

Human relevant science benefits humanity

by Kathy Archibald, Chair, Safer Medicines Trust

Coronavirus: we've never had a better opportunity to harness the power of human relevant approaches

Unprecedented research efforts are underway across the world to combat the covid-19 pandemic. Much of this work involves testing potential treatments or vaccines in various animal species, both for safety and effectiveness. What is the likelihood that these animal studies will help us to find a vaccine or treatment within the ambitious timescale of 12 to 18 months? According to Dr Francois Busquet (2020) and expert colleagues from the European Center for Alternatives to Animal Testing (CAAT-Europe), "Animal-based testing would be too lengthy, and it largely fails, when a pathogen is species-specific or if the desired drug is based on specific features of human biology... As viral infections are the prototypic species-specific diseases, they make animal testing challenging even without such time pressures. Their duration and costs... do not support such ambitious goals."

Fortunately, as Busquet and colleagues note, several animal-free technologies *do* lend themselves to antiviral drug development. A variety of *human* relevant approaches, such as 3D human organoids, organ on chip devices and computational approaches are now available, which not only save precious time but also provide insights into human diseases that animal studies simply cannot. Some of these enabling technologies, including miniature human lung constructs and artificial lymph nodes, are already being used in covid-19 research and could play a crucial role in accelerating vaccines and treatments. These disruptive technologies create major opportunities to advance our understanding of diseases in ways that have never been possible before. Busquet and colleagues state that some are able to "provide much more robust and exacting data than any animal experiment could deliver". While these technologies are not as long established as animal research, their track record is already very positive. They represent a tremendous investment for future medical progress and promise to pay dividends both in the current crisis and beyond.

Harm to humanity from animal research

Although animal research and testing has played a central role in the life sciences for decades, its contribution has not always been positive. Society has suffered from its frequent failure to identify potentially dangerous chemicals of all kinds, including medicines, which kill hundreds of thousands of people every year and harm many millions more, through adverse reactions to properly prescribed prescription medicines. The scale of this problem was the motivation for founding Safer Medicines Trust, which exists to promote more effective, human relevant means to protect patients and the public. It is impossible to know how many people have been denied medical treatments because animal research has misled or delayed research into so many diseases, or how many people have been harmed by chemicals whose toxicity was undetected or underestimated by

animal-based safety testing. These serious human harms deserve serious attention. Efforts and initiatives to use human relevant technologies to assess the safety of medicines and chemicals and to study human models of human diseases will reduce these burdens on humanity. Indeed this was the subject of an article I wrote in the *Journal of Animal Ethics* (Archibald, 2018) entitled: "[Animal research is an ethical issue for humans as well as for animals](#)".

In the current issue of the *Journal of Animal Ethics* Nina Kranke (2020) critiques this article and highlights another facet of human harm from the use of animals in science, which I had not mentioned. She suggests that conducting animal research can harm the mental health of personnel tasked with administering substances, procedures or euthanasia to the animal research subjects. She asserts – and I agree – that the distress caused to those whose responsibility it is to care for and (almost invariably) kill the animals is an important issue. As Terry Whiting and Colleen Marion (2011) propose, there is a risk of “perpetration-induced traumatic stress” for veterinarians involved in the destruction of healthy animals, which has also been identified in staff who euthanize animals in surgeries, animal shelters, and laboratories (Rohlf & Bennett, 2005). Similarly, some farmers were reported to suffer post-traumatic stress disorder following the foot and mouth disease crises in the UK and the Netherlands in 2001 (Mort et al, 2005, Olff et al 2005). The delivery of euthanasia and its negative effect on the mental health of practitioners has been a concern for many years. Systematic reviews have revealed that in the UK, the rate of suicide in the veterinary profession is at least three times the general population rate (Platt et al, 2010), with some studies suggesting that young female veterinarians are at the greatest risk of negative mental health outcomes such as suicidal ideation, other mental health difficulties, and job dissatisfaction (Platt et al, 2012). “[Test Subjects](#)”, a short film by BAFTA-winning director Alex Lockwood (2019) powerfully reveals the pressure exerted on a trio of former doctoral students to use animals in their studies and the life-changing emotional toll it takes on them.

Clearly, there are negative consequences from society’s exploitation of animals: primarily for those directly involved in the exploitation – but also for society as a whole, through the collective outsourcing of our “dirty work” to others. It is discomfiting to know that others perform tasks on our behalf that we would not wish to perform ourselves. For many, it is profoundly distressing to know that animals are used in ways they believe to be unacceptable but are unable to stop. They can suffer feelings of “bystander guilt” (Bar-On, 2001) and grief. “Not in my name” is a frequent refrain.

In addition to the direct psychological impact on people whose employment involves causing harm to animals (even when they believe that harm is justified and every effort is made to minimise it) I believe there may be another serious cost to society and to science from our widespread and normalised use of animals in science. Who knows how many potentially great doctors, vets or medical researchers chose a different career because their opposition to using animals prevented them from pursuing such a course? Ironically, those who are motivated by compassion to become doctors, scientists or vets are encouraged

not to be emotional or sentimental, yet what other professions have greater need of compassionate practitioners?

While I agree with Kranke that such issues certainly merit serious consideration, I would argue that the number of individuals affected directly by their participation in animal experimentation is minuscule compared with the number of patients, consumers and citizens who are affected by unsafe medicines, or unsafe household, agricultural or industrial chemicals, or by constrained medical progress – all of which result from an over-reliance on research that uses non-human animals at the expense of methods that target the species in question: humans. These are the harms that Safer Medicines Trust addresses, since their impact on science, medicine and society is so negative and so extensive.

A question of evidence

Kranke suggests there are two problems with my argument. First, she writes that my point is limited to biomedical research and that, “particularly in basic research in the life sciences, many animal experiments are not conducted to gain knowledge of human health and disease.” However, a precondition of any animal experiment being approved is that the benefits to humans (or the environment) must outweigh the suffering of the animals involved. Therefore it would seem that even basic research needs to have relevance to human health otherwise it should not pass the harm/benefit assessment.

Second, Kranke dismisses my central argument that significant scientific advances have now made it possible to study human biology to an extent that obviates most uses of animals, while powerful evidence shows that animals are a poor model for humans and cannot reliably predict the safety or effectiveness of medicines or other chemicals. She writes: “it is not true that animal experiments are generally unreliable” but gives no evidence to substantiate this conclusion.

Yet it is actually true that animal experiments are generally unreliable and there is an abundance of high quality evidence, much of it from systematic reviews (universally accepted as one of the highest forms of evidence) unequivocally demonstrating this (see, for example, Beberta et al, 2003; Crossley et al, 2008; Henderson et al, 2013 and 2015; Hirst et al, 2014; Holman et al, 2016; Kilkenny et al, 2009; Korevaar et al, 2011; Lindner, 2007; Macleod et al, 2015; Mobley et al, 2013; Mueller et al, 2014; Sena et al, 2010; Tsilidis et al, 2013; Zeiss et al, 2017; van der Worp et al, 2010), as well as the inability of animal experiments to predict human response (see, for example, Begley & Ellis, 2012; Contopoulos-Ioannidis et al, 2003; Cummings et al, 2014; Geerts, 2009; Ioannidis, 2012; Kola & Landis, 2004; Leenaars et al, 2019; Leist & Hartung, 2013; Malfait & Little, 2015; Perel et al, 2007; Pound et al, 2004; Scott et al, 2008; Seok et al, 2013; Vatner, 2016; Vesterinen et al, 2010). Indeed the poor quality and poor translation of animal studies is a widely acknowledged fact among those conducting animal experiments and is the subject of much discussion within fields of translational research (see, for example Lalu et al, 2019, and in the field of translational stroke research, deGraba & Pettigrew, 2000; del Zoppo, 1995; Dirnagl, 2016; Lyden & Lapchak, 2012; Marbacher, 2017; Sharp & Jickling, 2014;

Turner et al, 2011; Wiebers et al, 1990; Xu & Pan, 2013, Pound and Ram, 2020). In contrast, Kranke would be hard pressed to find good evidence that animal models are a reliable and valid means of predicting either the safety or effectiveness of medicines or other chemicals for humans (Bailey & Balls, 2019).

Moving towards human relevance

Fortunately, scientific advances have now made it possible to study *human* biology to an extent that makes most animal experiments redundant. Organ on chip devices (eg Jang et al, 2019), induced pluripotent stem cells (eg Blinova et al, 2018), predictive computer models (eg European Medicines Agency, 2018) and many other tools offer a variety of human relevant means to identify effects on human biological pathways that animal tests are simply unable to detect. The scientific and economic opportunity is immense, as outlined in a recent [White Paper](#) by the Alliance for Human Relevant Science (2020).

This is clearly the reason behind the ever-increasing demand for micro-physiological systems and the concomitant declining demand for mouse models. Indeed, the impending closure of the two leading animal breeding and research centers in the UK has recently been announced; the animal facility at the Wellcome Sanger Institute in Cambridge (Else, 2019) and the Harwell Institute's Mammalian Genetics Unit (Brown, 2019) in Oxford. Both planned closures are reported to be a consequence of a move towards using technologies such as cell lines and organoids in genetics research, instead of animals. As the *State of the Discovery Nation 2019* report notes: "The use of complex cell models is being driven by a combination of decreased trust in the translational value of animal models and increased availability of data to support the validity of complex human cell models" (Medicines Discovery Catapult & UK BioIndustry Association, 2019).

I see this as a vindication of the transformational utility of the human relevant models and tools that scientists have now been working on for a generation or more. It is also a watershed moment in our quest to uncover the mechanisms of the many diseases and toxins that blight us and to find new ways to prevent, treat or cure them. Studying animals is an excellent way to learn more about animal biology. But most life science research is aimed at learning more about human biology, and for that there is no substitute to studying humans.

References

Alliance for Human Relevant Science (2020). Accelerating the Growth of Human Relevant Life Sciences in the United Kingdom. Retrieved from <https://www.humanrelevantscience.org>

Archibald, K. (2018). Animal research is an ethical issue for humans as well as for animals. *Journal of Animal Ethics*, 8(1): 1-11. Retrieved from https://www.jstor.org/stable/10.5406/janimaethics.8.1.0001#metadata_info_tab_contents

Bailey, J. & Balls, M. (2019). Recent efforts to elucidate the scientific validity of animal-based drug tests by the pharmaceutical industry, pro-testing lobby groups, and animal welfare organisations. *BMC Medical Ethics*, 20:16. Retrieved from <https://bmcomedethics.biomedcentral.com/articles/10.1186/s12910-019-0352-3>

Bar-On, D. (2001). The bystander in relation to the victim and the perpetrator: Today and during the holocaust. *Social Justice Research*, 14(2):125–147. Retrieved from <https://link.springer.com/article/10.1023/A:1012836918635>

Bebarta, V., Luyten, D. & Heard, K. (2003). Emergency medicine animal research: does use of randomization and blinding affect the results? *Academic Emergency Medicine*, 10(6):684-687.

Begley, C.G. & Ellis, L.M. (2012). Raise standards for preclinical cancer research, *Nature*, 483:531-33.

Blinova, K., Dang, Q., Millard, D., Smith, G., Pierson, J., Guo, L. et al. (2018). International multisite study of human-induced pluripotent stem cell-derived cardiomyocytes for drug proarrhythmic potential assessment. *Cell Reports* 24(13):3582-92.

Brown, J. (2019). Is the UK finally turning its back on mouse testing? It's complicated. *Wired.co.uk*. Retrieved from <https://www.wired.co.uk/article/mice-testing-uk>

Busquet, F., Hartung, T., Pallocca, G., Rovida, C., Leist, M. (2020). Harnessing the power of novel animal-free test methods for the development of COVID-19 drugs and vaccines. *Archives of Toxicology*. Retrieved from <https://link.springer.com/article/10.1007/s00204-020-02787-2>

Contopoulos-Ioannidis, D.G., Ntzani, E.E. & Ioannidis, J.P.A. (2003). Translation of highly promising basic science research into clinical applications, *American Journal of Medicine*, 114:477-84.

Crossley, N.A., Sena, E., Goehler, J., Horn, J., van der Worp, B., Bath, P.M., Macleod, M., Dirnagl, U. (2008). Empirical evidence of bias in the design of experimental stroke studies: a metaepidemiologic approach, *Stroke*, 39(3):929-934.

Cummings, J.L., Morstorf, T. & Zhong, K. (2014). Alzheimer's disease drug-development pipeline: few candidates, frequent failures. *Alzheimer's research & therapy*, 6(4):37.

deGraba, T.J. & Pettigrew, L.C. (2000). Why do neuroprotective drugs work in animals but not humans? *Neurologic clinics*, 18(2):475-93.

del Zoppo, G.J. (1995). Why do all drugs work in animals but none in stroke patients? 1 Drugs promoting cerebral blood flow. *Journal of Internal Medicine*, 237(1):79-88.

- Dirnagl, U. (2016). Thomas Willis lecture: is translational stroke research broken, and if so, how can we fix it? *Stroke*, 47(8):2148-53.
- Else, H. (2019). Genomics institute to close world-leading animal facility. *Nature*, 569, 612. Retrieved from <https://www.nature.com/articles/d41586-019-01685-7>
- European Medicines Agency. (2018). Reporting of physiologically based pharmacokinetic (PBPK) modelling and simulation. Retrieved from <https://www.ema.europa.eu/en/reporting-physiologically-based-pharmacokinetic-pbpk-modelling-simulation>
- Geerts, H. (2009). Of mice and men. Bridging the translational disconnect in CNS drug discovery, *CNS Drugs*, 23(1):915-26.
- Henderson, V.C., Kimmelman, J., Fergusson, D., Grimshaw, J.M., Hackam, D.G. (2013). Threats to validity in the design and conduct of preclinical efficacy studies: a systematic review of guidelines for in vivo animal experiments, *PLoS Medicine*, 10(7), e1001489.
- Henderson, V.C., Demko, N., Hakala, A., MacKinnon, N., Federico, C.A., Fergusson, D., Kimmelman, J. (2015). A meta-analysis of threats to valid clinical inference in preclinical research of sunitinib, *Elife*, 4, e08351.
- Hirst, J.A., Howick, J., Aronson, J.K., Roberts, N., Perera, R., Koshiaris, C., Heneghan, C. (2014). The need for randomization in animal trials: an overview of systematic reviews, *PLoS One*, 9(6), e98856.
- Holman, C., Piper, S.K., Grittner, U., Diamantaras, A.A., Kimmelman, J., Siegerink, B., Dirnagl, U. (2016). Where have all the rodents gone? The effects of attrition in experimental research on cancer and stroke, *PLoS Biology*, 14(1), e1002331.
- Ioannidis, J.P.A. (2012). Extrapolating from animals to humans, *Science Translational Medicine*, 4(151):1-3.
- Jang, K.J., Otieno, M.A., Ronxhi, J., Lim, H.K., Ewart, L., Kodella, K.R., Petropolis, D.B., Kulkarni, G., Rubins, J.E., Conegliano, D., Nawroth, J., Simic, D., Lam, W., Singer, M., Barale, E., Singh, B., Sonee, M., Streeter, A.J., Manthey, C., Jones, B., Srivastava, A., Andersson, L.C., Williams, D., Park, H., Barrile, R., Sliz, J., Herland, A., Haney, S., Karalis, K., Ingber, D.E., Hamilton, G.A. (2019). Reproducing human and cross-species drug toxicities using a Liver-Chip. *Science Translational Medicine*, 11(517). pii: eaax5516. doi:10.1126/scitranslmed.aax5516.
- Kilkenny, C., Parsons, N., Kadyszewski, E., Festing, M.F., Cuthill, I.C., Fry, D., Hutton, J., Altman, D.G. (2009). Survey of the quality of experimental design, statistical analysis and reporting of research using animals, *PLoS One*, 4(11), e7824.

- Kola, I. & Landis, J. (2004). Can the pharmaceutical industry reduce attrition rates? *Nature Reviews Drug Discovery*, 3:711-715.
- Korevaar, D.A., Hooft, L. & Ter Riet, G. (2011). Systematic reviews and meta-analyses of preclinical studies: publication bias in laboratory animal experiments, *Laboratory Animals*, 45(4):225-230.
- Kranke, N. (2020). How the Suffering of Nonhuman Animals and Humans in Animal Research is Interconnected. *Journal of Animal Ethics* 10(1): 41-48. Retrieved from https://www.jstor.org/stable/10.5406/janimaethics.10.1.0041#metadata_info_tab_contents
- Lalu, M., Leung, G.J., Dong, Y.Y. et al. (2019). Mapping the preclinical to clinical evidence and development trajectory of the oncolytic virus talimogene laherparepvec (T-VEC): a systematic review. *BMJ Open* 9:e029475. Retrieved from <https://bmjopen.bmj.com/content/bmjopen/9/12/e029475.full.pdf>
- Leenaars, C.H., Kouwenaar, C., Stafleu, F.R., Bleich, A., Ritskes-Hoitinga, M., De Vries, R.B., Meijboom, F.L. (2019). Animal to human translation: a systematic scoping review of reported concordance rates. *Journal of Translational Medicine*, 17(1):223.
- Leist, M. & Hartung, T. (2013) Inflammatory findings on species extrapolations: humans are definitely no 70-kg mice, *Archives of Toxicology*, 87:563-67.
- Lindner, M.D. (2007). Clinical attrition due to biased preclinical assessments of potential efficacy, *Pharmacology and Therapeutics*, 115:148-175.
- Lockwood, A. (2019). Test Subjects, <https://www.testsubjectsfilm.com>
- Lyden, P. & Lapchak, P. (2012). Sisyphus and translational stroke research. *Science Translational Medicine*, 4(156):20.
- Macleod, M.R., McLean, A.L., Kyriakopoulou, A., Serghiou, S., de Wilde, A., Sherratt, N., Hirst, T., Hemblade, R., Bahor, Z., Nunes-Fonseca, C., Potluru, A. et al. (2015). Risk of bias in reports of in vivo research: a focus for improvement, *PLoS Biology*, 13(10), e1002273.
- Malfait, A.M. & Little, C.B. (2015). On the predictive utility of animal models of osteoarthritis, *Arthritis Research and Therapy*, 17(1):225.
- Marbacher, S. (2017). Can quality improvement tools overcome the translational roadblock—the vital influence of the researcher. *Translational Stroke Research*, 8(3):203-5.
- Medicines Discovery Catapult & UK BioIndustry Association. (2019). Joint report: *State of the Discovery Nation 2019*, p30. Retrieved from <https://s3-eu-west->

1.amazonaws.com/media/newmd.catapult/wp-content/uploads/2019/05/09112422/sodn19.pdf

Mobley, A., Linder, S.K., Braeuer, R., Ellis, L.M., Zwelling, L. (2013). A survey on data reproducibility in cancer research provides insights into our limited ability to translate findings from the laboratory to the clinic, *PLoS One*, 8(5), e63221.

Mort, M., Convery, I., Baxter, J., Bailey C. (2005). Psychosocial effects of the 2001 UK foot and mouth disease epidemic in a rural population: Qualitative diary based study. *British Medical Journal*, 331(7527):1234. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1289318/>

Mueller, K.F., Briel, M., Strech, D., Meerpohl, J.J., Lang, B., Motschall, E., Gloy, V., Lamontagne, F., Bassler, D. (2014). Dissemination bias in systematic reviews of animal research: a systematic review, *PLoS One*, 9(12), e116016.

Olf, M., Koeter, M.W., VanHaaften H., Kersten, P.H., Gersons, B.P.R. (2005). Impact of foot and mouth disease crisis on post-traumatic stress symptoms in farmers. *The British Journal of Psychiatry*, 186:165–166. Retrieved from <https://www.cambridge.org/core/journals/the-british-journal-of-psychiatry/article/impact-of-a-foot-and-mouth-disease-crisis-on-posttraumatic-stress-symptoms-in-farmers/524278AE0937B59CF96FB2BC5279A40E/core-reader>

Perel, P., Roberts, I., Sena, E., Wheble, P., Briscoe, C., Sandercock, P., Macleod, M., Mignini, L.E., Jayaram, P., Khan, K.S. (2007). Comparison of treatment effects between animal experiments and clinical trials: systematic review, *British Medical Journal*, 334:197.

Platt, B., Hawton, K., Simkin, S., Mellanby, R.J. (2010). Systematic review of the prevalence of suicide in veterinary surgeons. *Occupational Medicine*, 60(6):436–446. Retrieved from <https://academic.oup.com/occmed/article/60/6/436/1390739>

Platt, B., Hawton, K., Simkin, S., Mellanby, R.J. (2012). Suicidal behaviour and psychosocial problems in veterinary surgeons: A systemic review. *Social Psychiatry and Psychiatric Epidemiology*, 47(2):223-240. Retrieved from <https://link.springer.com/article/10.1007/s00127-010-0328-6>

Pound, P., Ebrahim, S., Sandercock, P., Bracken, M.B., Roberts, I. (2004). Where is the evidence that animal research benefits humans? *British Medical Journal*, 328:514.

Pound, P., Ram, R. (2020). Are researchers moving away from animal models as a result of poor clinical translation in the field of stroke? An analysis of opinion papers. *BMJ Open Science*;4:e100041. doi: 10.1136/bmjos-2019-100041 Retrieved from <https://openscience.bmj.com/content/4/1/e100041>

Rohlf, V. & Bennett, P. (2005). Perpetration-Induced Traumatic Stress in persons who euthanize nonhuman animals in surgeries, animal shelters, and laboratories. *Society & Animals*, 13(3):201–219. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/16270455>

Scott, S., Kranz, J.E., Cole, J., Lincecum, J.M., Thompson, K., Kelly, N., Bostrom, A., Theodoss, J., Al-Nakhala, B.M., Vieira, F.G., Ramasubbu, J. (2008). Design, power, and interpretation of studies in the standard murine model of ALS, *Amyotrophic Lateral Sclerosis*, 9(1):4-15.

Sena, E.S., Van Der Worp, H.B., Bath, P.M., Howells, D.W., Macleod, M.R. (2010). Publication bias in reports of animal stroke studies leads to major overstatement of efficacy, *PLoS Biology*, 8(3), e1000344.

Seok, J., Warren, S., Cuenca, A., Mindrinos, M., Baker, H., Xu, W., Richards, D., McDonald-Smith, G., Gao, H., Hennessy, L., Finnerty, C., López, C., Honari, S., Moore, E., Minei, J., Cuschieri, J., Bankey, P., Johnson, J., Sperry, J., Nathens, A., Billiar, T., West, M., Jeschke, M., Klein, M., Gamelli, R., Gibran, N., Brownstein, B., Miller-Graziano, C., Calvano, S., Mason, P., Cobb, J., Rahme, L., Lowry, S., Maier, R., Moldawer, L., Herndon, D., Davis, R., Xiao, W., Tompkins, R., and the Inflammation and Host Response to Injury, Large Scale Collaborative Research Program. (2013). Genomic responses in mouse models poorly mimic human inflammatory diseases, *Proceedings of the National Academy of Sciences*, 110(9):3507-3512.

Sharp, F.R. & Jickling, G.C. (2014). Modelling immunity and inflammation in stroke: Differences between rodents and humans? *Stroke; a journal of cerebral circulation*, 45(9):e179.

Turner, R.J., Jickling, G.C. & Sharp, F.R. (2011). Are underlying assumptions of current animal models of human stroke correct: from STAIRs to high hurdles? *Translational Stroke Research*, 2(2):138-43.

Tsilidis, K.K., Panagiotou, O.A., Sena, E.S., Aretouli, E., Evangelou, E., Howells, D.W., Salman, R.A.S., Macleod, M.R., Ioannidis, J.P. (2013). Evaluation of excess significance bias in animal studies of neurological diseases, *PLoS Biology*, 11(7), e1001609.

van der Worp, H.B., Howells D.W., Sena E.S, Porritt M.J., Rewell S., O'Collins V., Macleod M.R. (2010). Can animal models of disease reliably inform human studies? *PLoS medicine* 7(3): e1000245.

Vatner, S.F. (2016). Why so few new cardiovascular drugs translate to the clinics, *Circulation research*, 119(6):714-717.

Vesterinen, H.M., Sena, E.S., French-Constant, C., Williams, A., Chandran, S., Macleod, M.R. (2010). Improving the translational hit of experimental treatments in multiple sclerosis, *Multiple Sclerosis Journal*, 16(9):1044-1055.

Wiebers, D.O., Adams Jr, H.P. & Whisnant, J.P. (1990). Animal models of stroke: are they relevant to human disease? *Stroke*, 21(1):1-3.

Whiting, T.L. & Marion, C.R. (2011). Perpetration-induced traumatic stress — A risk for veterinarians involved in the destruction of healthy animals. *The Canadian Veterinary Journal*, 52(7): 794–796. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3119248/>

Xu, S.Y. & Pan, S.Y. (2013). The failure of animal models of neuroprotection in acute ischemic stroke to translate to clinical efficacy. *Medical Science Monitor Basic Research*, 19:37-45.

Zeiss, C.J., Allore, H.G. & Beck, A.P. (2017). Established patterns of animal study design undermine translation of disease-modifying therapies for Parkinson's disease. *PLoS One*, 12(2), e0171790.

Kathy Archibald is the Chair of Trustees of Safer Medicines Trust, which she founded in 2005. Research interests include life sciences, genetics, medicine, adverse drug reactions, human disease modelling, toxicity testing, innovative and disruptive technologies and paradigm change. Email: Kathy@safermedicines.org