LETTERS

Impact of COVID-19 on pediatric clinical research in France

As stated by Cheng and colleagues,[1] temptations to use unproven medications and strategies instead of relying on scientific evidence are high when facing the frightening coronavirus disease 2019 (COVID-19) pandemic. Most medical and scientific communities have reacted promptly to better fight the disease. This is a particular challenge in pediatric clinical research.

PEDSTART (www.pedstart.org/en) is the national network of French pediatric clinical research centres. A task force has been created to gather all national research initiatives and anticipate the consequences of COVID-19 on pediatric clinical research. At present, we have identified no fewer than 15 projects at different stages of maturity involving pediatric patients. Overlap between studies is frequent, and multiplicity of trials may jeopardize a relevant approach. Each pediatric clinical investigation centre had to reorganize itself rapidly, while meeting the triple requirement of limiting travel and contact with patients, protecting hospital staff from infection, and reducing the activity of the hospital to ensure there are enough staff and beds for patients with COVID-19. Negative and positive effects have been observed. Although COVID-19 has strengthened team cohesion and involvement, we have to face a decrease in activity of pediatric clinical research. Supply management of investigational medicinal products and good clinical practices will be challenged by unprecedented adaptations of research infrastructure.

This period may be a chance to merge projects and to join forces to deal with the resumption of "usual" activity, which will be a challenging task in itself. We encourage and support the merging of risk-mitigation activities at an international level to better anticipate and respond to the impact of COVID-19 on ongoing and future pediatric clinical research.

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Reference

1. Cheng MP, Lee TC, Tan DHS, et al. Generating randomized trial evidence to optimize treatment in the COVID-19 pandemic. *CMAJ* 2020;192: E405-7.

Competing interests: None declared.