Hypothesis:

1) It is a common practice to administer new therapies under clinical trials to terminally ill cancer patients. The rationale weighs risks against odds of doing nothing radical. Could COVID treatments take a similar path given the devastation and observed mortality. If hospitals with medico-legal clearances in India for clinical trials can access therapies anywhere in the world faster and quicker, can death rates be reduced, a curative therapy advanced or such therapies be used on an emergency basis.

2) Early-stage drug researchers when looking for targeted clinical trials are faced with dichotomous problem viz. early-stage therapies don't have uptake because they aren't proven, and they won't be proven unless there is uptake. Early-stage researchers/lab/institutions are more open to new partnerships. Accessing them fast and early could mean preferential access, first mover advantage and ensure right of first use. How do we identify these sources of therapies and engage with them ensuring prevalent legal, ethical, medical and safety protocols are met globally?

Modus operandi:

1) The focus of this initiative is to ensure the right things are done now so that India is better prepared 3, 6 and 9 months from now. This initiative will not address the current situation i.e oxygen security, intubation resourcing or shortage of ICU beds or interfere with preventive measures like vaccination drives, social regulations etc.
2) Rather this initiative seeks to harness ideas outside the box to look at solutions that helps to get ahead of the curve. Creating such an innovation network to benefit India will require a multi-disciplinary approach outside of what exists within the medical fraternity.
3) A task force is required to take this idea to execution meeting specific milestones viz. identify, source, partner, procure and implement promising clinical trials in Indian hospitals faster and quicker to treat moderate and severe cases of COVID19.
4) Multi-disciplinary skills required include market intelligence, partnering & negotiation skills, medico-legal expertise, clinical trial specialists, medical specialists, financial advisors, strategists, consultants, marketing, communications, public relations. Participation is voluntary and honorary at this stage.

Next Steps:

1) Validate hypothesis & assumptions
2) Form Taskforce
3) Create a blueprint

Illustrative scenarios & problem statements:

Exo CD-24 is a five-day oral therapy out of Israel claimed to show preliminary signs of a cure for COVID19. Greek & Brazilian governments have agreed for trials or emergency use in respective countries. What other early-stage therapies are promising. How do we bring them to India. Which Hospitals are equipped to implement these trials. What are the legal/medical/contractual aspects of engaging with international labs/researchers for clinical trials in India. What has been done already and where are the gaps.

If you are interested to support or join the taskforce or know someone influential who would be beneficial to the task force or have questions please contact
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