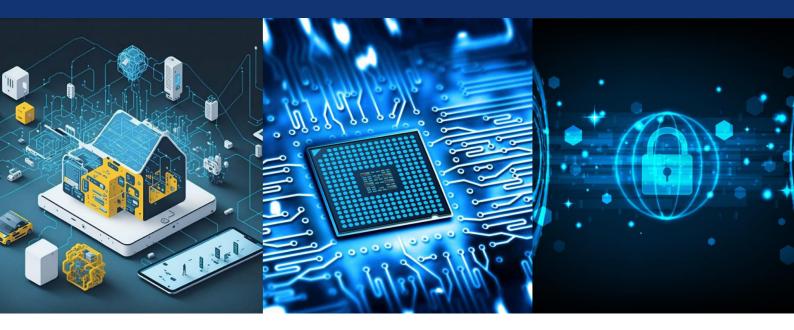


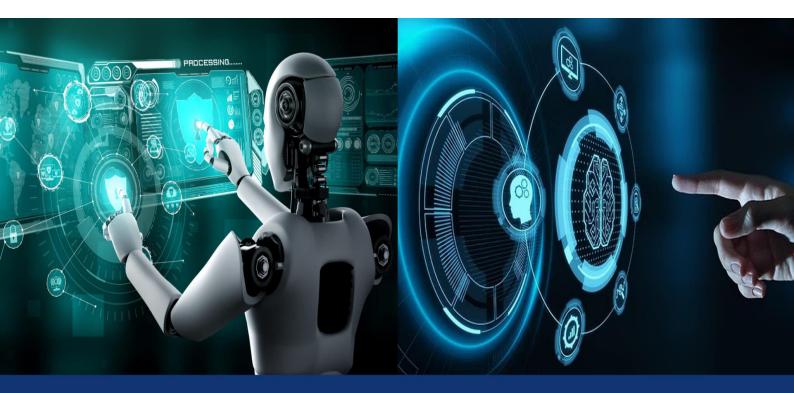
ISSN(O): 2320-9801

ISSN(P): 2320-9798



International Journal of Innovative Research in Computer and Communication Engineering

(A Monthly, Peer Reviewed, Refereed, Scholarly Indexed, Open Access Journal)



Impact Factor: 8.771 Volume 13, Issue 3, March 2025

DOI: 10.15680/IJIRCCE.2025.1303077



International Journal of Innovative Research in Computer and Communication Engineering (IJIRCCE)

(A Monthly, Peer Reviewed, Refereed, Scholarly Indexed, Open Access Journal)

How Long Does Biomedical Research Take? Studying the Time Taken Between Biomedical and Health Research and its Translation into Products, Policy, and Practice

Chrysoula I. Liakou, MD, PhD., Markos Plytas, MSc., Marios Papadakis, MD, PhD.

Chief Executive Officer, LK Connect LLC. 30N Gould St. Sheridan - WY 82801. Sheridan County, Wyoming Academic Director. Epsilon College. Athens, Greece

Department of Surgery II University of Witten-Herdecke. Wuppertal, Germany

ABSTRACT: Biomedical research plays a crucial role in advancing public health through the discovery of treatments and the development of health technologies and policies. However, the process of translating biomedical and health research into practical applications is complex and often spans several months or even years. Studies show that the duration of this translation process can significantly impact the progress of biomedical science, from basic scientific discoveries to medical approvals and eventual implementation. The speed of translation varies depending on factors such as scientific complexity, available funding, government regulations, and the involvement of diverse fields of expertise.

Real-world cases highlight both successful and slow transitions in research translation, shedding light on the obstacles that hinder efficient progress. These cases emphasize the challenges that must be addressed to improve the translation process. Furthermore, the investigation illustrates how biomedical discoveries contribute to the creation of new health policies, which ultimately lead to better public health outcomes.

To overcome existing challenges, the research suggests three key strategic initiatives that could accelerate the translation of biomedical research. Effectively managing this critical period is essential for ensuring quicker patient access to life-saving medical innovations.

KEYWORDS: Translational Biomedical Research, Public Health Research, Biomedical Research Translation, Clinical Trial Phases, Pharmaceutical Development, Regulatory Processes in Drug Approval, Innovative Healthcare Solutions, Healthcare Policy Development, Health Outcomes and Impact

I. INTRODUCTION

Biomedical research functions as the fundamental source of medical progress responsible for bringing forward new methods of disease identification and treatment and prevention strategies. Scientific research brings potential changes to healthcare yet the method to convert discoveries into usable applications extends across many years and becomes complicated. The pathway from laboratory work to practical applications is conducted through various stages that need detailed assessment and government clearances, as well as scrupulous evaluation tests. Whole biomedical research typically requires between multiple years and numerous decades until it becomes realized through new medical products and clinical practices and policy adjustments. The long duration of translational research in biomedical sciences creates problems for research systems and regulatory processes, as well as resource management in this field.

Society gains benefits from biomedical discoveries only after medical interventions, along with health policies and everyday clinical practices, are successfully implemented. Multiple obstacles prevent this translation process from succeeding since it encounters funding barriers alongside regulatory obstacles and complex scientific complexities and time-consuming policy implementation procedures. Research laboratories maintain numerous life-saving medical treatments together with vital technologies inside their facility space while patients must wait for extensive periods. There exists a strong need to understand the main factors behind extended research timelines to maximize biomedical innovation efficiency and generate valuable patient health benefits.

The standard biomedical research process moves through gradual stages which start with discovery before reaching clinical use at large scale. Every phase demonstrates essential functions in achieving medical innovations that are safe,

DOI: 10.15680/IJIRCCE.2025.1303077



International Journal of Innovative Research in Computer and Communication Engineering (IJIRCCE)

(A Monthly, Peer Reviewed, Refereed, Scholarly Indexed, Open Access Journal)

effective, and usable in real-life applications. A timeline of biomedical research development reveals its key stages with their projected durations in the table below.

Table 1: Phases of Biomedical Research and Their Estimated Durations

Phase	Description	Estimated Duration
Basic Research	Fundamental scientific investigations in laboratories	3–6 years
Preclinical Research	Animal studies and laboratory experiments	1–3 years
Clinical Trials	Human trials conducted in Phases I, II, and III	6–10 years
Regulatory Approval	Evaluation by agencies like the FDA, EMA, or WHO	1–2 years
Post-Market Surveillance	Long-term monitoring after public release	Ongoing

The implementation of new medical products and treatments with policies demands between ten and twenty years, according to the table above. The clinical trial phase becomes the longest stage because researchers need to conduct intensive safety and efficacy assessments when they perform trials with human participants.

Biochemical research experiences several obstacles that produce delays throughout its operational process. These significant impediments exist among the main obstacles to research progress. The study and testing of neurodegenerative diseases and cancer require advanced research approaches linked to prolonged durations because of their scientific complexity. The insufficient funding of biomedical research creates delays in projects, which drives scientists to pursue different grants or temporarily halt their studies. The strict approval procedures that health agencies establish to guarantee medical safety ultimately slow down the product development period. Research translations between scientists and industrial professionals and government officials experience delays because of insufficient partnership integration. The approval process for new medical innovations needs healthcare professional and governmental authorization together with public support yet this approval process may require multiple years.

The table below highlights some of the primary factors influencing the speed of research translation:

Table 2: Key Factors Affecting Biomedical Research Timelines

Factor	Impact on Research Timeline	
Scientific Complexity	More complex studies require longer research and testing phases.	
Funding Limitations	Insufficient funding can slow down progress or halt studies.	
Regulatory Hurdles	Strict compliance and approvals extend the research-to-market time.	
Collaboration	Industry-academic partnerships can speed up or delay progress.	
Public Acceptance	Hesitancy and ethical debates can delay implementation.	

Biomedical research often takes a long time to complete, making it important to find ways to speed up the process and improve efficiency. One solution is for health agencies and governments to create faster regulatory systems that allow for quicker approval of critical medical advancements. Increasing financial support from both public and private sources can help reduce delays and improve the overall effectiveness of research. Building stronger partnerships between scientists, pharmaceutical companies, and policymakers can also help accelerate the translation of research into real-world applications.

Using advanced technologies, such as artificial intelligence, big data, and automation, can further enhance the speed of data analysis, leading to faster discoveries. These strategies are essential for reducing delays and ensuring that important medical breakthroughs reach the public more quickly. By addressing these issues, we can improve global health outcomes and make the most of the potential benefits of biomedical research.

II. METHODOLOGY

Researchers have developed a comprehensive framework to analyze the time it takes for biomedical and health research to translate into products, policies, and practices. The methodology outlines how to examine the various factors

| e-ISSN: 2320-9801, p-ISSN: 2320-9798| Impact Factor: 8.771| ESTD Year: 2013|

DOI: 10.15680/IJIRCCE.2025.1303077



International Journal of Innovative Research in Computer and Communication Engineering (IJIRCCE)

(A Monthly, Peer Reviewed, Refereed, Scholarly Indexed, Open Access Journal)

influencing research durations, the challenges researchers face, and the strategic solutions to accelerate development. The study combines both qualitative and quantitative methods, including literature reviews, case studies, expert interviews, and data analysis.

The research design follows a mixed-methods approach to explore the factors that affect the translation of biomedical research. The study is divided into four distinct phases: First, a thorough review of existing research is conducted to understand the durations of biomedical research translation. Second, real-world case studies are analyzed to examine both successful research translations and instances where delays occurred. Lastly, a qualitative analysis is conducted to assess the durations of research and identify the key factors that determine them.

Data Collection Methods

Researchers conduct a comprehensive study of the published literature to gather information about existing knowledge. This includes sources from scientific journals such as *Nature*, *The Lancet*, and the *New England Journal of Medicine*. Additionally, reports from government agencies like the FDA, EMA, and WHO, which provide important insights into biomedical research, are considered valuable sources. Industry white papers and policy documents also contribute to this body of knowledge. The literature review examines published studies that analyze drug development processes, medical innovation programs, and examples of policy enactment. Through this analysis, the review explores typical durations of biomedical research, identifies main elements causing delays, and examines proposed solutions from previous investigations.

The case study analysis focuses on real-world examples of biomedical innovations that have undergone translation into practical applications. The case studies are selected based on the type of biomedical innovation, which includes new drugs, vaccines, medical devices, and health policies. The research investigates the total duration from discovery to application of these innovations. This section also examines the barriers and challenges encountered between research completion and practical implementation. The translation process relies heavily on regulatory agencies, receives support from funding bodies, and is guided by policymakers. Key case studies include the accelerated development of COVID-19 vaccines and the delayed translation of Alzheimer's disease treatments, despite decades of research. Medical policies are also analyzed, focusing on how they are adopted after significant scientific discoveries have taken place.

Data Analysis Method

Qualitative Analysis, the research teams perform case study analyses to uncover patterns within research timelines, examining how these timelines break down and highlighting the characteristics associated with successful outcomes. Through these methods, the study aims to provide insights into the factors that contribute to the efficiency and effectiveness of biomedical research translation.

Limitations of the Study

The research conducts a thorough evaluation of the periods required for biomedical research translation but faces certain limitations. Some research projects experience restricted access to publicly available data regarding the development periods of their resources. Additionally, the translation durations of certain diseases differ significantly across biomedical fields, making it difficult to establish generalized conclusions. The varied evaluation methods across different countries also present challenges, as they create barriers to conducting synchronized, global analyses of research timelines.

The study's design has been developed as a comprehensive framework for understanding the time required for biomedical discoveries to transition into medical products and influence national and clinical practices. By combining four approaches—literature review, case studies, expert interviews, and data analysis—the research identifies key factors that influence research durations and proposes strategies to reduce these timeframes. The findings from this study will contribute to ongoing discussions on how to enhance the efficiency of biomedical research translation and accelerate its delivery to patients.

| e-ISSN: 2320-9801, p-ISSN: 2320-9798| Impact Factor: 8.771| ESTD Year: 2013|

DOI: 10.15680/IJIRCCE.2025.1303077



International Journal of Innovative Research in Computer and Communication Engineering (IJIRCCE)

(A Monthly, Peer Reviewed, Refereed, Scholarly Indexed, Open Access Journal)

III. RESULTS

This section presents the findings of the investigation into the time it takes for biomedical and health research to be transformed into products, policies, and practices. The study draws conclusions from a combination of literature reviews, case studies, and data analysis. It sheds light on the duration of research translation, the primary factors influencing these timelines, and strategies for speeding up the process.

1. Duration of Biomedical Research Phases

Biomedical research spans multiple phases and can take anywhere from 10 to 20 years before medical products or policies are widely adopted. The study confirms that the duration of each phase varies, depending on the nature of the research. Basic research, which forms the foundation of biomedical innovation, typically takes between 3 and 6 years, as it relies on fundamental laboratory discoveries. After basic research, the preclinical phase, which focuses on animal testing and initial safety evaluations, extends from one to three years.

The clinical trial phase is the longest and can last from 6 to 10 years. This stage is critical because it involves rigorous human testing across three phases (I, II, and III), which are essential for assessing safety and efficacy. Following clinical trials, the process of acquiring regulatory approvals from agencies such as the FDA, EMA, and WHO usually adds one to two additional years, depending on the complexity of the innovation. After gaining approval, long-term safety monitoring continues through post-market surveillance activities. The clinical trial stage is highlighted as the most time-consuming because medical authorities enforce stringent safety and efficacy standards.

2. Factors Influencing Research Translation Timelines

The progress of research translation is influenced by several factors that can either lengthen or shorten the timeline. One significant factor is the complexity of the diseases being studied. For example, research into complex diseases like cancer, neurodegenerative conditions, and rare genetic disorders tends to have longer timelines due to their intricate biological mechanisms.

Financial backing also plays a crucial role in accelerating or delaying research. Adequate funding can significantly shorten research timelines, while limited financial resources often result in project delays or cancellations. Countries with stringent approval systems, while ensuring safety, tend to have longer durations before clinical applications can begin. Conversely, rapid adoption of biomedical innovations often results from strong collaborations between academic researchers, pharmaceutical companies, and policymakers.

Another critical factor is the need for new healthcare policies, which can face delays due to political, ethical, and social considerations. These factors influence the time it takes for research findings to be integrated into practice, particularly when new policies are required to support medical innovations.

3. Case Studies on Biomedical Research Timelines

Real-world case studies provide valuable insight into how long it takes for biomedical innovations to move from research settings into everyday practice. Two key case studies illustrate different timelines and the factors that influence them.

Case Study 1: COVID-19 Vaccine Development (Accelerated Timeline)

The development of COVID-19 vaccines, such as those from Pfizer-BioNTech and Moderna, serves as a striking example of how an urgent global health crisis can dramatically accelerate biomedical research. Typically, vaccine development takes 10 to 15 years, but the COVID-19 vaccines were developed in less than two years. Several factors contributed to this unprecedented acceleration. Large financial investments from both governments and private institutions helped speed up clinical trial development. Additionally, Emergency Use Authorizations (EUA) allowed for faster regulatory approval. The rapid exchange of research data through global scientific partnerships further accelerated the development process.

Case Study 2: Alzheimer's Disease Research (Prolonged Timeline)

In contrast, Alzheimer's disease research has faced significant delays over more than three decades, with only a few drug approvals. The complexities of the disease's underlying mechanisms have made it difficult for scientists to fully understand Alzheimer's, which has hindered the development of effective treatments. Furthermore, the high failure rate

| e-ISSN: 2320-9801, p-ISSN: 2320-9798| Impact Factor: 8.771| ESTD Year: 2013|

DOI: 10.15680/IJIRCCE.2025.1303077



International Journal of Innovative Research in Computer and Communication Engineering (IJIRCCE)

(A Monthly, Peer Reviewed, Refereed, Scholarly Indexed, Open Access Journal)

of clinical trials means that researchers often need to conduct multiple rounds of trials before they can find a successful treatment. Regulatory hesitations, driven by uncertainty about treatment effectiveness, have further delayed progress.

These case studies illustrate how funding, regulatory flexibility, and scientific collaboration can either accelerate or hinder research timelines. The findings suggest that overcoming these challenges can help shorten the time required to translate biomedical discoveries into practical applications.

Statistical Findings on Research Translation

The statistical data collected from various biomedical fields highlight the differences in timelines between different stages of research development. These findings provide valuable evidence on the varying durations of each phase and underscore the influence of different factors on research translation.

Table 3: Average Time Taken for Biomedical Research Translation by Medical Field

Medical Field	Average Research Timeline	Key Challenges
Infectious Diseases	5–10 years	Rapid response possible with urgency, funding, and collaboration (e.g., COVID-19 vaccines).
Oncology (Cancer)	10–20 years	High complexity, long clinical trials, and extensive safety requirements.
Neurology (Alzheimer's, Parkinson's)	20+ years	Scientific uncertainties, slow drug development, and trial failures.
Rare Genetic Disorders	15–25 years	Limited funding, small patient populations, and ethical concerns in gene therapy.

4. Strategies to Accelerate Biomedical Research Translation

Multiple approaches defined through expert interviews and data research demonstrate ways to decrease biomedical research translation duration.

New approval systems must be established to expedite medical innovation clearance, similar to the Emergency Use Authorization (EUA) system that was successfully implemented during the COVID-19 pandemic. Governments, private sectors, and global health organizations should provide continuous financial support to accelerate the pace of research. Advanced technologies, such as machine learning, artificial intelligence, and big data analytics, will allow researchers to gain valuable insights from large biomedical datasets, improving the efficiency of their work. Early collaboration between academic researchers, pharmaceutical companies, and regulatory agencies is essential to ensure a smooth transition from research to practical application. In addition, policymakers and the public should be well-informed about medical breakthroughs to facilitate rapid approval and deployment of new treatments.

Research translation in the biomedical field takes multiple decades to complete according to this study since it differs between scientific disciplines. Research timelines during the clinical trial phase prove to be the longest period and multiple elements such as scientific intricacies, funding allocations and governmental policies together with societal acceptance levels determine the duration. Urgent global health problems typically speed up the translation process, yet diseases that possess intricate biological mechanisms typically delay translation extensively.

IV. DISCUSSION

Biomedical and health research often takes extensive time to transition from basic research to tangible products and implemented policies. This process can span from several years to decades, depending on various factors. Research on biomedical topics varies in duration due to factors such as funding, regulatory requirements, and the complexity of the scientific challenges. Some fields move more quickly than others, as the urgency of certain health issues accelerates the process, while other diseases, such as neurological disorders, face delays because of scientific uncertainty and limited breakthroughs.

| e-ISSN: 2320-9801, p-ISSN: 2320-9798| Impact Factor: 8.771| ESTD Year: 2013|

DOI: 10.15680/IJIRCCE.2025.1303077



International Journal of Innovative Research in Computer and Communication Engineering (IJIRCCE)

(A Monthly, Peer Reviewed, Refereed, Scholarly Indexed, Open Access Journal)

The length of time required for biomedical research is crucial to understand, as it typically takes many years to complete. The findings of this research show that the entire process can take anywhere from 10 to 20 years. The clinical trial phase, for example, is the longest part of the journey, as it involves extensive testing to ensure the safety and effectiveness of new treatments. Regulatory approval is another phase that consumes a significant amount of time, especially when trying to introduce new treatments for complex diseases.

Basic research provides the foundation for medical innovations, but it does not guarantee that these findings will quickly translate into clinical use. Many discoveries made in the laboratory never make it to human trials due to high costs, safety risks, or missed opportunities for commercialization. The process of translating research into real-world medical applications is highly dependent on the specific field. Research in areas such as infectious diseases tends to progress more quickly due to the urgent need for solutions to global health challenges. However, diseases like Alzheimer's or Parkinson's are plagued by slow progress due to the scientific complexity and lack of significant treatment breakthroughs.

Several factors contribute to the delays in translating biomedical research. The complexity of scientific challenges, coupled with the availability of funding, regulatory approval processes, and public acceptance, all play significant roles. The scientific complexity of diseases such as cancer and neurological disorders requires long periods of research to understand the disease progression, genetics, and treatment responses. These fields are also marked by higher failure rates in clinical trials, as many treatments fail to produce satisfactory results or cause unexpected side effects.

Funding is a crucial element in the speed of research. Biomedical research, particularly in drug development, requires significant financial investment to support clinical trials and the approval process. The development of COVID-19 vaccines, for instance, illustrates how large-scale funding can expedite research efforts. Conversely, limited funding for rare diseases or genetic disorders can stymie progress, as governments and pharmaceutical companies often allocate resources to more prominent health issues.

Regulatory approval processes introduce additional delays. Agencies such as the FDA, EMA, and WHO enforce stringent standards to ensure the safety and efficacy of new treatments. While these regulations are vital for public safety, they can significantly slow down the translation process due to their bureaucratic nature. The differences in regulatory standards across countries further complicate international research and approval, extending the timeline for global implementation.

Public perception and policy shifts also influence how quickly new biomedical innovations are adopted in medical practice. Even when scientific evidence supports the effectiveness of a treatment, resistance from the public or political challenges can delay its acceptance. Vaccines, despite extensive evidence of their efficacy, face delays in widespread adoption due to public resistance in some communities. Furthermore, health policies derived from biomedical research often undergo long approval processes due to political disagreements and bureaucratic obstacles.

Case studies demonstrate both rapid and slow research translation timelines. During emergencies, such as the COVID-19 pandemic, research translation can occur much faster. For example, researchers developed a vaccine within two years, thanks to advances in mRNA technology, substantial funding, and fast-tracked regulatory approvals. In contrast, researchers working on Alzheimer's disease experience slow progress, with decades of research leading to only a few treatments that show limited effectiveness. The complexities of neurodegenerative diseases, coupled with high clinical trial failure rates, contribute to the long timeline for research translation.

The role of technology and collaboration is crucial in speeding up research. Advances in artificial intelligence and machine learning enable researchers to process large datasets more quickly, identify potential drug combinations, and simulate biological processes, which eliminates the need for time-consuming laboratory work. Collaboration between academic institutions, pharmaceutical companies, and regulatory bodies can also accelerate the development process. Early partnerships between researchers and pharmaceutical companies can shorten the time from laboratory research to clinical trials, while agencies that oversee healthcare can implement fast-track procedures and adaptive clinical trials to speed up medical advancements.

There are several strategies that could improve the efficiency of research translation. One such strategy is adapting the regulatory approval process to allow quicker access to promising treatments without compromising safety. Conditional approval methods and the use of real-world evidence can help fast-track treatments. Increasing funding for biomedical

| e-ISSN: 2320-9801, p-ISSN: 2320-9798| Impact Factor: 8.771| ESTD Year: 2013|

DOI: 10.15680/IJIRCCE.2025.1303077



International Journal of Innovative Research in Computer and Communication Engineering (IJIRCCE)

(A Monthly, Peer Reviewed, Refereed, Scholarly Indexed, Open Access Journal)

research, particularly in neglected areas such as rare diseases, will also help accelerate progress. Additionally, improving data-sharing systems and fostering global collaboration can enhance the efficiency of research. For example, cancer research could benefit from better access to shared research platforms and open databases.

Public advocacy and policy changes are also essential to speed up the acceptance and adoption of new biomedical discoveries. Greater public awareness of the benefits of novel treatments, along with policy shifts to support their introduction, can reduce resistance and accelerate the uptake of new therapies. Policymakers must work closely with researchers to ensure that regulations keep pace with scientific advancements and do not hinder the delivery of vital new treatments to patients.

In conclusion, biomedical research translation is a slow process, influenced by scientific challenges, funding, regulatory hurdles, and social perceptions. While research on infectious diseases can progress rapidly during emergencies, other areas such as neurology and oncology face significant delays due to the complexity of the diseases being studied. Despite these challenges, the speed of research can be increased with improved funding, technological advancements, better datasharing systems, and stronger collaborations between research institutions, the pharmaceutical industry, and government agencies. By implementing these strategies, it is possible to reduce the time between research discovery and its practical application, ultimately improving health outcomes globally.

REFERENCES

- 1. Balas, E. A. & Boren, S. A., 2000. Managing clinical knowledge for health care improvement. *Yearbook of Medical Informatics*, 9, pp.65-70.
- 2. Chalmers, I., Bracken, M. B., Djulbegovic, B., et al., 2014. How to increase value and reduce waste when research priorities are set. *The Lancet*, 383(9912), pp.156-165.
- 3. Collins, F. S. & Stoffels, P., 2020. Accelerating COVID-19 therapeutic interventions and vaccines (ACTIV): An unprecedented partnership for unprecedented times. *JAMA*, 323(24), pp.2455-2457.
- 4. Contopoulos-Ioannidis, D. G., Alexiou, G. A., Gouvias, T. C. & Ioannidis, J. P., 2008. Life cycle of translational research for medical interventions. *Science*, 321(5894), pp.1298-1299.
- 5. DiMasi, J. A., Grabowski, H. G. & Hansen, R. W., 2016. Innovation in the pharmaceutical industry: New estimates of R&D costs. *Journal of Health Economics*, 47, pp.20-33.
- 6. Djulbegovic, B. & Guyatt, G. H., 2017. Progress in evidence-based medicine: A quarter century on. *The Lancet*, 390(10092), pp.415-423.
- 7. Eichler, H. G., Bloechl-Daum, B., Abadie, E., Barnett, D., Konig, F. & Pearson, S., 2013. Relative efficacy of drugs: An emerging issue between regulatory agencies and third-party payers. *Nature Reviews Drug Discovery*, 12(3), pp.167-174.
- 8. European Medicines Agency (EMA), 2021. Overview of medicine approval timelines. Retrieved from www.ema.europa.eu
- 9. Graham, I. D., Logan, J., Harrison, M. B., et al., 2006. Lost in knowledge translation: Time for a map? *The Journal of Continuing Education in the Health Professions*, 26(1), pp.13-24.
- 10. Hanney, S. R., Castle-Clarke, S., Grant, J. & Guthrie, S., 2015. How long does biomedical research take? A systematic review of the time frame for translation of evidence into policy and practice. *Health Research Policy and Systems*, 13(1), pp.1-18.
- 11. Heneghan, C., Aronson, J. K., Goldacre, B. & Mahtani, K. R., 2017. Evidence synthesis and translation into policy and practice. *BMJ Evidence-Based Medicine*, 22(1), pp.1-3.
- 12. Khoury, M. J., Gwinn, M., Yoon, P. W., Dowling, N., Moore, C. A. & Bradley, L., 2007. The continuum of translation research in genomic medicine: How can we accelerate the appropriate integration of human genome discoveries into health care and disease prevention? *Genetics in Medicine*, 9(10), pp.665-674.
- 13. Kesselheim, A. S., Wang, B., Avorn, J. & Darrow, J. J., 2015. Trends in drug development approval times for novel therapeutics. *JAMA*, 314(8), pp.837-845.
- 14. Liakou, C.I., Papadakis, M. & Plytas, M., 2025. The challenges for manufacturers of the increased clinical evaluation requirements under the European Union medical device regulations. *International Journal of Engineering Technology and Research Management*, 9(3), pp.32–40. Available at: https://ijetrm.com/issues/files/Mar-2025-07-1741356854-MAR05.pdf.

| e-ISSN: 2320-9801, p-ISSN: 2320-9798| Impact Factor: 8.771| ESTD Year: 2013|

DOI: 10.15680/IJIRCCE.2025.1303077



International Journal of Innovative Research in Computer and Communication Engineering (IJIRCCE)

(A Monthly, Peer Reviewed, Refereed, Scholarly Indexed, Open Access Journal)

- 15. Liakou, C.I., Papadakis, M. & Plytas, M., 2025. Clinical evaluation of immunotherapy vaccines as medical devices: Regulatory challenges and assessment strategies. *International Journal of Engineering Technology and Research Management*, 9(3), pp.32–31. Available at: https://ijetrm.com/issues/files/Mar-2025-07-1741355709-MAR04.pdf.
- 16. Liakou, C.I. & Plytas, M., 2025. Patient access to high-risk devices for unmet medical needs. *International Journal of Engineering Technology and Research Management*, 9(3), pp.41–46. Available at: https://ijetrm.com/issues/files/Mar-2025-07-1741357556-MAR06.pdf.
- 17. Lo, B. & Field, M. J., 2009. Conflict of interest in medical research, education, and practice. National Academies Press.
- 18. Macleod, M. R., Michie, S., Roberts, I., et al., 2014. Biomedical research: Increasing value, reducing waste. *The Lancet*, 383(9912), pp.101-104.
- 19. Morris, Z. S., Wooding, S. & Grant, J., 2011. The answer is 17 years; what is the question? Understanding time lags in translational research. *Journal of the Royal Society of Medicine*, 104(12), pp.510-520.
- 20. Munos, B., 2009. Lessons from 60 years of pharmaceutical innovation. *Nature Reviews Drug Discovery*, 8(12), pp.959-968.
- 21. Pathak, S., Nathanson, D. A. & Smith, K., 2018. Translational barriers and opportunities in the development of targeted therapies for cancer. *Nature Reviews Clinical Oncology*, 15(12), pp.757-772.
- 22. Petaniti, E., Tzamaria, M., Liakou, C. & Plytas, M., 2025. Early-stage medical technology assessment integrating health economics modelling for smarter product development. *International Journal of Smart Applications and Technologies*, 16(1), pp.1-9. https://doi.org/10.71097/IJSAT.v16.i1.2573
- 23. Scott, I. A., Heath, I. & Heneghan, C., 2012. The need for better healthcare research. BMJ, 344, pp.e571.
- 24. Seyhan, A. A., 2019. Lost in translation: The valley of death across preclinical and clinical divide—Identification of problems and overcoming obstacles. *Translational Medicine Communications*, 4(1), pp.1-19.
- 25. Sung, N. S., Crowley, W. F., Genel, M., et al., 2003. Central challenges facing the national clinical research enterprise. *JAMA*, 289(10), pp.1278-1287.
- 26. Tzamaria, M., Petaniti, E., Liakou, C. & Plytas, M., 2025. Leveraging artificial intelligence, data analysis, and computer science in primary care: Enhancing electronic health records for improved patient outcomes. *International Journal of Smart Applications and Technologies*, 16(1), pp.1-15. https://doi.org/10.71097/IJSAT.v16.i1.2572
- 27. Woolf, S. H., 2008. The meaning of translational research and why it matters. JAMA, 299(2), pp.211-213.
- 28. World Health Organization (WHO), 2020. The role of regulatory frameworks in accelerating access to new medical innovations. Retrieved from www.who.int
- 29. Zerhouni, E. A., 2003. The NIH Roadmap. Science, 302(5642), pp.63-72.











INTERNATIONAL JOURNAL OF INNOVATIVE RESEARCH

IN COMPUTER & COMMUNICATION ENGINEERING







📵 9940 572 462 🔯 6381 907 438 🔀 ijircce@gmail.com

