UAMS-Based Investigators Receive $39 Million Grant Renewal to Coordinate Multistate Clinical Trials in Infants & Children

LITTLE ROCK — The University of Arkansas for Medical Sciences (UAMS) has been awarded $39 million from the National Institutes of Health (NIH) to continue to oversee an 18-site pediatric clinical trial network that provides children in medically underserved or rural areas access to clinical studies on environmental influences on early development.

The Data Coordinating and Operations Center (DCOC) for the NIH Environmental influences on Child Health Outcomes (ECHO) Institutional Development Award (IDeA) States Pediatric Clinical Trials Network (ISPCTN) at UAMS is led by Jeannette Lee, Ph.D., professor of biostatistics, and Jessica Snowden, M.D., associate professor of pediatrics and chief of the Division of Pediatric Infectious Diseases in the UAMS College of Medicine.

After originally receiving $41.8 million in funding in 2016, the center will use this latest grant to continue its work for an additional five years.

The DCOC implements large clinical trials across 18 states to inform programs, practices and policies that enhance the health of children.

One of the 18 sites is Arkansas Children’s Research Institute (ACRI), which received a $2.1 million renewal grant from the NIH for funding through 2025. The site, Arkansas ECHO ISPCTN Site (AREIS), is co-led by Laura James, M.D., director of UAMS’ Translational Research Institute; and Tamara Perry, M.D., professor in the Department of Pediatrics.

Examples include studies of asthma treatment, pediatric obesity, and improving the care of infants experiencing opioid withdrawal, as well as the potential to do studies addressing the COVID-19 pandemic and/or focused on neurodevelopment and resiliency. Specifically, the DCOC provides data coordination, technical instruction, data standards, quality control and assurance, and operational coordination for the clinical trials.
In the first four years of the DCOC’s work, the team supported the launch of four clinical trials and completion of an observational study of over 1,800 mother-infant pairs with opioid exposure. The expertise of the UAMS DCOC team has been critical to the success of ECHO ISPCTN.

The DCOC’s work focuses on the IDeA states, which are Puerto Rico and 23 states that historically have had low levels of NIH funding. The DCOC also works to build the clinical trial workforce in these states to create an environment that encourages more clinical trials.

The DCOC renewal includes a new Clinical Trials Skills Development Core, where the team will leverage expertise in the UAMS departments of Biostatistics, Pediatrics and Biomedical Informatics to prepare a new generation of pediatric researchers to lead multisite clinical trials that address the needs of rural or underserved children.

“Ultimately, the goal is to provide better health care to children in underserved states, but first we have to better understand the health issues for children in these environments, which are frequently rural and where children have less access to medical care,” Lee said. “Many of the clinical trials on childhood development and disease are conducted elsewhere, in more affluent urban areas. It’s our goal to enhance our research capacity to understand the unique needs of children in the IDeA states so that we can effectively facilitate the medical advances necessary to better serve them.”

Experiences during sensitive developmental windows, including around the time of conception, later in pregnancy, and during infancy and early childhood, can have long-lasting effects on the health of children.

It is particularly important to bring pediatric research to IDeA states, like Arkansas, as these early childhood experiences and the tools to advance health may be different in our communities.

“Dr. Lee and Dr. Snowden both bring so much expertise to this work, both from the perspective of managing large data-driven projects and having a keen understanding of the issues facing children in rural and underserved communities,” said Christopher T. Westfall, M.D., College of Medicine dean and UAMS executive vice chancellor. “Feedback on this program has been universally excellent. I can’t wait to see what advances the next five years bring for them and for the children of Arkansas and beyond.”

UAMS is the state’s only health sciences university, with colleges of Medicine, Nursing, Pharmacy, Health Professions and Public Health; a graduate school; hospital; a main campus in Little Rock; a Northwest Arkansas regional campus in Fayetteville; a statewide network of regional campuses; and seven institutes: the Winthrop P. Rockefeller Cancer Institute, Jackson T. Stephens Spine & Neurosciences Institute, Harvey & Bernice Jones Eye Institute, Psychiatric Research Institute, Donald W. Reynolds Institute on Aging, Translational Research Institute and Institute for Digital Health & Innovation. UAMS includes UAMS Health, a statewide health system that encompasses all of UAMS’ clinical enterprise including its hospital, regional clinics and clinics it operates or staffs in cooperation with other providers. UAMS is the only adult Level 1 trauma center in the state. U.S. News & World Report named UAMS Medical Center the state’s Best Hospital; ranked its ear, nose and throat program among the top 50 nationwide; and named six areas as high performing — cancer, colon cancer surgery, heart failure, hip replacement, knee replacement and lung cancer surgery. UAMS has
2,727 students, 870 medical residents and five dental residents. It is the state’s largest public employer with more than 10,000 employees, including 1,200 physicians who provide care to patients at UAMS, its regional campuses, Arkansas Children’s Hospital, the VA Medical Center and Baptist Health. Visit www.uams.edu or www.uamshealth.com. Find us on Facebook, Twitter, YouTube or Instagram.