first

At the centre of all this, more than training, funding, or recognition, was patient care.

*"In one study, patients were given access to a completely new product that significantly improved their quality of life,"* Lisa shared. *"They described it as 'life-changing'. That kind of feedback is why we keep saying yes."*

For some patients, the experience of being in a study went beyond the product itself.

*"Long-term enteral nutrition patients often feel overlooked. But in these trials, they were listened to, their feedback was included, and they felt they were contributing to something important."*

There were, of course, some challenges, especially when new products didn't immediately make it to market, be this due to manufacturing difficulties or challenges with reimbursement applications.

*"Many dietitians express a desire to get involved in research but lack a clear pathway. Industry-sponsored studies can offer a supportive and structured first step into the world of research."*

*"It's tough when a patient sees real benefit during the trial but then has to go back to their old regimen. But we always explain the process clearly from the start."*

That clarity built trust with patients, colleagues and sponsors alike.

### Collaborating through concern

Scepticism about industry involvement is common. Lisa felt it too.

*"I think I was sceptical at the start, until I actually took part in a study," she said. "You've got to think about the end goal. If this product could benefit future patients, why wouldn't you help make that happen?"*

Initial concerns often stemmed from unfamiliarity with the language and logistics.

*"We didn't understand all the research jargon at first. But the sponsor took time to explain everything. They were respectful of our NHS processes, prescribing routes and how we work with GPs." There was room for flexibility, too.*

*"We even adapted some of the paperwork to make it more accessible for patients. The sponsor welcomed it."*

In Lisa's words: *"This wasn't about pushing products. It was about improving care."*

This openness laid the foundation for mutual respect and efficiency. Furthermore, this pragmatism underpins a commitment to transparency and patient voice.

### A call to action for dietitians

When asked if Lisa would recommend other dietitians to participate in industry-sponsored research, her answer was unequivocal.

*"Absolutely. The financial incentives help services, but the professional recognition and opportunity to improve care are equally important. Dietetics is a small profession, this helps raise our profile across the NHS."*

References: 1. Assimilated Commission Delegated Regulation (EU) 2016/128 supplementing Regulation (EU) No. 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for foods for special medical purposes Accessed online: [www.legislation.gov.uk/eur/2016/128/contents](http://www.legislation.gov.uk/eur/2016/128/contents) (May 2025). 2. Jackson M (2025). The Importance of Medical Foods, a Robust Reimbursement System & Strict Regulations. CN.; 25(1): 74-76. Available at <https://uploads.bsna.co.uk/production/publications/file/BSNA-Medical-Foods.pdf?dm=1747925741>

Her advice? *"Get your whole team involved from the start. Share the administrative load. Work with your R&D team, they can help with metric tracking, training and sponsor liaison."*

For Trusts hesitant to engage, now is the time to revisit the value of partnership. Dietitians, this is your invitation to shape the future of care, not just deliver it.

### Improving the path forward

Looking ahead, Lisa sees ways to make the pathway smoother for others.

*"We need better visibility of what R&D teams can offer. Smaller teams might feel too daunted to say yes unless they know help is available."*

She also highlighted the need for practical support.

*"Sharing best practices across Trusts and regions, like we've done in West Yorkshire, can really open doors."*

Collaboration doesn't just mean between the NHS and industry. It also means between NHS teams themselves.

### So, should dietitians get involved in research?

Industry research requires an investment of time and commitment but the benefits, for patients, professionals and services, are real and lasting.

With the right structures in place and open collaboration, these partnerships can ignite a passion for research, raise the profile of dietetic services, and bring new, life-changing products to those who need them most.

For any dietitian wondering whether it's worth getting involved, the answer seems clear: *"Do it. You'll grow, your team will grow and, most importantly, your patients will benefit."*

## About the British Specialist Nutrition Association

BSNA is the trade association representing manufacturers of products designed to meet the particular nutritional needs of individuals; including specialist products for infants and young children (including infant formula, follow-on formula, young child formula and complementary foods), medical nutrition products for diseases, disorders and medical conditions, including oral nutritional supplements, enteral tube feeding and parenteral nutrition, as well as companies who aseptically compound chemotherapy, parenteral nutrition and CIVAS.

