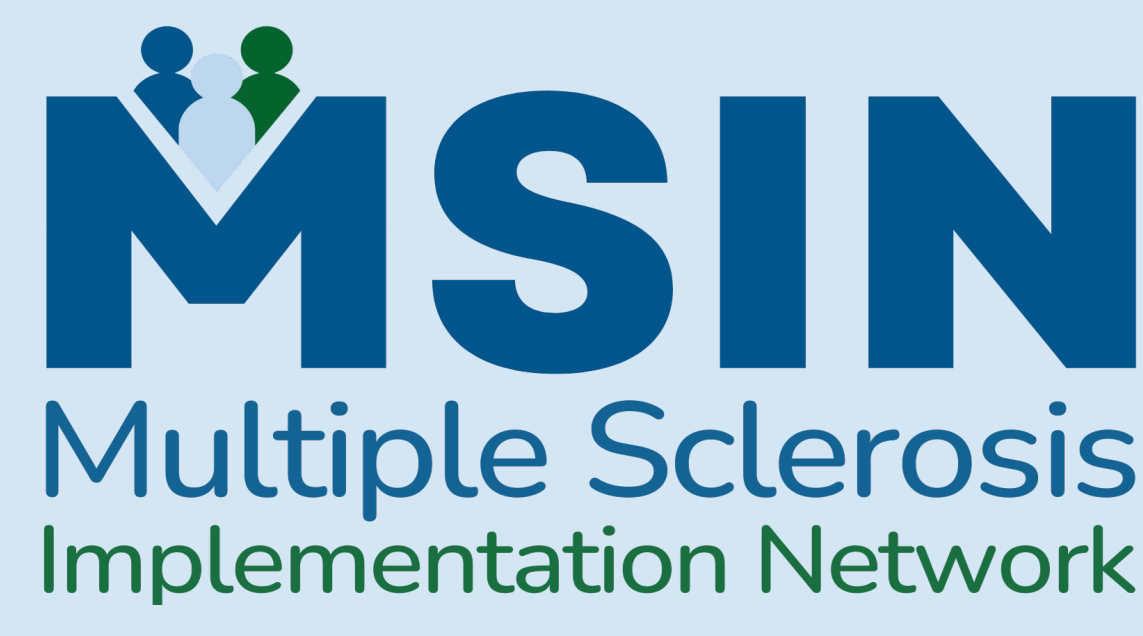


THE MS IMPLEMENTATION NETWORK (MSIN)

An Innovative, Patient-Driven Research Network and Implementation Research Study



Introduction

The Multiple Sclerosis Implementation Network (MSIN) is a patient-centric, innovative collaboration between industry, academia and patient advocacy aimed at improving MS care and practice through the development of a practice-based learning research network.

The vision is for people living with MS to be informed leaders of their care team through the sharing of treatment data and outcomes generated in a practice-based research network.

People living with MS will be included in all aspects of the research collaborative including MSIN Advisory Boards and governance structure and will help to guide the direction of the study.

Methods

MSIN is an innovative collaborative research study, uniting key partners in the field of MS care. Led by the MSAA, the MSIN Steering and Oversight Committee (SOC) includes the University of Texas Health Science Center at Houston, the University of Texas at Austin Dell Medical School, Novartis Pharmaceuticals Corporation and people living with MS.

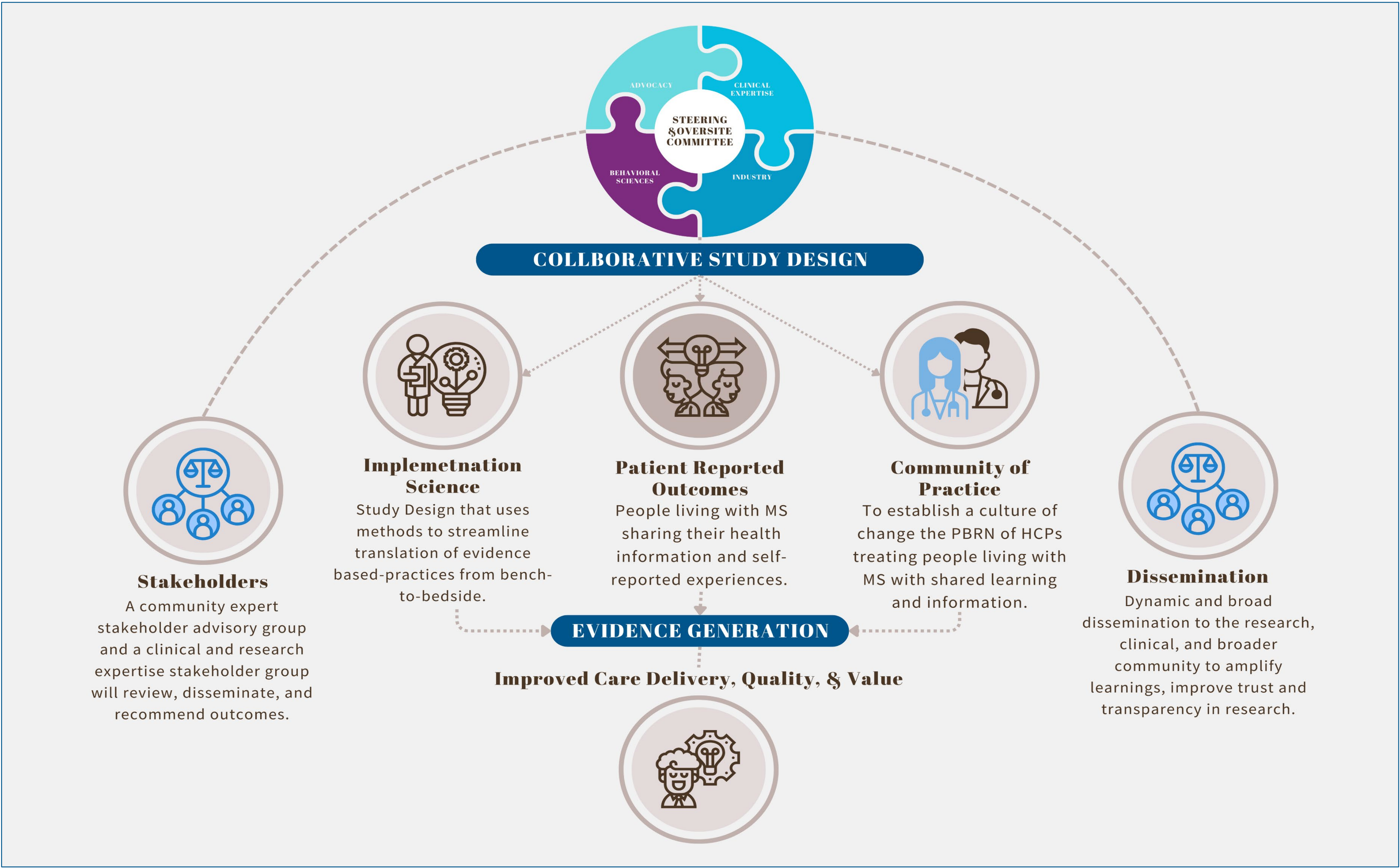
Under the direction of the SOC, MSIN has six collaborative work groups:

- 1) data management and analytics;
- 2) community engagement and partnerships;
- 3) outcomes and measures;
- 4) evidence-based intervention identification;
- 5) implementation strategy planning; and
- 6) Practice-based research network, research and agenda.

Aims

The initial aim for the study is to establish a practice-based research network of a diverse group of clinicians who provide care for people living with MS. **MSIN will establish a patient registry while simultaneously supporting and improving the practice of the MS clinicians in the network.**

The secondary aim for the study is to establish **an implementation research program capable of conducting rapid-cycle implementation research** that will enable the study to implement, evaluate and improve evidence-based interventions for MS care.



Conclusion

MSIN’s patient-centered approach in developing an implementation science research network will accelerate the translation of best MS practices into clinical practices, improving care and outcomes for people living with MS equitably.

Discussion

The MSIN is properly situated and strategically designed to inform the necessary evidence generation to address sustained gaps in how multiple sclerosis is treated.

The PBRN framing of the MSIN is intended to streamline information sharing and knowledge transfer between clinical practitioners across the country, using implementation science quality improvement strategies.

The MSIN stakeholder convening groups complement PBRN activities while simultaneously elevating the study to a community of practice.

Instead of the customary siloed collaborations of clinicians and patients, or industry and researchers, or industry and patients, the MSIN convening groups bridge these traditionally dispersed system influencers to incorporate all perspectives. In the same way that the MSIN preparatory work was conducted,

MSAA, as the strategic lead, will identify opportunities to evaluate and synthesize knowledge and disseminate outcomes through concept papers and publications.

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