NIHR | National Institute for Health and Care Research

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Department of Health & Social Care

Annual Report 2024/25

Parliamentary Under-Secretary of State at the Department of Health and Social Care

Baroness Gillian Merron

INTRODUCTION

I am delighted to introduce the National Institute for Health and Care Research (NIHR) Annual Report for 2024/25.

As the health and social care research arm of the nation, the NIHR is the cornerstone of our government's ambition to turbocharge medical research and deliver better patient care.

NIHR research is funded by the public, for the public. From pioneering new approaches to preventing ill health, to enabling earlier diagnosis, faster treatment, and ultimately, reducing waiting times and enhancing the effectiveness of care, NIHR-funded discoveries directly improve outcomes for individuals and strengthen our health and care system.

NIHR research is a powerful engine for economic growth, supporting thousands of high-value jobs across our life sciences sector and attracting crucial investment into the UK as well as delivering better health care. For every £1 invested by the government, NIHR research delivers a return of over £13 in economic benefit to the nation. This demonstrates the profound dual dividend of investing in NIHR research: healthier lives and a stronger economy.

This annual report is just a snapshot of the work that the NIHR is doing to create an NHS fit for the future and to improve the lives of people across the country and around the world. My sincere gratitude goes to the researchers, members of the public and partner organisations who are working together to ensure that the life-changing benefits of NIHR research can be seen across the health and care frontline.

Professor Lucy Chappell

Chief Scientific Adviser to the Department of Health and Social Care and Chief Executive of NIHR

Dr Gail Marzetti

Director of Science, Research and Evidence at the Department of Health and Social Care and Deputy Chief Executive of NIHR

FOREWORD

Welcome to our Annual Report for 2024/25. In this report, we are proud to share with you a wealth of different ways in which research that is funded and supported by the Department of Health and Social Care and delivered through the NIHR has improved lives and made a difference to individuals, families and communities over the year.

As the health and social care research arm of the nation, the NIHR drives health and social care improvement through our 4 I's: impact, inclusion, innovation and investment.

These 4 themes underpin and support everything we do. This report celebrates how researchers, members of the public, clinicians, public health and social care professionals have contributed to transformational change across the health and care system.

The work of the NIHR is key in supporting the government's health and growth missions by delivering on the 'three shifts' outlined in the government's 10 Year Health Plan: from hospital to community, sickness to prevention and analogue to digital.

As we reflect on a remarkable year for the NIHR and approach our 20th anniversary in 2026, we renew our determination to showcase impact and the work we do with partners to build a health and care system fit for the future.

We hope you enjoy reading more about just some of the ways NIHR research is changing lives and improving quality of life for people across the nation.

Impact

Celebrating the impact of the NIHR on health and wealth

Through our research programmes and academy schemes, NIHR invested over £578m in directly funded research to tackle the nation's greatest health and care challenges in 2024/25, including over £44 million on cancer, £25 million on cardiovascular disease and £69 million on mental health, with our wider investments in the underpinning research infrastructure, valued at over £825m in 2024/25, enabling thousands of additional people to participate in life-changing research in the health and care system funded by others.

In March 2025, we celebrated the achievements of NIHR researchers through our first NIHR Impact Prizes, where we showcased the exceptional work of researchers and teams across the UK and globally. This report features the work of several of our award winners and the wider NIHR research community, who have each contributed to the NIHR's mission to make a difference to the health and wealth of the nation.

Among our Impact Prize winners, we celebrated the STAMPEDE trial team whose study findings have extended survival rates for men with advanced prostate cancer – with an estimated 1 million life years gained globally through this work. Another of our winners, the multi-disciplinary Imperial Critical Care Research team, conducted research which has improved the care of severely ill patients with sepsis, saving hundreds of thousands of lives and reducing the time that people with sepsis spend in hospital.

We were also immensely proud to see our researchers and staff recognised in the New Year Honours list. Recipients included Dr Lisa Cotterill MBE, Executive Director at the NIHR Coordinating Centre who co-led the launch of the NIHR Academy; Professor Elaine Hay MBE, recognised for improving patient care, particularly in the area of musculoskeletal conditions; and Professor Sara Kenyon MBE for her work leading a programme of maternity research.

Inclusion

NIHR driving inclusion in health and care research

Including the voices, experiences and insights of everyone in our community is vital for our research. In November 2024, we announced a key step change, making inclusion a requirement for all NIHR funding. We also shared our 2025-2026 action plan for delivering our Strategic Commitments for Public Partnerships to make research more relevant, accessible and equitable for all, helping to build a fairer Britain, where everyone lives well, for longer. Through this work, we are ensuring all research applicants demonstrate how their research will tackle inequalities in health and social care.

We have also taken steps to increase workforce diversity and attract people from all backgrounds and professions into a career in research. We welcomed Dr Lisa Ledger, our first NIHR Assistant Director of Allied Health Professions (AHPs), to develop more research career opportunities for AHPs across both the health and care sectors, and Professor G.J. Melendez-Torres was appointed as Associate Dean for Research Inclusion for the NIHR Academy - a new role created to accelerate diversity amongst researchers.

Throughout the year, we have been even more determined to make it easier for everyone to take part in our trials and studies. Over half a million people from across the UK have already signed up to our flagship Be Part of Research volunteer registry. Be Part of Research is a free, online service that matches people to suitable health and care research, based on their interests. By giving people more choice to search and take part in studies taking place online or near their home, we are bringing research closer to the communities we serve.

In February 2025, we celebrated 10 years since the launch of Join Dementia Research. More than 89,000 people are now signed up to take part in vital dementia research across the UK. This year our national Participant in Research Experience Survey showed that taking part in research has been a positive experience for so many, with 91% of adults and 87% of children and young people in England stating they would consider taking part in research again.

Innovation

NIHR powering the UK's world-leading reputation for life sciences innovation and medtech

The NIHR is a driving force in the UK's life sciences industry, making the UK a world-leading powerhouse in innovation. Our unique research capabilities and skills combine to create a go-to destination for life science partners to discover the medicines and cutting-edge treatments of the future.

Innovation is woven into our NIHR research infrastructure which brings together specialist facilities, research delivery teams and leading experts from across universities, the NHS, local authorities, charities, industry and wider partners. These vital networks have been critical to some of this year's game changing studies, including a trial of the world's first mRNA immunotherapy for skin cancer, accelerated by the transformative UK Vaccine Innovation Pathway.

Delivering innovation and maintaining our world-leading status in research requires a thriving research ecosystem where experts from different fields can challenge and inspire one another to think in new ways and break new ground. By growing and developing our health and care research workforce through our NIHR Academy in 2024/25, we have supported some of our brightest minds to unlock more opportunities to discover new ways to prevent, detect, diagnose and treat a range of conditions, and change and improve how we deliver social care to people.

In this report, we celebrate the achievements of researchers at different stages of their career, who generate innovation and inspiration across the sector. This includes NIHR Senior Investigator, Professor Rebecca Fitzgerald, who pioneered the capsule sponge in a landmark oesophageal cancer screening trial, and early career researcher Dr Charlotte Hall, for her research to show how using a digital tool can increase the speed and efficiency of ADHD assessment.

Investment

NIHR championing investment and economic growth

Throughout 2024/25, the NIHR has been at the forefront of creating a faster, more efficient, accessible and innovative clinical research delivery system to boost economic investment in the UK. As part of this, new Commercial Research Delivery Centres were established across the 4 nations which will act as regional hubs to support the rapid set-up of commercial studies. Through these centres, we will increasingly shift research into communities and allow more people to access cutting-edge treatments faster, marking a pivotal shift in the UK's world-leading offer for clinical trial delivery.

In October 2024, we launched the NIHR Research Delivery Network (RDN) as part of our drive to make the UK a more attractive place to conduct high quality, groundbreaking research for the benefit

Lucy and Gail with Impact Prize 2025 winners.

of patients and the public. The work of the RDN will ensure that more people can take part in research wherever they live - helping to address population needs, support our health and care system, and embed research as a routine part of care.

In this report, you will read how state-of-the-art research vans are reaching coastal communities, making it easy and convenient for people to take part in the UK's first norovirus mRNA vaccine trial, which is investigating the safety and effectiveness of a vaccine to prevent this unpleasant seasonal illness.

Working with the research system in 2024/25, the NIHR has enabled the National Contract Value Review to be available for all phases of commercial clinical trials. This national approach to costing and contracting will mean trials can be set up more quickly, saving time and money for the NHS and study sponsors. We have also introduced new measures to reduce burdens on researchers by streamlining our funding application process and awards management system. Through improved systems, we can reduce bureaucracy to support the delivery of high quality and timely research for patient and public benefit.

Progress has been made to address study set-up delays, but we know there is still more to do. Through our UK Clinical Research Delivery programme, we will be working as a priority with our partners on an ambitious new Study Set-Up Plan to speed up research delivery so that the UK moves ahead of global competitors as a premier destination for life science industry investment.

We have continued to support and fund research that seeks to tackle economic inactivity and support people into good work through our Work and Health Research Initiative. This year saw findings published on supporting healthy lifestyles among young adults in the workplace and self-management for people with long term health conditions and disabilities.

CONTENTS

YEAR IN NUMBERS

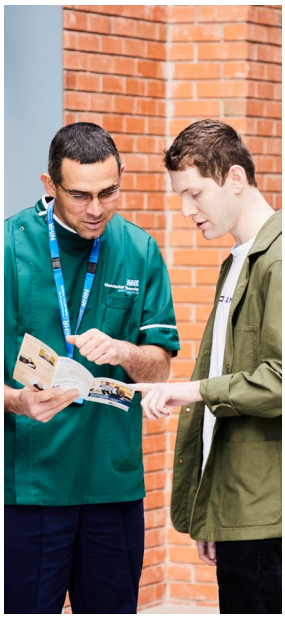
IMPACT

Over **10,000** front-line research delivery staff across the NHS and wider health and care system funded or part-funded

53 international firsts - 16 global and 37 European firsts in patient recruitment to international studies

1,049,635 took part in 4,561 studies delivered by the NHS and social care sector and supported by NIHR

INCLUSION



669 partners across 60 countries

591,541 people registered on Be Part of Research

340 care homes took part in research supported by the Research Delivery Network

The NIHR drives life-changing research for the health and wealth of our society across 4 areas: impact, inclusion, innovation and investment

INNOVATION

15

new Commercial Research Delivery Centres to support rapid set-up of commercial studies

3,238

researchers with career development awards (incl. global health research)

500%

increase in Vaccine Innovation Pathway cancer trial recruitment

INVESTMENT

For every £1 invested in NIHR research, society receives more than £13 of benefits

£1:£13

£ : £ £ £ £ £ £ £ £ £ £ £ £ £

£1.2bn

investment leveraged for the NHS from commercial studies supported by the Research Delivery Network

39,274

people were recruited into commercial studies supported by the NIHR, equating to an average of £31,259 per person for the NHS*

*These figures exclude a large observational study with high recruitment numbers and low recruitment costs

Bradford residents' health improved with the city's air quality. Photo credit: Born in Bradford.

IMPACT

NIHR research changes lives and improves quality of life for the nation.

Our research improves people's lives by finding new ways to prevent, detect, diagnose and treat a wide range of conditions that affect the population. By prioritising regions and communities with the greatest needs, we directly address persistent health and social care inequalities across the UK and globally.

Over the past year, the NIHR supported 17,953 projects through its infrastructure and research units to help improve the quality of life of the nation, including a game changing drug approved for advanced breast cancer. Our research will help cut waiting times, deliver cost savings and help people lead healthier and happier lives.

Research to tackle the biggest killers

1109 cancer and neoplasm studies were supported by the RDN in England in 2024/25 alongside **526** studies in cardiovascular disease and **417** in mental health

NIHR research has led to new policy to combat air pollution, a reduction in preventable illness, cost savings for the NHS and the evidence needed to create healthier communities.

Bradford's Clean Air Zone improves respiratory health and reduces demand on GPs

Air pollution has clear links to heart and lung disease and is estimated to cause between 29,000 and 43,000 deaths a year in the UK. A previous study by an NIHR-funded research project which contributed to the Born in Bradford programme found that more than half of Bradford's population was exposed to dangerously high levels of air pollution. People on the lowest incomes in ethnically diverse communities were disproportionately affected.

In response to NIHR's research, Bradford introduced a Clean Air Zone in 2022. A new study, funded by the NIHR Public Health Research Programme and carried out by the Bradford Institute for Health Research which receives support from NIHR Applied Research Collaboration Yorkshire and Humber, investigated the impact that the zone is having on health and health inequalities.

The Born in Bradford Breathes findings, first reported in November 2024, showed that residents' health improved as the city's air quality improved. After one year of the Clean Air Zone, GPs were seeing around 700 fewer patients for breathing and heart problems each month, easing pressure on waiting times. This reduces the burden on GP practices and is saving the local NHS an estimated £30,743 per month.

700 fewer patients
seen by GPs for breathing and heart problems each month

£30,743 in savings
for the NHS each month

"Although the research is still underway, our early results are encouraging. By reducing demand for GP appointments caused by preventable pollution-related illness, we can help ease the burden on our overstretched NHS."

Professor Rosie McEachan, Director of Born In Bradford

Study of children's health in London and Luton shows impact of ULEZ

A study into the impact of London's Ultra-Low Emissions Zone (ULEZ) shows that it is transforming children's journeys to school.

Children's Health in London and Luton (CHILL) is led by Queen Mary University of London and is funded and supported by NIHR's Public Health Research programme and NIHR Applied Research Collaboration North Thames. The project is just one of 17,953 supported by our infrastructure and research units in 2024/25. The study's findings, published in March 2025 in BMJ Open, highlighted the benefits of the ULEZ, with many families noticing safer roads and cleaner air bringing health improvements such as alleviated symptoms of asthma.

17,953 projects
supported by our infrastructure and research units in 2024/25

NHS adopting 'revolutionary' digital test to improve diagnosis of ADHD

A digital test for Attention Deficit Hyperactivity Disorder (ADHD) in children and young people was approved for use by the NHS in July 2024, after NIHR-funded trials showed it can help improve and speed up assessments.

'QbTest' is a computer-based assessment which measures characteristics of ADHD. Standard assessments rely on interviews with teachers, carers and the patient, in a subjective process that takes 18 months on average.

By using QbTest alongside existing clinical assessment methods, a diagnosis can be reached more quickly, supporting the shift from analogue to digital alternatives. This early intervention means more timely support for patients, a 33% reduction in NHS costs and helps address the 400% increase in ADHD referrals seen since the COVID-19 pandemic.

The tool, developed by Qbtech, was trialled by the NIHR Applied Research Collaboration East Midlands and supported by the NIHR HealthTech Research Centre in Mental Health (MindTech). It was piloted within 3 mental health trusts by Health Innovation East Midlands, before being rolled out nationally by the wider Health Innovation Network.

Early career researcher Dr Charlotte Hall

Dr Julie Clarke, Consultant Paediatrician at United Lincolnshire Hospitals who uses the tool in her trust, said: "As a clinician with extensive experience in assessment, diagnosis and treatment of ADHD, I can honestly say that the addition of QbTest has revolutionised my clinical practice."

Globally, 1 million patients have since benefited from the QbTest and, by March 2024, 80% of all NHS trusts in England that provide ADHD services were using the tool. It has saved the NHS an estimated £55.9 million, releasing 132,652 hours of healthcare capacity. The research won an NIHR Impact Prize in 2025 - presented to early-career researcher Dr Charlotte Hall who also holds an NIHR Development and Skills Enhancement Award.

163,000 children and young people benefited

£55.9 million estimated NHS savings

132,652 hours of NHS staff time released

Personal story

ADHD affects around 1 in 20 school aged children. Jack is one of them. He took the QbTest as he was moving into Year 5, after struggling at school.

"I was getting told off quite a lot for not concentrating," Jack said. "I was just in my own world."

His mother said its objective findings helped her make sense of the diagnosis. She said: "It quantifies what you're going through with your child. A child this age should do 'this', and your child is doing 'this' - so for that reason we think your child has ADHD."

Jack is now getting the support he needs and is thriving at school.

Midwife-led research prevents stillbirths in sub-Saharan Africa

Research carried out by a team of midwife researchers across sub-Saharan Africa has reduced the number of babies lost to stillbirth across the region. Their exceptional work has changed global practice in labour care, making a lasting impact on the lives of parents and their families throughout the world.

Around 1.9 million babies worldwide were stillborn in 2021, with three-quarters occurring in sub-Saharan Africa and South Asia. The effects of stillbirths can be devastating, leading to depression, anxiety, loss of work and financial difficulties.

The NIHR Global Health Research Group on Stillbirth Prevention and Management in sub-Saharan Africa led a programme of projects on stillbirth prevention and bereavement in the region. This work was carried out in partnership with the Lugina Africa Midwives' Research Network and involved over 1,000 midwife researchers across 6 countries.

In September 2024, the team published a feasibility study on advancing care and support for women and families after stillbirth or neonatal death in Kenya and Uganda in NIHR's Global Health Research Journal.

Evidence from the research has been shared with governments across sub-Saharan Africa and has influenced large-scale change. The research has gone on to inform national strategies including the World Health Organization's (WHO) recommendations for women's care during labour.

58 low and middle income countries
with an active global health research funding award in 2024/25

Midwife researchers across sub-Saharan Africa are reducing babies lost to stillbirth across the region.

The treatment combines tablets with a type of hormone therapy.

Patients with incurable breast cancer lived around

4 months longer

without their cancer progressing, giving them precious more time with family

5,733 studies

in England were supported by the NIHR Research Delivery Network in 2024/25

Game changing drug approved for advanced breast cancer

Thousands of women in England and Wales will benefit from a new treatment for the most common type of advanced breast cancer, following its approval by the National Institute for Health and Care Excellence (NICE). The treatment combines capivasertib, a twice-daily tablet, with fulvestrant, a type of hormone therapy.

The CAPItello-291 trial to develop the treatment was supported through the NIHR Research Delivery Network (RDN) and NIHR Royal Marsden Biomedical Research Centre. It is just one of 5,733 studies supported by the RDN in 2024/25.

Capivasertib works by blocking the signals that cancer cells use to grow and divide. Results from the trial showed that patients lived around 4 months longer, on average, without their cancer progressing compared to those who received fulvestrant with a placebo, with some living for many years longer.

Approval by NICE means that thousands of NHS patients with advanced hormone receptor-positive, HER2-negative breast cancer can now receive this innovative targeted treatment to help slow the progression of their condition, delaying the need for hospital treatments such as chemotherapy and enabling people to manage reduced symptoms at home.

Personal story

"It has gifted me with almost 4 years of stable disease"

Linda from Milton Keynes joined the CAPItello-291 trial after receiving the news that her cancer had returned and spread to her bones and chest wall.

"The treatment is far less debilitating than chemotherapy. So far it has not only gifted me with almost 4 years of stable disease but also allowed me to enjoy a good quality of life during treatment."

Preventing unnecessary hospital admissions through virtual wards and frailty tool

Virtual wards bring specialist teams to a patient's home, rather than taking the patient to hospital for inpatient care. In May 2024, the NHS announced plans to increase the use of virtual wards. This followed NIHR-funded research which showed they can help deliver better and less expensive care.

A study carried out at the University of Oxford, funded by the NIHR Health and Social Care Delivery Research Programme, looked at the use of virtual wards for groups of older, frail people. It found that they offered a safe alternative to inpatient care, and that patients preferred being treated in their own homes.

The estimated cost savings from this preventative approach are approximately £2,265 per patient, which would generate an estimated economic benefit of £4.8 billion over a 10-year period, supporting the shift from hospital to community.

£2,265 in estimated savings per patient through virtual wards

The eFI2 approach will provide a new way to tackle frailty.

A new NIHR-funded tool that enables GPs to predict older patients' risks of living with frailty was released in December 2024 and is now available in 60% of GP practices. The electronic Frailty Index 2 (eFI2) tool helps doctors prevent falls, reduce medications and limit hospital visits.

It was funded by the NIHR Applied Research Collaboration (ARC) Yorkshire & Humber and NIHR ARC North Thames. Professor Andrew Clegg, who led the study, is funded by an NIHR Research Professorship award and the NIHR Leeds Biomedical Research Centre.

The eFI2 approach will provide the NHS with a new and improved way to tackle frailty, which costs the NHS an estimated £6 billion every year.

Stand out social care study presented to House of Lords is a UK first

The BATH-OUT-2 study, funded by the NIHR School for Social Care Research, is the first randomised control trial of housing adaptations in the UK.

The findings were presented at the House of Lords in January 2025, providing clear and compelling evidence on the benefits of home adaptations and early intervention, helping people to live independently, safely and with dignity in their own home.

People may be eligible for major adaptations to support bathing – such as removing the bath and replacing it with a level-access shower. However, until recently, there was no robust evidence of the effect of bathing adaptations on health and social care outcomes.

The research team - a collaboration between Nottingham City Council, Foundations (the National Body for Home Improvement Agencies) and the universities of Newcastle, York, Northumbria and Nottingham - worked together with a dedicated patient and public involvement (PPI) group to co-design the BATH-OUT-2 study, putting people with experience of bathing adaptations at its heart.

PPI members, with lived experience of social care and bathing adaptations, acted as equal partners in the research team. Their input shaped study materials, improved communication with participants and helped identify solutions to recruitment challenges during the pandemic. This collaborative approach strengthened the study's relevance and impact on real-world social care outcomes.

The study provides the strongest evidence to date that quick access to bathing adaptations improves physical and mental wellbeing. Discussions are already underway between councils, industry representatives and health and care professionals to turn this evidence into further action, making prevention a priority.

Participants reported the following improvements 4 weeks after receipt of the adaptation, compared to those who did not receive it:

- Improved physical and mental wellbeing
- A reduction in falls as well as lower fear of falling
- Increased independence when carrying out daily tasks
- Increased ability to bathe themselves

Faster installations were also more cost effective, with savings in health and social care costs

Continued support for vital social care research

We gave a

£31 million

boost to adult social care research in England with the announcement of the fourth phase of funding to the NIHR School for Social Care Research.
(December 2024)

Home adaptations helps people live independently in their own homes.

Our research is focused on making a difference to people's lives.

INCLUSION

NIHR is funded by the public, for the public, working with everyone in our society.

Good research must include people from the diverse populations of the UK and include women, children, older people and those with multiple long-term conditions so that new treatments and services are developed for the benefit of all. By listening to the nation's diverse communities, our research stays focused on the health and care outcomes that make the biggest differences to everyone's lives.

This year, we have made inclusion a condition of NIHR funding within the UK and brought research into a diverse range of communities by working with clinicians, schools, local authorities and charity partners to enable research in a range of places including hospitals, GP practices and at home. Research is taking place in more care homes than ever before, with 340 care homes recruiting participants to RDN supported studies in 2024/25, 62% more than the previous year.

We have also launched our new Guiding Principles for Community Engagement and Involvement in Global Health Research, putting stronger guidance in place so that voices of people from across diverse global communities are heard at every stage of the research cycle.

340 care homes recruited participants and 223 NHS trusts recruited participants to RDN supported studies

Inclusion now a condition of NIHR funding for the first time

Inclusion is now a condition of NIHR funding and must be built into all stages of the research lifecycle. Since November 2024, all new research funding applicants to the NIHR have had to demonstrate how their work will address existing inequalities in health and care.

To ensure that research is intentionally designed, conducted and communicated in a way that reaches everyone, costed inclusion plans must be included in new NIHR research studies and researchers will be held to account for delivering against them.

Embedding research inclusion is also one of our new Strategic Commitments for Public Partnerships for 2025 to 2030 which define our ambition to be diverse, inclusive and impactful in how we work with people and communities.

The Strategic Commitments build on our experience to date, reflect widespread engagement and respond to the changing environment of health and care research, including the growing demand for approaches which value and harness lived expertise and experiences within diverse communities.

Reflecting on the importance of representation and inclusion in research, NIHR CEO Professor Lucy Chappell said:

"We want to shift the dial on inclusion because it results in good science and generates knowledge that has the wider impact of benefiting everyone in society."

1,049,635 participants

took part in 4,561 studies delivered by the NHS and social care sector and supported by the NIHR

Personal story

Rizwan Rehman is a Research Champion for the NIHR Yorkshire and Humber Regional Research Delivery Network. He is passionate about ensuring representation for ethnic minority communities in his home city of Bradford.

"Quite often our diverse communities are forgotten or assumptions are made about us that create more inequality and misrepresentation of community needs and aspirations," Rizwan said.

"I am keen to be able to share my knowledge of communities, and to help spread the word about health and care research to the public in a language and format that they understand."

GPs bringing research closer to communities

Studies supported by the NIHR Research Delivery Network (RDN) take place in a variety of settings, including hospitals, GP practices and at home. In 2024/25 many GP practices took part in research, bringing research participation to a greater number of people and nearer to their doorstep.

In 2024/25 a total of 108,415 participants in England were recruited to RDN supported research via GP practices, for conditions including cancer, cardiovascular disease and infections. Bringing research closer to communities makes it more convenient for patients to take part in trials and increases the diversity of participants who could potentially benefit from innovations in healthcare, moving care from hospitals into local, familiar environments. It also helps attract commercial clinical research to the UK, bringing investment into the NHS.

108,415 participants
in England were recruited to RDN supported research via GP practices

Personal story

Wendy wanted to take part in a clinical trial investigating the use of statins at her GP practice because her overall health would be assessed.

"It was explained to me that it was a bit like an MOT test," she said. "When you get to my age that's quite useful to know, so you're not just providing something for research, but you're also benefiting yourself."

Research into safeguarding and homelessness presented to government

Researchers who carried out a study into adult safeguarding and homelessness presented their findings to the Ministry of Housing, Communities and Local Government in February 2025.

The study was funded by the NIHR School for Social Care Research and led by King's College London. It found that adult safeguarding needs to be strengthened to address self-neglect in people who experience 'multiple exclusion homelessness' (MEH) as a result of complex overlapping factors, including mental and physical ill health and substance use.

Findings showed that negative experiences of services and stigma contribute to service mistrust by people who experience MEH and deter them from seeking or accepting help from the local council.

The research is now informing a new cross-government strategy to end homelessness, building an evidence base to better understand the people that become and remain homeless, tackle health and social care inequalities and improve early intervention approaches to help them.

The prostate cancer screening trial is the biggest for 20 years.

Prostate screening trial recruiting more Black men

The biggest prostate cancer screening trial in 20 years launched in May 2024, co-funded by Prostate Cancer UK and the NIHR.

More than 12,000 men die of prostate cancer every year. The TRANSFORM trial aims to find the safest, most accurate and most cost-effective way to screen men for prostate cancer. The government, through the NIHR, is investing £16 million into the £42 million trial, through the Health Technology Assessment Programme.

One in 4 Black men will develop prostate cancer – double the risk of other men. Despite this, previous trials have not included enough Black men to adequately research screening for them. At least 1 in 10 men invited to take part in the trial are Black, to improve their representation in the research and ultimately reduce their risk of dying from the disease.

The trial has the potential to cut deaths from prostate cancer by 40% through future use of advanced screening methods.

The TRANSFORM trial has the potential to cut deaths from prostate cancer by 40% through future use of advanced screening methods.

1 in 4 Black men will develop prostate cancer, double the risk of other men

The study helped families access relevant community support when their child is in hospital.

Social prescribing scheme supporting children with neurodisabilities extended due to NIHR evaluation

A social prescribing scheme for children with neurodisabilities and their families is being extended, following an evaluation by the NIHR that proved its positive impact.

The scheme was offered at the Great North Children's Hospital in Newcastle to families whose children had conditions including cerebral palsy and epilepsy. Link workers spent time understanding their needs, from financial pressures to mental wellbeing, and helped them to access relevant community support when their child left hospital.

An evaluation, funded by the NIHR Applied Research Collaboration North East and North Cumbria, found that these families felt less stressed and better connected to helpful local services. For every £1 spent delivering the programme, it had a return on investment to families of £2.75, for example through support to maintain good housing conditions.

"Starting this kind of non-medical support for children with neurodisability and their families during their hospital admission could help reduce length of stay, reduce readmission rates, improve outcomes for patients and families, and allow specialist staff to redirect support to link workers, improving efficiency and reducing pressures on hospital staff."

Dr Anna Basu, Lead researcher, Clinical Senior Lecturer and Honorary Consultant Paediatric Neurologist at Newcastle University

National toothbrushing programme rolled out to tackle tooth decay in young children

Up to 600,000 children living in the most deprived areas of England will benefit from supervised toothbrushing to tackle tooth decay, in a programme driven by evidence from NIHR research.

In March 2025, the government announced an £11 million investment in the programme for 3 to 5-year-olds in nurseries and primary schools as part of its Plan for Change, to give children the best start in life and prevent ill health. The funding was announced following extensive work by researchers in NIHR's BRUSH project to inform the implementation of supervised toothbrushing programmes and clubs.

The BRUSH project, part of the national cross-ARC Children's Health and Maternity Programme and led by the NIHR Applied Research Collaborations in South West Peninsula and Yorkshire and Humber, helped researchers to understand how best to implement supervised toothbrushing programmes to increase their uptake and success in the longer term.

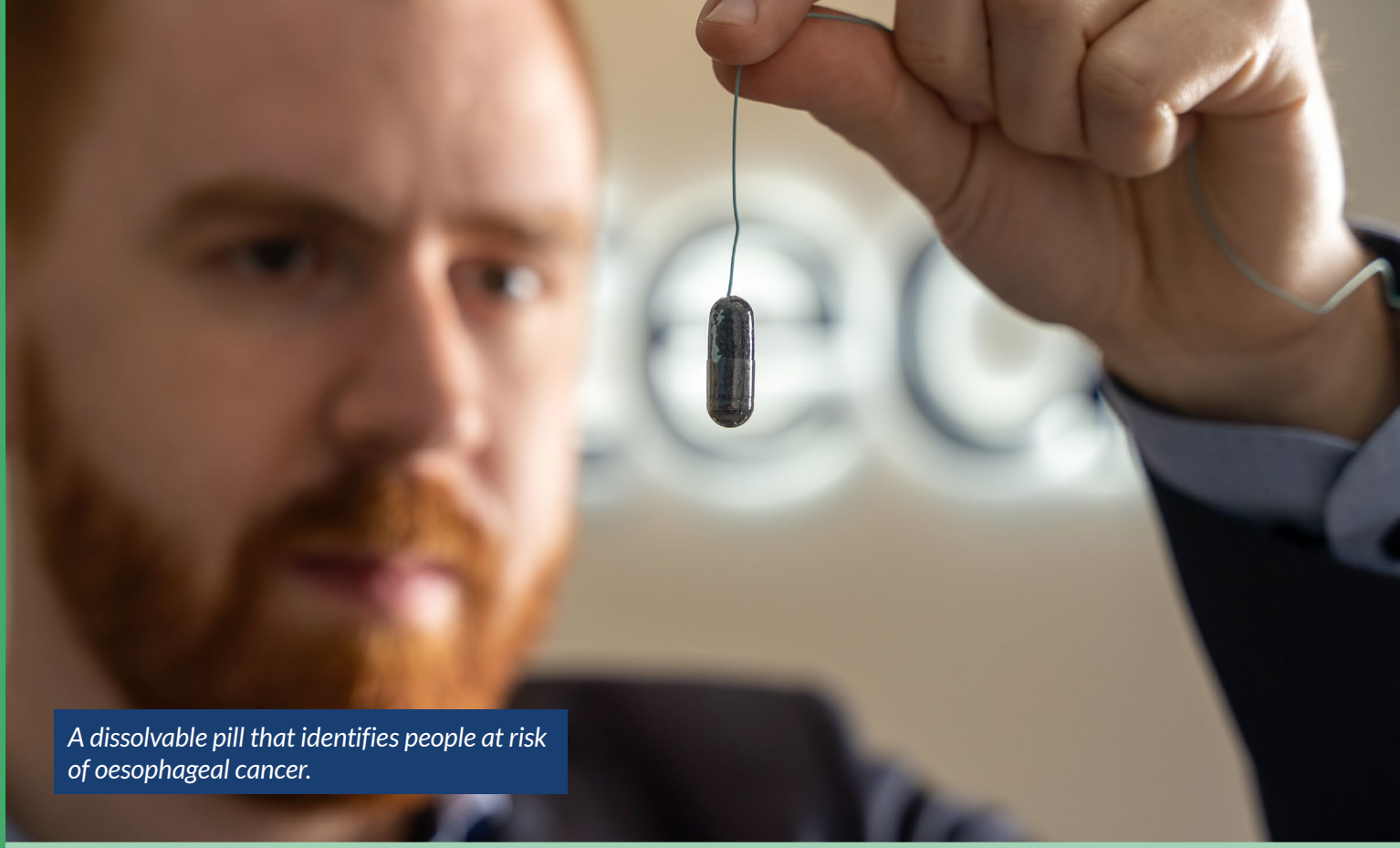
Up to 50% of children in deprived areas of the country suffer from tooth decay. It causes pain, affects speech and school attendance, and is the most common reason why young children are admitted to hospital. It's expected that for every £1 spent on supervised toothbrushing, £3 will be saved in treatment costs.

"This work shows the value of our investment in the collective expertise of NIHR infrastructure. Researchers working with parents, children, schools and local and national government have delivered crucial evidence and tools that will bring genuine improvements to the health of the nation - and save the NHS money," said Professor Marian Knight, Scientific Director for NIHR Infrastructure.

The international company Colgate-Palmolive is supporting this new government scheme, donating more than 23 million toothbrushes and tubes of toothpaste over the next 5 years, as well as providing educational materials and a children's oral health campaign.

£50 million is spent on treatment for young children's tooth decay per year by the NHS

The BRUSH project pushes for supervised toothbrushing clubs across the UK.



A dissolvable pill that identifies people at risk of oesophageal cancer.

INNOVATION

NIHR powers the UK's world-leading life science and innovation sector.

Health and care innovations have the potential to save lives, reduce costs for the NHS and care services and bring billions of pounds of investment into the UK economy. From pioneering new genetic therapies and using AI to help detect breast cancer, we are putting groundbreaking technologies into the hands of health and care professionals and building knowledge and capacity across the country to transform lives.

Our expertise and infrastructure help turn cutting-edge ideas into improved treatments and services for patients, and fuels our reputation as a world-leading destination for clinical research. Through our Vaccine Innovation Pathway, we are driving quicker and more efficient commercial clinical research. In England we continue to recruit more first participants in global life sciences trials.

In 2024/25, 16 people in England were the first participants in global trials and 37 were the first participants in European trials, demonstrating the UK's agile and well-supported clinical trial system.

This success is underpinned by NIHR's world-class training and career support for today's researchers. We support researchers at every stage of their career, fostering and building a skilled and innovative research workforce. This year, we have supported 3,238 researchers with career development awards, paving the way for future breakthroughs.

3,238
researchers with career development awards

‘Capsule sponge’ used in landmark oesophageal cancer screening trial

A screening trial for a quick, accurate and low-cost test to detect oesophageal cancer was launched in November 2024.

Patients who regularly take heartburn medication are being invited to take part in the BEST4 trial. They swallow a small pill attached to a thread, which dissolves in the stomach to release a sponge the size of a 50p coin. The sponge collects cells from the oesophagus as it is gently pulled out.

The test takes 10 minutes and can be done by a nurse, making it faster and less expensive than endoscopy. A previous trial, BEST3, which was supported by the NIHR, showed the sponge picks up 10 times more cases of Barrett’s oesophagus – a precursor condition to cancer – than endoscopy.

Screening vans will be rolled out across England as part of the trial, to bring this research closer into communities and reduce lives lost to cancer. It is co-funded by NIHR’s Health Technology Assessment Programme and Cancer Research UK and led by Cambridge University Hospitals NHS Foundation Trust and the University of Cambridge. This study received support from the NIHR Cambridge Biomedical Research Centre, NIHR Cambridge Clinical Research Facility and NIHR East of England Regional Research Delivery Network. The team won an NIHR Impact Prize in 2025 for their work.

Around **8,000** people die from oesophageal cancer each year

£127 saved per procedure compared with endoscopy

“The NIHR provided highly valued funding to expand my research programme and generated crucial evidence to bring capsule sponge testing to more patients. It also created greater visibility within my own organisation, which was essential to advance my career and pursue opportunities for leadership.”

Professor Rebecca Fitzgerald, NIHR Senior Investigator

Personal story

Fred, 78, said being invited to take part in the earlier BEST3 trial through his GP surgery was “the luckiest day of my life.”

During the trial, the grandfather of 12 from West Devon was diagnosed with oesophageal cancer. He described the news as “like being hit by a sledgehammer.”

Because the tumour had been caught early, it was successfully removed with surgery. Fred said: “I absolutely recommend that people get involved with this sort of research. The BEST3 research, I believe, saved my life.”

World-leading AI trial to detect breast cancer launched

Through NIHR research, cutting-edge AI technology is being trialled to help radiologists detect breast cancer earlier. Nearly 700,000 women will take part in the landmark NIHR-funded EDITH trial, which was launched in February 2025.

Breast cancer is the most common type of cancer in women, with around 56,000 diagnosed with the disease every year. Currently, women between the ages of 50 and 71 are invited to screening every 3 years. This equates to around 2.1 million breast cancer screenings annually and helps prevent around 1,300 deaths.

Thirty testing sites will be enhanced with the latest digital AI technologies as part of the trial, enabling women already booked in for routine NHS screening to take part.

The AI will be used to help radiologists identify changes in breast tissue that show possible signs of cancer.

If the trial is successful, it could free up hundreds of radiologists and other specialists to see more patients. The trial marks a significant step in the shift from analogue to digital, using cutting-edge technology to speed up treatment and reduce waiting lists.

"This will be a major step forward in improving the early detection of breast cancer. By assessing the accuracy of AI systems with different women and across a range of devices, we'll be able to understand the potential benefits and harms of using AI in screening, ensuring equity, effectiveness and value for money."

Sian Taylor-Philips
NIHR Research Professor and Professor of Population Health at Warwick University

UK-Australia partnership drives innovation in prevention, diagnosis and treatment

The NIHR launched a new partnership with Australia in October 2024 to address areas of unmet clinical need.

The £15.5 million partnership with the Australian Government's medical research funders - the Medical Research Futures Fund and National Health and Medical Research Council - will fund innovative platform trials to improve the lives of people with serious health conditions.

The international collaboration harnesses the UK and Australia's strengths, resources and expertise to support people with complex health and social care challenges resulting from a range of conditions including stroke, brain cancer and obesity. Platform trials use innovative methodologies which test more than one drug or treatment simultaneously, improving the speed and efficiency of research.

This is one of our growing number of international partnerships. Others include £8 million bilateral funding for joint UK-Swiss clinical trials announced in December 2024, and a £2.8 million partnership with the Republic of Korea to improve the speed, efficiency and productivity of clinical trials.

Pioneering genetic therapies provided to children

The NIHR has supported 2 pioneering genetic therapies which have changed many children's lives over the past year.

A baby girl who was born deaf can now hear unaided after a world-first gene therapy trial supported by the NIHR Cambridge Clinical Research Facility and NIHR Cambridge Biomedical Research Centre.

Opal from Oxfordshire has auditory neuropathy, a condition which disrupts nerve impulses travelling from the inner ear to the brain. This can be caused by a fault in the OTOF gene. The new therapy delivers a working copy of the gene via a neutralised virus, injected into the inner ear under general anaesthetic.

Opal was just under a year old when she became the first patient to be treated in the trial, at Addenbrooke's Hospital in Cambridge. Twenty-four weeks later, she had close to normal hearing in her treated ear. At 18 months old, Opal could respond to her parents' voices and say "Dada" and "bye-bye."

While we recognise that with the right support from the start, deafness should never be a barrier to happiness or fulfilment, this research supports families to make informed choices about medical technologies, so that they can give their children the best possible start in life.

In another trial, children with visual impairments gained improvements in sight following treatment with a new genetic medicine.

The children had been legally certified as blind from birth due to a rare genetic deficiency that affects the AIPL1 gene. The new procedure involves injecting healthy copies of the gene into the retina through keyhole surgery. The children received the therapy in only one eye to mitigate potential safety issues. All 4 saw remarkable improvements in their treated eye over the following 3 to 4 years.

The work was funded through an NIHR Research Professorship, awarded to Professor of Retinal Studies and Consultant Retinal Surgeon James Bainbridge, alongside gene therapy company Meira GTx and Moorfields Eye Charity, and carried out through Moorfields Eye Hospital and the University College London Institute of Ophthalmology.

Jace was one of the children who benefited. His father Brendan said: "We are so grateful for this opportunity, and for the care he's received… It has been a phenomenally positive experience, and the results are nothing short of spectacular."

TRANSFORMING UK CLINICAL RESEARCH DELIVERY

Clinical trials contribute £7.4 billion annually to the UK economy, supporting 65,000 jobs and generating £1.2 billion of revenue for the NHS. Throughout the past year, we have worked to further maximize this value through initiatives to accelerate clinical trial delivery and embed research culture across health and social care. By creating a faster, more efficient, accessible clinical research system, we're making sure the UK remains at the forefront of scientific and medical discovery, so that cutting-edge treatments are available sooner, in more places, for more people across the UK.

UK Vaccine Innovation Pathway

Launched in 2023, the UK Vaccine Innovation Pathway (VIP) is transforming the set-up and delivery of vaccines and advanced therapeutic studies. It has proven the UK's abilities to combine speed, scale and inclusion across clinical research delivery, making the UK a go-to destination for the life sciences industry. Its success has led to the creation of a new network of 15 Commercial Research Delivery Centres to bring faster and more innovative treatments to improve the health and wealth of the nation.

The VIP brings together expertise from NIHR infrastructure, the NHS, devolved administrations, regulators and industry partners to speed up decision making and reduce red tape. In the last year it has transformed the delivery of complex global trials, cutting study set-up times, using new recruitment methods and improving research inclusion.

In 2024/25, the VIP delivered the world's first mRNA norovirus vaccine trials in the UK, reducing set-up time from 9 months to just 70 days. The use of research vans has also widened access to research, easing pressure on hospital clinics. These innovations support the government's 10 Year Health Plan, benefiting patients and supporting economic growth.

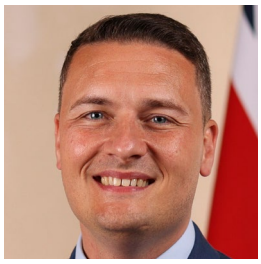
Research vans reaching people in rural areas

Research vans are being used by Royal Cornwall Hospitals NHS Trust and Layton Medical Centre, a GP practice in Blackpool, to bring the Nova 301 trial closer to people's homes. The vehicles are equipped with a high quality clinical space, a freezer to store biological samples and a tabletop centrifuge.

Credit: EMS Healthcare

Trial participant Gillian, who lives in Cornwall, said: "I was quite amazed when the unit drove up outside the house. It obviously saved me a lot of time. I think it's a good idea to trial and see if we can increase participation in clinical research."

Trials underway for world's first mRNA norovirus vaccine



"Not only is this a huge vote of confidence in the UK's life sciences sector, but a successful vaccine will help shift our health system away from sickness and towards prevention - reducing pressure on the NHS and keeping people well during the colder months."

Wes Streeting MP, Secretary of State for Health and Social Care

The NIHR is delivering the UK's first clinical trial to develop a messenger RNA (mRNA) vaccine for the vomiting bug. Sponsored by Moderna, the trial's set-up and delivery has been supported by the UK VIP.

Norovirus is a highly contagious stomach bug that puts the NHS under huge strain and costs more than £100 million annually. It also greatly disrupts schools, care homes and hospitals.

Over 3,000 people are taking part in the Nova 301 trial, which launched in October 2024, to evaluate the efficacy and safety of the mRNA-1403 vaccine. The UK's partnership with Moderna has been instrumental in implementing the UK VIP to transform vaccine clinical trial delivery.

"As part of Moderna's collaboration with the UK government, we have been working with the NIHR to support the delivery of our vaccine clinical trials in a range of settings. This collaborative approach helped achieve accelerated study set-up times on our recent trials and has enabled UK sites to initiate and conduct these studies in line with international timelines."

Dan Bamford, Director, UK Clinical Trial Partnerships, Moderna

New immunotherapies target skin and lung cancers

The VIP is playing a crucial role in new trials for cancer immunotherapies, bringing data and expertise to optimise study set-up and recruitment to help reduce lives lost to the biggest killers.

A trial of the world's first mRNA immunotherapy for melanoma, the most serious form of skin cancer, began in April 2024. It uses DNA sequencing and AI to build therapies for individual tumours. The technology was developed by Moderna and Merck Sharp and Dohme. It aims to prevent skin cancer from recurring in patients who have had high-risk tumours removed.

There are around 17,000 new cases of melanoma in the UK every year, making it the fifth most common form of cancer. Steve from Stevenage was diagnosed with a stage II melanoma which was removed last year. The 52-year-old is taking part in the new trial. "This is my best chance at stopping the cancer in its tracks," he said.

In a similar trial, a lung cancer patient was the first to receive an mRNA vaccine in August 2024. The vaccine was made by biotechnology firm BioNTech. It uses mRNA to present common tumour markers to the patient's immune system. This helps the immune system recognise and fight cancer cells and reduces the risk of toxicity to healthy cells.

Both trials are being led by University College London Hospital, which receives NIHR support through its Biomedical Research Centre and Clinical Research Facility.

500% increase in VIP cancer vaccine trials recruitment

We have adopted 30 cancer vaccine trials into our portfolio, with 1,948 patients recruited on to trials taking place at 85 sites across the UK. Recruitment this year increased 5 fold from the previous year, from 281 in 2023/24 to 1,430 in 2024/25.

NIHR Academy Members' Conference 2024.

INVESTMENT

NIHR research saves money, attracts investment, and powers economic growth.

NIHR research provides a huge economic return to society. For every £1 invested in NIHR research, over £13 of economic benefit is returned to the nation. We fund over 10,000 frontline research delivery staff across the NHS and wider health and care system and generate vital income for the NHS.

By investing in our research workforce and widening access to research careers, we are building the UK's research capacity and capability and improving outcomes for patients and the public. Through our partnerships with life sciences companies, we are leading innovation across health and care to drive economic growth for the UK.

From funding pioneering new organ transplantation technology, to setting up new centres that will enhance the speed and efficiency of commercial clinical research, our research boosts the economy by helping people to stay healthy and productive for longer and making the UK a global leader for clinical trials.

£13 returned
to the UK economy for every £1 invested

£1.2 billion
investment leveraged for the NHS from commercial studies supported by the NIHR

15 new centres unlock new research opportunities for regions across the UK

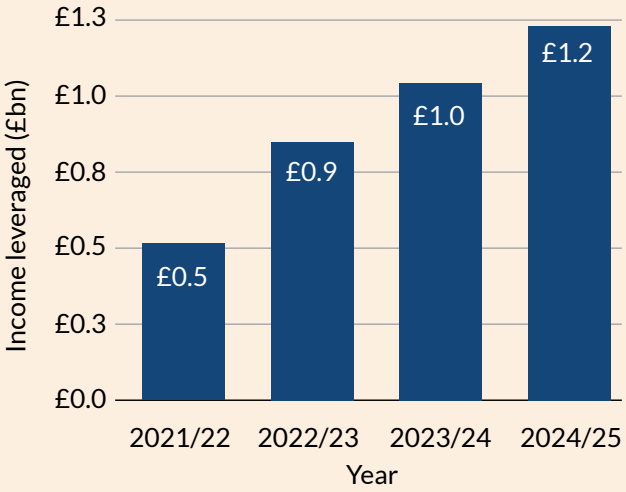
The NIHR is establishing 15 new Commercial Research Delivery Centres (CRDCs) across England, through a joint public-private £72 million investment, supporting vital economic growth for the UK.

The centres will support rapid set-up of commercial studies across the UK, giving more patients access to cutting-edge treatments, benefiting both the health and wealth of the nation. They will also make it easier for people across the country to take part in research by shifting research from hospitals into the community and primary care settings. The centres will make it quicker and easier for companies to trial more of their products in the UK, turbocharging research and making the UK a world-leading destination for clinical research.

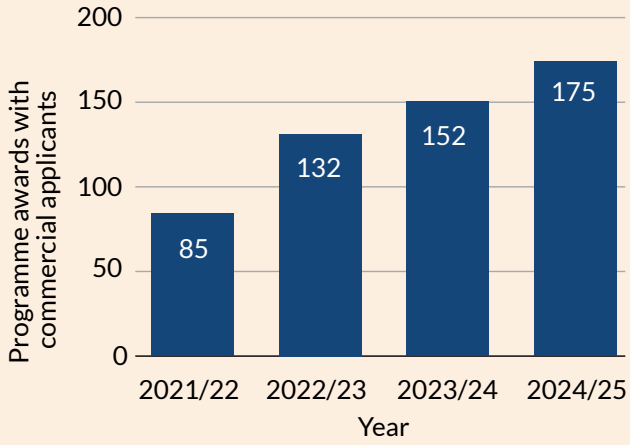
The CRDCs in England are part of a network of CRDCs across the UK. There will also be 4 in Scotland, and a one nation approach in Wales and Northern Ireland, where centres will be managed centrally rather than via a host institution.

The investment, which will take place over 7 years from April 2025, is part of the £400 million Voluntary Scheme for Branded Medicine Pricing, Access and Growth (VPAG) Investment Programme. This world-first partnership between the UK government and the pharmaceutical industry will bolster the UK as a powerhouse for life sciences and drive economic growth.

Estimated NHS income leveraged from recruitment into commercial studies supported by our RDN.



Number of new NIHR-funded or co-funded research programme awards with at least 1 commercial applicant.



"Boosting the NHS's capacity to deliver commercial clinical research through these new Commercial Research Delivery Centres will support recruitment across all communities and bring innovative treatments to patients. The effects of these centres will be felt right across the four nations, bringing investment into the UK's life sciences sector."

Professor Lucy Chappell, Chief Scientific Adviser to the Department of Health and Social Care and Chief Executive of NIHR

Spinout company pioneering new organ transplantation technology attracts further financial investment

OrganOx, a spinout company developing a world-leading device to increase the success of organ transplants, has raised $142 million (£104 million) in equity financing over 2024/25. This follows several Invention for Innovation NIHR-funded studies at the University of Oxford to evaluate the technology - showing benefits including an increase in the functional utilisation of donor livers. The funding will enable OrganOx to expand its customer base and workforce, driving both economic growth and improved patient outcomes, including cutting waiting times for care.

OrganOx has developed the world's first normothermic (normal body temperature) organ preservation device which can keep donor livers viable for up to 24 hours before transplantation. The device works by creating an environment that resembles the body by providing blood, oxygen and nutrition to the donated organ at normal body temperature. The technology has been shown to be more effective than traditional cold preservation methods, it has been used in over 5,000 liver transplants to date and is now being tested for use with kidneys.

The award-winning company was spun out of the University of Oxford and has developed its groundbreaking technology with support from NIHR's Biomedical Research Centres. Ten spin-out companies received consent to use NIHR's funded intellectual property in 2024/25 (up from 6 in 2023/24).

£104 million
raised in equity financing

GP centre increases commercial research following sign up to NCVR

Cripps Health Centre in Nottingham has been boosted by an increase in commercial research after signing up to the National Contract Value Review (NCVR) process. The NIHR has been a key partner in the development of the NCVR - a UK-wide scheme that standardises commercial costing and contracts.

NCVR removes the complexity and time spent calculating costs to carry out trials. It enables commercial research studies to be set up more quickly and efficiently, saving time and resources for the NHS and study sponsors, and supporting a move from analogue to digital ways of working. By 2024, NCVR had reduced commercial study set-up times by 39% (from 488 to 300 days) compared with pre-pandemic levels.

Since signing up, Cripps Health Centre has 18 commercial research projects either in set-up or open to recruitment. This equates to around £1 million in income for the NHS over the next couple of years. Through NCVR and wider work with the UK Clinical Research Delivery Programme, NIHR strives to improve support for research delivery, strategically aligning with government priorities to bring more commercial research to the UK and reduce study set-up times. In 2024/25, more than 80% of studies remained on track to hit their recruitment target by the planned study closing date.

NIHR Academy Members' Conference 2024.

Investing in our diverse workforce and boosting research capacity across professions

Last year, the NIHR continued to open opportunities for health and social care research to disciplines and specialisms which have previously been under-represented in research.

In July 2024, we announced a new role to develop national initiatives to provide research career opportunities for Allied Health Professionals (AHPs). AHPs include speech and language therapists, dieticians, occupational therapists, osteopaths, paramedics and radiographers. Dr Lisa Ledger was appointed the NIHR Assistant Director of AHPs, to provide leadership for those involved in NIHR research.

We also appointed Professor G.J. Melendez-Torres to a newly created position of NIHR Academy Associate Dean for Researcher Inclusion. The role will support underrepresented groups and shape the future direction of the Academy's research training and career development.

In August, we announced £33.2 million in funding for universities across England to provide research training and engagement programmes for students and early career professionals. It is part of the new INSIGHT: Inspiring Students into Research scheme which will provide more than 300 masters places per year for students and recent graduates in nursing, midwifery, social work and AHPs.

Our Associate Principal Investigators (PIs) Scheme has also gone from strength to strength this year. It has provided health and care professionals with 6 months of hands-on research experience under the mentorship of experienced PIs. The scheme equips professionals with the skills to deliver faster trial set-ups, investing in a research active workforce that will help build research capacity and capability across the UK.

To date, 40 different companies have now placed more than 70 commercial studies in the scheme, equating to 117 Associate PIs, widening access to research career development and making the UK a more attractive destination for global trials.

£33.2 million
in training funding for universities across England

‘First of its kind’ dementia study could act as blueprint for future research

A major new research collaboration between biopharma company GSK, who developed the new Shingrix vaccine, the UK Dementia Research Institute (UK DRI) and Health Data Research UK (HDR UK) was announced in March 2025.

The EPI-ZOSTER-110 study will use population-level electronic health data from the NHS to explore the association between GSK’s shingles vaccine and a reduced risk of dementia. The innovative trial could serve as a blueprint for population-level health data research, attracting future commercial investment and driving economic growth for the UK.

In November 2024, NIHR provided £20 million funding to UK DRI to develop projects, such as EPI-ZOSTER-110, to prevent and diagnose dementia earlier. We have also funded £15 million to support HDR UK’s work to accelerate access to health data to improve treatment and care.

The latest trial builds on the findings of an NIHR study of more than 200,000 people, which found that the shingles vaccine ‘Shingrix’ is more protective against dementia than the previous shingles vaccine ‘Zostavax’. One in 3 people born in the UK today will develop dementia in their lifetime and it is one of the main causes of disability later in life.

The initial study was carried out by the NIHR Oxford Health Biomedical Research Centre and the University of Oxford, exploring growing evidence that vaccines against the herpes zoster virus, which causes shingles, could also reduce dementia risk. It found at least a 17% reduction in dementia diagnoses in the 6 years after Shingrix was administered, compared to Zostavax. The findings were published in Nature Medicine in July 2024.

17%
reduction in dementia diagnoses

“The findings are intriguing and encouraging. Anything that might reduce the risk of dementia is to be welcomed, given the large and increasing number of people affected by it.”

Paul Harrison, Professor of Psychiatry, who supervised the study at the University of Oxford.

Credit: University of Oxford / Stuart Gillespie

Patients with neurological disorders could be supported by augmented reality glasses.

£10 million investment boost for start-up behind augmented reality glasses for people with Parkinson's

Strolll, a digital therapeutics start-up which uses augmented reality (AR) glasses to provide rehabilitation for people with neurological disorders such as Parkinson's, has raised £10 million in private equity funding.

This new investment follows a £2.4 million Invention for Innovation (i4i) NIHR-funded clinical trial with the University of Leeds, University of York and 4 NHS trusts, which began in July 2024.

The new investment will create jobs and allow further product development at the Stafford-based company. It uses pioneering software for commercially available AR glasses to help patients living with neurological disorders maintain mobility, reduce falls and live more independently, supporting the shift from analogue to digital and moving rehabilitation services from hospital into the community.

Between 2020/21 and 2024/25, 34 products supported by NIHR i4i awards received regulatory approval in the EU, UK or USA, 5 of which were in 2024/25.

FINANCIAL SUMMARY

In 2024/25, the Department of Health and Social Care's spend through NIHR increased by around 25% compared with the previous year. This enabled additional investment across the NIHR portfolio including in Research Training and Career Development, including additional spend helping more health and care professionals (HCPs) become skilled researchers and research leaders.

Investment in infrastructure also increased in 2024/25 with funding for capital equipment for research during the year. There was an increase in spend on public health research, including investment in new Health Determinants Research Collaborations (HDRCs). Investment in research delivery infrastructure also increased in 2024/25.

Research delivery infrastructure	Spend (£m)
Clinical Research Facilities	33.30
Research Delivery Network[1]	413.99
Patient Recruitment Centres	2.00
Research delivery infrastructure total (£m)	449.29

Other NIHR infrastructure	Spend (£m)
Applied Research Collaborations	46.45
Biomedical Research Centres	179.24
Excess treatment cost funding (part-funded by NHS England)	26.27
Experimental Cancer Medicine Centres	5.02
Capital Equipment call	77.17
HealthTech Research Centres[2]	8.06
Patient Safety Research Collaborations[3]	5.00
Research Support Service[4]	13.24
NIHR Bioresource and other infrastructure	15.83
Other NIHR infrastructure total (£m)	376.27

FINANCIAL SUMMARY

Research funding	Spend (£m)
AI (including AI i4i and AI Multiple long-term conditions call)	12.59
Efficacy and Mechanism Evaluation	30.78
Evidence Synthesis Programme	19.69
Health Protection Research Units	17.76
Health and Social Care Delivery Research	47.07
Health Technology Assessment – Pharmaceuticals and Gene Therapy	48.67
Health Technology Assessment – Other Therapeutic Interventions	35.53
Health Technology Assessment – Prevention, Screening, Diagnosis	7.24
Health Technology Assessment – Social Care	1.74
Health Technology Assessment – Surgery and Medical Devices	27.49
Invention for Innovation	35.42
NHS Blood and Transplant Units	3.43
NIHR Innovation Observatory	5.41
Policy Research Programme	46.68
Programme Grants (PG)	45.30
Programme Development Grants for Applied Research	6.08
Public Health Research: Health Determinants Research Collaboration (HDRC)	22.76
Public Health Research	31.77
Research Capability Funding	49.25
Research for Patient Benefit	20.13
Research for Social Care	4.48
Schools: Primary Care, Public Health, and Social Care Research	22.07
National Research Collaboration Programme (NRCP) and other programmes	15.28
COVID-19	
COVID-19 studies (including those funded by the Vaccines Task Force and delivered through UKRI)	7.60
Contributions to other research programmes	
UK contribution to the Coalition for Epidemic Preparedness Innovations (non-ODA]	20.00
Contributions to NIHR from Devolved Administrations and UKRI, net of NIHR contributions to NIHR/UKRI collaborative research programmes	6.00
Research programmes total (£m)	578.21

FINANCIAL SUMMARY

Research training and career development	Spend (£m)
Academic Clinical Fellows - Dentistry	2.94
Academic Clinical Fellows - Other medical specialties	24.16
Academic Clinical Fellows - Physicians	23.74
Academic Clinical Fellows - Surgeons	9.12
Clinical Academic Research Partnerships (via UKRI)	0.78
Doctoral Fellowships	29.61
Health and Care Professional Internship Programme	2.02
Integrated Academic Training - Clinical Lectureships	36.02
Postdoctoral Fellowships	31.30
Predoctoral Fellowships	10.31
Pre-Application Support Fund	3.99
Research Professorships	10.42
Senior Investigators	4.17
Senior Research Leader Programme for Nurses and Midwives	2.21
School for Primary Care Research & School for Social Care Research - capacity building	3.37
Undergraduate Internship Programme	10.50
Broader Capacity Building	2.54
Short Term and bridging awards	5.20
Research Training and Career Development total (£m)	**212.40**

Digital and data	Spend (£m)
Information systems that enable research	17.32
Knowledge services and data	4.26
Digital and data total (£m)	**21.58**

Total NIHR spend excluding Official Development Assistance	**1,637.76 (£m)**

FINANCIAL SUMMARY

Official Development Assistance (ODA)	Spend (£m)
European and Developing Countries Clinical Trials Partnership	**20.65**
Global Alliance for Chronic Disease (Medical Research Council Partnership)	**1.69**
Joint Global Health Trials Initiative (Medical Research Council, Wellcome and FCDO Partnership)	**0.40**
NIHR Global Health Policy and Systems Research	**11.56**
NIHR Global Health Research Centres	**6.03**
NIHR Global Health Research Development Awards	**0.48**
NIHR Global Health Research Groups	**28.66**
NIHR Global Health Research Units	**14.23**
NIHR Global Research Professorships	**5.82**
NIHR Research on Interventions for Global Health Transformation[5]	**20.65**
NIHR-Grand Challenges Canada Partnership on Global Mental Health	**6.28**
NIHR-Royal Society of Tropical Medicine and Hygiene Partnership on Early Career Grants Scheme	**1.40**
NIHR-Wellcome Partnership on Major Awards, International Fellowships and Research to Policy Uptake Initiative	**1.76**
WHO Alliance for Health Policy and Systems Research Partnership	**2.01**
NIHR-WHO partnership on implementing the World Health Assembly Clinical Trials Resolution	**3.69**
Research for Health in Humanitarian Crisis (Elrha Partnership)	**0.59**
World Bank's Global Road Safety Facility (World Bank Multi Donor Trust Fund)	**3.00**
Other	**0.66**
Total ODA	**129.56**

Total NIHR spend including Official Development Assistance	**1,767.32 (£m)**

Sub totals might not agree due to rounding
[1]Formerly called Clinical Research Network
[2]Formerly called Medtech and In-vitro Diagnostics Cooperatives
[3]Formerly called Patient Safety Translational Research Centres
[4]Formerly called Research Design Service
[5]Formerly called NIHR Research and Innovation for Global Health Transformation

Scan to see a fully accessible version of the Annual Report, including supporting information and references, on the NIHR website

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