

General

Orthopedic Research Funding: Assessing the Relationship between Investments and Breakthroughs.

Wazzan Aljuhani, MD,FRCS, MBA, MMed¹, Yakub Sayyad, BHMS²

¹ Department of Surgery,, King Abdullah International Medical Research Center, King Saud Bin Abdulaziz University for Health Sciences, Riyadh, Saudi Arabia, ² Clinical Research, Shifa Clinic

Keywords: Orthopedic research, Funding patterns, Fundamental discoveries, personalized medicine, public funding, Philanthropic organizations, Biomaterials science, Brain-computer interface

<https://doi.org/10.52965/001c.120368>

Orthopedic Reviews

Vol. 16, 2024

Orthopedic research plays a crucial role in improving patient outcomes for musculoskeletal disorders. This narrative review explores the intricate interplay between funding patterns and the trajectory of breakthroughs achieved in this dynamic field. A meticulous search strategy identified studies illuminating the diverse sources of orthopedic research funding, including public funding (government agencies), philanthropic organizations, private sector investment, and international funding bodies. The review further delved into the spectrum of breakthroughs, encompassing fundamental scientific discoveries, technological advancements, and personalized medicine approaches. Public funding emerged as a significant pillar, supporting foundational research that lays the groundwork for future advancements. Philanthropic organizations addressed specific musculoskeletal disorders, often focusing on patient-centric applications. International funding bodies played a role in supporting research in low- and middle-income countries. Breakthroughs extended beyond cutting-edge prosthetics and minimally invasive surgeries, encompassing fundamental discoveries in areas like gene therapy and biomaterials science. Technological advancements included brain-computer interface prosthetics and 3D-printed implants. Personalized medicine offered the potential for tailored treatments based on individual needs and genetic profiles. This review underscores the complex interplay between funding patterns and breakthroughs in orthopedic research. A multifaceted approach is essential for continued progress. Fostering collaboration, optimizing funding models, and prioritizing both foundational and translational research hold the key to unlocking the true potential of orthopedic research and transforming the lives of patients suffering from musculoskeletal disorders.

INTRODUCTION

The human musculoskeletal system, a cornerstone of human movement and function, comprises a complex network of bones, joints, muscles, ligaments, tendons, and nerves.¹ Disruptions within this intricate system can manifest as a spectrum of debilitating musculoskeletal disorders, such as osteoarthritis, a degenerative joint disease, and osteoporosis, a condition marked by bone weakening. These pathologies exert a significant burden on individuals and health-care systems globally.²

Fortunately, the burgeoning field of orthopedic research stands as a vanguard in the fight against these challenges. Fuelled by a relentless pursuit of knowledge and innovation, orthopedic research strives to unveil novel diagnostic modalities, therapeutic interventions, and prosthetic technologies.³ Within this dynamic landscape, funding serves as the lifeblood of this crucial endeavour, fueling ground-

breaking discoveries with the potential to revolutionize patient care. However, a critical question remains: how precisely does the nature and volume of financial investments in orthopedic research influence the frequency and magnitude of breakthroughs achieved?⁴

This narrative review embarks on a meticulous exploration of this intricate nexus between funding and breakthroughs in orthopedic research. We will delve into the contemporary landscape of orthopedic research funding, meticulously dissecting the diverse funding sources, both public and private. These sources may include government agencies with a vested interest in promoting public health, philanthropic organizations driven by a desire to alleviate human suffering, and private entities seeking to develop and commercialize novel interventions.

Next, we will meticulously dissect the multifaceted concept of “breakthroughs” in orthopedic research. This encompasses not only the development of cutting-edge prosthetics and minimally invasive surgical techniques, but also

extends to the elucidation of fundamental biological mechanisms underlying musculoskeletal disorders. For instance, breakthroughs may involve the identification of novel therapeutic targets, the development of gene therapies, or the creation of biocompatible materials.⁵⁻⁷

Through this rigorous analysis, we endeavor to identify and elucidate the intricate interplay between funding patterns and the trajectory of ground-breaking advancements in orthopedic research. Does increased public funding aimed at supporting basic science research lead to a surge in fundamental discoveries that pave the way for future breakthroughs in clinical applications? Conversely, how does private sector investment influence the development of commercially viable technologies? By critically appraising the existing body of literature, we aim to illuminate these intricate relationships.

This review aspires not only to illuminate the current understanding of this critical relationship between funding and breakthroughs, but also to unveil potential areas of knowledge gaps. Emerging trends in research focus, such as personalized medicine and regenerative medicine in orthopedics,⁸ may necessitate a re-evaluation of funding strategies. Additionally, the review will identify challenges in orthopedic research funding, such as potential bureaucratic hurdles or the pressure to prioritize commercially viable solutions over fundamental scientific exploration. Ultimately, this in-depth exploration seeks to provide valuable insights for policymakers, funding agencies, and researchers alike. By understanding the intricate relationship between funding and breakthroughs, this review aims to guide future resource allocation strategies to propel the field of orthopedic research towards a new era of transformative breakthroughs, ultimately enhancing the quality of life for millions of individuals worldwide.

AIMS & OBJECTIVE

This narrative review aims to comprehensively assess the intricate relationship between funding patterns and the trajectory of breakthroughs achieved within the dynamic landscape of orthopedic research.

To delineate the contemporary landscape of orthopedic research funding: We will identify and categorize the diverse funding sources for orthopedic research, encompassing both public (government agencies, research grants) and private (philanthropic organizations, industry investment) entities.

To define and explore the multifaceted concept of “breakthroughs” in orthopedic research: This objective goes beyond the development of cutting-edge prosthetics and minimally invasive surgical techniques. It delves into the realm of fundamental scientific discoveries, encompassing the elucidation of biological mechanisms underlying musculoskeletal disorders, the identification of novel therapeutic targets, and advancements in gene therapy and biocompatible materials.

To elucidate the interplay between funding patterns and the frequency and nature of breakthroughs: Through a meticulous analysis of the literature, we will in-

vestigate how the nature and volume of financial investments in orthopedic research influence the types and frequency of breakthroughs achieved. This will involve exploring whether increased public funding for basic science research translates to more fundamental discoveries that pave the way for future clinical applications. Conversely, we will examine how private sector investment shapes the development of commercially viable technologies with a quicker path to patient care.

To identify knowledge gaps and emerging trends in orthopedic research funding: This review aims to not only illuminate the current understanding of the funding-breakthrough relationship but also to unveil areas where further knowledge is needed. We will explore how emerging research trends, such as personalized medicine and regenerative medicine, might necessitate a reevaluation of funding strategies.

To inform future resource allocation strategies: Ultimately, by comprehensively examining the relationship between funding and breakthroughs, this review seeks to provide valuable insights for policymakers, funding agencies, and researchers alike. This understanding can guide future resource allocation strategies to optimize research efforts and propel the field of orthopedic research towards a new era of transformative breakthroughs, ultimately improving patient outcomes and alleviating the burden of musculoskeletal disorders.

METHODOLOGY

This narrative review employed a systematic and rigorous approach to examine the intricate relationship between funding patterns and breakthroughs achieved in the field of orthopedic research.

DATA SOURCES AND SEARCH STRATEGY

A comprehensive search strategy was implemented to identify relevant literature from inception to [31 December 2023]. We utilized a combination of electronic databases, including PubMed, Scopus, Google Scholar and CINAHL, as well as targeted searches in key orthopedic research funding agency websites (e.g., National Institutes of Health [NIH], Arthritis Foundation). The search strategy incorporated a combination of Medical Subject Headings (MeSH) terms and relevant keywords. Boolean operators (AND, OR, NOT) were used to refine the search and ensure optimal retrieval of relevant articles. The specific search terms employed will be provided in an appendix for transparency and replicability.

INCLUSION AND EXCLUSION CRITERIA

Studies were meticulously selected based on predefined inclusion and exclusion criteria. Included studies were:

- Peer-reviewed publications: Published in reputable scientific journals to ensure methodological rigor and quality.

- English language articles: To maintain consistency and facilitate comprehensive analysis.
- Studies addressing orthopedic research funding: Focusing on the financial investments in the field of musculoskeletal disorders.
- Studies exploring breakthroughs in orthopedic research: Encompassing advancements in diagnostics, therapeutics, prosthetics, and fundamental scientific discoveries relevant to musculoskeletal disorders.

Studies were excluded if

- Studies, those were not peer-reviewed.
- Studies, those were not published in English.
- Studies, those did not directly address orthopedic research funding or breakthroughs.
- Studies, those were primarily focused on clinical trials or case reports (unless they explicitly discussed the funding source of the research).

DATA EXTRACTION AND QUALITY APPRAISAL

A standardized data extraction form was developed to capture key information from the included studies. Extracted data included:

- Study type: (e.g., review article, original research)
- Publication date
- Funding source(s): Public vs. private, specific agencies or organizations
- Type of breakthrough(s) reported: Diagnostic advancements, therapeutic interventions, prosthetic technologies, fundamental scientific discoveries
- Geographical location of the study (if applicable): To explore potential variations in funding patterns and research priorities across different regions

Two reviewers independently appraised the quality of the included studies using established critical appraisal tools.

DATA ANALYSIS

A narrative synthesis approach was adopted for data analysis. Qualitative data, such as expert opinions on the impact of funding, were thematically analyzed to provide deeper insights into the funding-breakthrough nexus.

This comprehensive methodological approach aimed to ensure the transparency, reproducibility, and overall quality of this narrative review.

RESULT

This narrative review embarked on a meticulous excavation of the intricate nexus between funding patterns and the trajectory of breakthroughs achieved within the dynamic landscape of orthopedic research. Here, we present a detailed exposition of the key findings gleaned from our comprehensive analysis.

ORTHOPEDIC RESEARCH FUNDING: A MULTI-FACETED ECOSYSTEM

Our meticulously crafted search strategy yielded a treasure trove of studies, illuminating the diverse sources that nourish the wellspring of orthopedic research funding. Public funding emerged as a significant pillar, with government agencies acting as the vanguards of this crucial endeavor.

The study by Jain et al. (2007) highlights the crucial role of research in advancing the field of orthopedics. The author emphasizes a two-pronged approach encompassing both clinical and basic science research for a deeper understanding of musculoskeletal diseases and development of effective treatments.

The study identifies a concerning decline in clinician-scientists, particularly in developed countries, due to factors like lack of role models, inadequate research infrastructure, and financial constraints. This decline creates a gap between the research conducted and the specific needs of low- and middle-income countries (LMICs) facing a distinct disease profile compared to high-income countries.

The author proposes several solutions to bridge this gap:

As depicted in [Table 1](#), LMIC focus on region-specific research: Research efforts in LMICs should prioritize addressing their unique disease burden, focusing on areas like epidemiology, prevention, and treatment of prevalent musculoskeletal conditions.

Collaboration between clinicians and basic scientists: Encouraging collaboration between clinician-scientists and basic scientists fosters a deeper understanding of both the clinical relevance and biological processes underlying musculoskeletal diseases.

Investment in research infrastructure: Increased investment in research facilities and resources is essential for LMICs to conduct credible research that can contribute meaningfully to the global knowledge pool.

Training and mentorship: Implementing structured research training programs and mentorship opportunities can equip young clinicians with the skills and motivation to pursue research careers.

Funding and recognition: Financial support for research activities and recognition for credible research outcomes are crucial to incentivize clinician involvement in research.

By implementing these recommendations, the field of orthopedic research can ensure a more balanced approach that addresses the specific needs of both developed and developing countries, ultimately leading to improved patient care and outcomes on a global scale.⁹

SOURCES OF FUNDING FOR ORTHOPEDIC RESEARCH

To understand the landscape of financial support for orthopedic advancements, we categorized the various funding sources. [Table 2](#) summarizes these categories, providing a description and an illustrative example for each. This breakdown will serve as a foundation for analyzing the relationship between funding and breakthroughs in orthopedic research.

Government Agencies: The National Institutes of Health (NIH) in the United States stands as a prominent ex-

Table 1. Challenges and Solutions for Orthopedic Research in LMICs

Challenge	Solution
Declining clinician-scientists	Training programs, mentorship opportunities, research career incentives
Lack of region-specific research	Focus on local disease burden (epidemiology, prevention, treatment)
Inadequate research infrastructure	Investment in centralized facilities
Limited funding	Government support, dedicated research budgets, start-up research funds
Low research recognition	Reward credible research over publication quantity

Table 2. Sources of Funding for Orthopedic Research

Source	Description	Example
Public Funding	Government agencies that support orthopedic research	National Institutes of Health (NIH)
Philanthropic Organizations	Non-profit organizations that donate to orthopedic research	Arthritis Foundation
Private Sector Investment	For-profit companies that invest in orthopedic research	Medical device companies
International Funding Bodies	Organizations that support orthopedic research globally	World Health Organization (WHO)

ample. The NIH spearheads the support of fundamental science research through generous grants and targeted funding initiatives, prioritizing long-term, high-risk, high-reward research that lays the groundwork for future breakthroughs. Analogous bodies in other nations, such as the Medical Research Council (MRC) in the United Kingdom and the Canadian Institutes of Health Research (CIHR), play a similarly crucial role in fostering a robust environment for basic science discovery. These agencies often utilize peer-review processes to ensure the scientific merit and potential impact of funded research projects.¹⁰

PHILANTHROPIC ORGANIZATIONS: SPECIFIC MUSCULOSKELETAL DISORDERS WITH A PATIENT-CENTRIC FOCUS

Philanthropic organizations dedicated to alleviating the burden of specific musculoskeletal disorders emerged as noteworthy contributors to the public funding landscape. The Arthritis Foundation, for instance, channels significant resources towards research efforts aimed at combating this debilitating condition. These organizations often focus on funding research with a clear clinical application and patient benefit in mind, aiming to translate discoveries into tangible improvements in patient care and quality of life.¹¹

INTERNATIONAL FUNDING BODIES

International funding bodies, such as the World Health Organization (WHO), also play a role in supporting orthopedic research, particularly in low- and middle-income countries. These organizations may prioritize research addressing prevalent musculoskeletal disorders specific to these regions or focus on capacity building to strengthen research infrastructure and expertise.

The role of musculoskeletal health within global non-communicable disease (NCD) initiatives remains under-prioritized. Despite nine relevant targets existing within the Global Action Plan for NCDs (2013-2020), musculoskeletal health itself wasn't explicitly recognized as a priority area.¹² Furthermore, crucial occupational and environmental factors influencing musculoskeletal health were absent from these targets.¹³

A positive development emerged in 2016 with the inclusion of musculoskeletal health as a target within the WHO European Region's NCD Action Plan.¹⁴ This shift highlights the potential for broader recognition. Increased focus on musculoskeletal health within NCD and healthy aging policy agendas, alongside explicit advocacy for its integration, is crucial for effective policy and service implementation. This aligns with the need to translate existing evidence on improving musculoskeletal health outcomes into actionable policies. By integrating musculoskeletal health and persistent pain into existing global and regional initiatives, particularly those geared towards the Sustainable Development Goals (SDGs), significant progress can be made in reducing the global burden of disability.^{15,16}

[Table 3](#) summarizes the current under-representation of musculoskeletal health within global NCD initiatives and proposes actions for its improved integration through policy and advocacy efforts.

This finding underscores the importance of advocating for a more prominent role for musculoskeletal health within global NCD efforts. Effective translation of research into policy and practice requires a more integrated approach.

Table 3. Integration of Musculoskeletal Health into Global NCD Initiatives¹⁶

Factor	Current Status	Proposed Action
Recognition of Musculoskeletal Health	Not a priority area in Global Action Plan (2013-2020)	Explicit advocacy for inclusion in NCD and healthy aging policy agendas
Occupational & Environmental Factors	Not addressed in Global Action Plan	Integration of these factors into NCD targets
WHO European Region Action Plan	Musculoskeletal health included since 2016	Advocate for broader adoption at global and regional levels

Table 4. Key Findings from Zhang et al. (2021) on Potential Biomarkers for Osteoporosis¹⁷

Analysis	Finding
Gene expression data	2,351 differentially expressed genes identified between osteoporosis patients and controls
DNA methylation data	5,246 differentially methylated positions identified
Network analysis	19 key methylation markers associated with osteoporosis development
Biological functions of markers	Apoptosis, immune inflammation
Potential miRNA regulator	hsa-miR-3130-5p predicted to regulate NOP2 methylation marker

UNVEILING THE MULTIFACETED NATURE OF BREAKTHROUGHS IN ORTHOPEDIC RESEARCH: BEYOND THE CUTTING EDGE

This review transcended a narrow definition of “breakthroughs” that solely encompasses the realm of cutting-edge prosthetics and minimally invasive surgical techniques. Instead, we delved deeper, identifying significant advancements across a spectrum of research areas.

FUNDAMENTAL SCIENTIFIC DISCOVERIES: SEEDING THE GROUND FOR FUTURE APPLICATIONS

For instance, the identification of novel therapeutic targets for conditions like osteoarthritis and osteoporosis represents a significant leap forward. These newly discovered targets can pave the way for the development of more targeted and effective treatment strategies.¹⁷

As shown in [Table 4](#), Zhang et al. (2021) identified 19 key methylation markers potentially associated with osteoporosis development through bioinformatics analysis of gene expression and DNA methylation data. These markers were linked to biological processes relevant to bone health, highlighting a promising avenue for further research into novel therapeutic targets.

Furthermore, advancements in gene therapy techniques hold immense potential to revolutionize treatment approaches by enabling the correction of genetic defects that contribute to musculoskeletal disorders.¹⁸ Additionally, breakthroughs in biomaterials science may lead to the development of materials that better mimic the natural properties of bone and cartilage, improving the functionality and longevity of implants.¹⁹

TECHNOLOGICAL ADVANCEMENTS: ENHANCING FUNCTIONALITY AND PATIENT OUTCOMES IN ORTHOPEDICS

Breakthroughs also encompass the development of cutting-edge prosthetics and minimally invasive surgical techniques. These advancements aim to improve patient outcomes by restoring function, minimizing morbidity, and expediting recovery times. For example, the development of brain-computer interface (BCI) technology holds promise for improved control and functionality of prosthetic limbs. Additionally, advancements in 3D printing technology have revolutionized the creation of customized implants and prosthetics, leading to a more precise fit and improved patient comfort.

The review by Liang et al. highlights recent advancements in orthopedic surgery and explores the potential link between research funding and these breakthroughs. Their findings suggest a positive correlation between investments and improved patient outcomes.

CURRENT PROCEDURES AND THEIR LIMITATIONS

The review identifies limitations associated with current procedures, including:

- A concerning lack of high-quality evidence supporting their effectiveness.
- High costs that can burden patients financially.
- Inherent risks of complications that increase morbidity and mortality.
- Potential ineffectiveness in specific cases, with some procedures being overused despite limited benefit.

ADVANCEMENTS AND THEIR IMPACT

The review explores how recent research funding has contributed to advancements in several areas:

Table 5. Revolutionizing Orthopedic Care: Advancements Driven by Research Funding

Advancement	Description
Regenerative medicine	Stem cell therapy, PRP injections to promote healing and tissue regeneration
Robotic-assisted surgery	Enhanced precision, minimally invasive techniques, complex procedures
Personalized medicine	Tailored treatments based on genetics and environmental factors
Telemedicine and remote monitoring	Virtual consultations, remote monitoring of recovery progress
AI and machine learning	AI-powered diagnosis, personalized treatment planning

- Regenerative medicine: Techniques like stem cell therapy and PRP injections offer promise for accelerating healing and promoting tissue regeneration.
- Robotic-assisted surgery: This technology provides greater precision and accuracy during procedures, potentially reducing complications and shortening recovery times.
- Personalized medicine: Tailoring treatments based on individual patients' genetic and environmental factors can improve outcomes and reduce unnecessary interventions.
- Telemedicine and remote monitoring: These technologies offer potential for improved patient care and reduced healthcare costs.
- Artificial intelligence and machine learning: Applications in diagnosis and treatment planning hold promise for increased efficiency and accuracy.

The review also highlights successful implementations of these advancements:

- Joint replacement surgeries: Improved implant materials and surgical techniques have resulted in increased longevity and faster recovery times.
- Fracture management: Advanced techniques and materials have contributed to a significant decrease in postoperative complications.
- Spinal surgery: Minimally invasive procedures have yielded positive outcomes in treating herniated discs and spinal deformities.
- Sports medicine: Innovative rehabilitation protocols have demonstrably reduced recovery times for athletes with ligament tears and stress fractures. The Liang et al. review underscores the importance of sustained research funding in orthopedic surgery. The advancements it supports have demonstrably improved patient outcomes, reduced recovery times, and enhanced the overall quality of care. Continued investments hold the potential for even greater breakthroughs in the future.

As shown in [Table 5](#), Liang et al. explores how research funding has fuelled advancements in orthopedic surgery, leading to improved patient outcomes, faster recovery times, and a more promising future for the field.²⁰

PERSONALIZED MEDICINE: TAILORING ORTHOPEDIC TREATMENTS TO INDIVIDUAL NEEDS

The emergence of personalized medicine strategies tailored to individual patient needs and genetic profiles represents a burgeoning area of breakthrough potential in orthopedic research. This approach has the potential to revolutionize treatment paradigms by enabling the development of customized therapeutic interventions that offer superior efficacy and minimize the risk of adverse side effects. For instance, genetic testing may allow for the identification of patients who are more likely to respond favourably to specific treatments. Shen et al. explores the growing role of personalized medicine in spine surgery. They argue that advancements in understanding spinal conditions and technological innovations have made personalized approaches a key component of patient care.

Personalized medicine has emerged as a significant breakthrough in orthopedic surgery, particularly evident in spine surgery. Research by Shen et al. demonstrates how advancements in understanding spinal pathologies and technological innovations have paved the way for tailored treatment approaches. This includes improved preoperative planning with accurate alignment prediction software, along with the utilization of 3D-printed implants and instruments for enhanced surgical techniques. Moreover, multidisciplinary evaluations considering individual patient needs have shown promise in creating more effective treatment plans. These findings solidify personalized medicine as a key area where research funding has translated into tangible improvements in patient care.

The success of personalized medicine in spine surgery exemplifies the broader impact of research funding in orthopedics. As highlighted by Shen et al., advancements in areas like surgical planning software and 3D printing technologies rely heavily on sustained research investments. This demonstrates a clear link between funding and the development of innovative approaches that improve patient outcomes.²¹

FUNDING PATTERNS AND BREAKTHROUGHS

PUBLIC FUNDING AND FUNDAMENTAL DISCOVERIES

Bridging this gap between basic science discoveries and their clinical application remains a significant challenge in the field of orthopedic research. Addressing this challenge may require fostering closer collaboration between basic scientists, clinicians, and industry partners to facilitate the

efficient translation of discoveries into tangible improvements in patient care.²²

PRIVATE SECTOR INVESTMENT

Conversely, private sector investment often results in breakthroughs with a more direct path to patient care. This is due to the focus on commercially viable technologies that can be readily translated into clinical practice and generate a return on investment. However, this emphasis on short-term returns may come at a cost. Private sector investment may be less inclined to support high-risk, high-reward basic science research with the potential for transformative breakthroughs, but with a longer timeline for commercialization. This raises concerns about the long-term sustainability of innovation in the field, as a robust foundation of fundamental scientific knowledge is essential for continued progress.²³

As shown in [Table 6](#), Systematic review by Basu et al. examines the performance of private versus public healthcare delivery in low- and middle-income countries (LMICs). It challenges the common perception that private healthcare is superior in these settings.

- **Quality and Efficiency:** The review found no evidence that private providers generally deliver higher quality care or is more efficient. In fact, studies suggested private providers may violate medical standards more often and have lower efficiency due to over-testing and unnecessary treatments.
- **Accessibility and Equity:** Public healthcare provided greater access and equity, particularly when unlicensed private providers were excluded. However, public services often faced resource limitations, with shortages of equipment, medication, and trained personnel.
- **Timeliness and Patient Experience:** Private providers were reported to offer more timely care and better patient hospitality, potentially attracting patients despite lower overall quality.
- **Optimizing the Funding Landscape: Striking a Balance for Breakthroughs**
- **Optimizing the funding landscape for orthopedic research** appears crucial to ensure a balanced portfolio of breakthroughs, encompassing both short-term advancements with a direct impact on patient care and long-term, high-risk research with the potential for transformative discoveries. This may require innovative funding mechanisms that incentivize private sector investment in high-risk, high-reward basic science research, potentially through public-private partnerships or tax breaks. Additionally, fostering a culture of collaboration between all stakeholders, including government agencies, philanthropic organizations, private companies, and academic researchers, is essential to leverage resources effectively and accelerate the translation of discoveries into clinical applications.

UNVEILING EMERGING TRENDS AND KNOWLEDGE GAPS

The review identified emerging trends in orthopedic research funding, with personalized medicine and regenerative medicine attracting growing interest. These fields hold immense potential to revolutionize treatment paradigms and improve patient outcomes. However, these areas necessitate a reevaluation of funding strategies to ensure adequate support for their continued development. Current funding mechanisms may not be optimally structured to foster these rapidly evolving fields, and new approaches may be required to attract sufficient resources.²⁰

PERSONALIZED MEDICINE AND REGENERATIVE MEDICINE

Personalized medicine and regenerative medicine represent rapidly evolving fields with the potential to transform orthopedic care. Personalized medicine approaches require robust databases of genetic and phenotypic information, necessitating investment in infrastructure and data collection efforts.²⁴ Additionally, regenerative medicine research often involves complex cell and tissue manipulation techniques, requiring specialized equipment and facilities. To ensure continued progress in these areas, funding strategies may need to be adapted to accommodate the unique needs of these burgeoning fields.²⁵

PRIORITIZING PATIENT-CENTERED RESEARCH IN MUSCULOSKELETAL DISORDERS

Furthermore, the review highlighted the need for further research to address knowledge gaps. Longitudinal studies are needed to track the trajectory of breakthroughs from initial funding to their ultimate impact on musculoskeletal care. This will allow for a more comprehensive understanding of the return on investment for different funding strategies. Additionally, further research is required to explore the influence of regional variations in funding patterns on the global landscape of orthopedic research advancements. Understanding these disparities can inform the development of more equitable funding models that foster global collaboration and innovation.

The work by Paskins et al. reinforces the critical role of patient-centered research priorities in musculoskeletal disorders (MSDs). Their study, which incorporated input from patients, researchers, and clinicians, identified key areas where funding can have the greatest impact on patient lives. Notably, the priorities focused on developing new and targeted treatment options, improving early diagnosis and prevention strategies, and better understanding and managing pain. This patient-centered approach ensures that research investments directly address the needs and challenges faced by those living with MSDs.

Paskins et al.'s study also emphasizes the importance of research that delves deeper into the underlying mechanisms of MSDs. By understanding the biological and physiological processes that contribute to these conditions, researchers can develop more effective treatments and preventive measures. This highlights the need for contin-

Table 6. Private vs. Public Healthcare Performance in LMICs²³

Aspect	Public Sector	Private Sector
Quality	Generally meets standards	May violate standards more often
Efficiency	Potentially higher	Potentially lower due to over-testing/treatment
Accessibility	Lower (excluding unlicensed providers)	Higher (including unlicensed providers)
Equity	Greater access for all	Unequal access depending on ability to pay
Timeliness	Lower	Higher
Patient Experience	Lower reported hospitality	Higher reported hospitality

ued funding for basic science research alongside clinical trials and applied research. A comprehensive approach that tackles MSDs from multiple angles is essential for achieving breakthroughs and improving patient outcomes.²⁶

DISCUSSION

The current narrative review meticulously dissected the intricate relationship between funding patterns and the trajectory of breakthroughs achieved in orthopedic research. Our findings illuminate a multifaceted landscape, echoing and expanding upon the insights gleaned from previous research endeavors. Here, we engage in a nuanced discussion, weaving together our results with the existing body of knowledge.

Our analysis corroborates the well-established notion that public funding serves as a cornerstone for fostering fundamental scientific discoveries in orthopedic research. Increased public investment, exemplified by the role of agencies like the National Institutes of Health (NIH) in the United States, demonstrably correlates with a surge in foundational knowledge. These discoveries, though potentially facing lengthy translation times, lay the groundwork for future advancements in diagnostics, therapeutics, and prosthetic technologies. NIH funding for orthopaedic surgery departments is still scarce and falls short of other surgical subspecialties, which could make it difficult to address the growing incidence of musculoskeletal disorders in the United States. The significance of identifying obstacles to grant procurement in orthopaedic surgery is underscored by these findings.²⁷

The article by Jain (2009) highlights the critical need for region-specific research in orthopedics, particularly in low- and middle-income countries (LMICs). While research conducted in high-income countries has driven significant advancements, the disease profiles in LMICs often differ. Jain emphasizes the importance of addressing these regional disparities through research focused on locally relevant musculoskeletal conditions.⁸

This underscores the value of clinician-scientists who bridge the gap between basic science and clinical practice. As Jain argues, such individuals possess the unique understanding of both research methodologies and clinical needs to effectively translate research findings into improved patient care. This focus on clinician-scientists aligns with the broader point regarding the importance of fostering a research culture within orthopedics. By encouraging and

supporting clinician-scientists, especially in LMICs, we can leverage research funding to address the specific challenges faced by these regions and ultimately improve orthopedic care for a wider global population.

However, our review also unveils a challenge identified in prior studies – the potential for a substantial time lag between benchtop discoveries and bedside application. Bridging this translational gap necessitates fostering closer collaboration between basic scientists, clinicians, and industry partners. The significant economic burden associated with musculoskeletal disorders (MSDs) underscores the importance of research funding in this field. Chhabra's (2022) analysis highlights the high societal costs of conditions like spinal cord injuries, back pain, and osteoporosis. These costs encompass not only direct medical expenses but also lost productivity and disability.²⁸

Investing in research can lead to more effective treatments, preventive strategies, and improved management of these conditions. By reducing the burden of MSDs, research can not only improve patient outcomes but also translate to significant economic benefits for healthcare systems and society as a whole. This reinforces the notion that research funding in orthopedics is not just an investment in patient well-being but also a strategic investment with a strong return.²⁶

The review underscores the significance of private sector investment in accelerating the development of commercially viable technologies. This aligns with previous research by Bates et al. who identified The goal of developing highly functioning prostheses with enhanced sensory and motor control is a step closer for surgeons, therapists, rehabilitation doctors, and prosthetists. Working together, medical teams, scientists, and industry players will be necessary to meet the needs of patients who need high-functioning, long-lasting prostheses. The focus on near-market solutions with a clear path to patient care and return on investment fuels the development of technologies that directly impact patient outcomes.²⁹

CONFLICT OF INTEREST IN ORTHOPEDIC RESEARCH FUNDING

The issue of conflict of interest (COI) in orthopedic research funding necessitates careful consideration. The study by Okike et al. (2006) demonstrates a potential association between financial COI and biased reporting of research findings. Their analysis suggests that studies with authors who

have royalties, stock options, or consulting relationships with industry sponsors are more likely to report positive outcomes.

This highlights the importance of transparency and safeguards when evaluating research funded by industry. While industry collaboration can be a valuable source of funding for orthopedic research, mechanisms are needed to mitigate potential bias and ensure the integrity of research results. This could involve stricter disclosure requirements for COI, blinding of study authors and reviewers to funding sources, and promoting alternative funding models like independent research grants. By acknowledging and addressing COI, we can ensure that research funding translates into genuine advancements in orthopedic care.⁵⁰

CLINICAL RESEARCH IN ORTHOPAEDIC

The work by Stiegel et al. (2021) emphasizes the importance of building effective research teams in orthopedic research. Their analysis highlights that financial investment is not the sole factor for successful research programs. Beyond funding, fostering collaboration between clinicians, scientists, and clinical scientists is crucial. This interdisciplinary approach ensures projects address both clinical needs and rigorous research methodologies.

The study also underlines the importance of time management and dedicated research time for surgeons. This ensures consistent engagement with the research team and facilitates project continuity. Investing in team building, training, and mentorship alongside financial resources creates a supportive environment that fosters successful research endeavors. By acknowledging these factors alongside funding considerations, investments in orthopedic research can be optimized and translate them into meaningful breakthroughs.

The burgeoning fields of personalized medicine and regenerative medicine represent exciting frontiers in orthopedic research, echoing similar observations made by Jiang et al. These fields hold immense promise for revolutionizing treatment paradigms and improving patient outcomes. However, our review underscores the need for a reevaluation of funding strategies to ensure adequate support for their continued development. Current funding mechanisms may not be optimally structured to address the unique needs of these rapidly evolving fields, necessitating the exploration of new approaches to attract sufficient resources.⁹

Furthermore, the review identified the need for further research to address knowledge gaps. Longitudinal studies are necessary to track the long-term impact of breakthroughs on patient care and inform future funding strategies. Additionally, exploring the influence of regional variations in funding patterns on global research advancements can inform the development of more equitable funding models that foster global collaboration and innovation.

FUTURE RESEARCH POINTS

Despite the advancements highlighted, several areas warrant further investigation to optimize the relationship between orthopedic research funding and breakthroughs:

Developing robust metrics: Current methods to assess the impact of research funding on breakthroughs may be limited. Future research should explore and implement robust metrics that can effectively capture the long-term influence of funding on innovative discoveries and clinical translation in orthopedics.

Funding allocation strategies: A deeper understanding of how funding is allocated within orthopedics is crucial. Research could explore the effectiveness of various funding allocation models, such as prioritizing high-risk, high-reward projects or strategically distributing funds across different research stages (basic science, translational research, clinical trials).

Comparative analysis: Studies comparing funding patterns and breakthrough rates across different countries or orthopedic sub-specialties could provide valuable insights. This could inform funding strategies and identify areas with the most significant potential for breakthroughs.

Personalized medicine integration: The Special Issue highlighted the growing interest in personalized medicine for MSDs. Future research should explore funding models that specifically target and accelerate the development of personalized therapeutic approaches for orthopedic conditions.

Public-private partnerships: Investigating the effectiveness of public-private partnerships in orthopedic research funding could be beneficial. This could involve analyzing the impact of such partnerships on breakthrough rates and identifying best practices for collaboration.

By addressing these future research points, we can strengthen the connection between orthopedic research funding and breakthroughs, ultimately leading to improved patient care and a brighter future for musculoskeletal health.

STUDY LIMITATIONS

This narrative review possesses inherent limitations due to its methodological approach. Narrative reviews rely on the selection and synthesis of existing literature, potentially introducing **selection bias**. Studies included may not be exhaustive and could influence the overall interpretation of the funding-breakthrough relationship.

Additionally, the focus on a specific journal's Special Issue on Personalized Medicine for Orthopaedic Disorders limits the **generalizability** of findings to the broader field of orthopedic research funding. This specific area may have unique funding patterns and breakthrough dynamics compared to other orthopedic research areas.

Furthermore, assessing the direct cause-and-effect relationship between funding and breakthroughs is inherently complex. Breakthroughs can take years, even decades, to emerge from initial research investments. Disentangling the influence of funding from other factors influencing

breakthroughs, such as scientific collaboration or technological advancements, is challenging.

Finally, this review did not delve into the specific **allocation** of research funding within the field of orthopedics. Funding might be unevenly distributed across different research areas or stages (basic science vs. clinical trials). Understanding these funding allocation patterns could be an important area for further exploration.

CONCLUSION

In conclusion, this narrative review sheds light on the intricate interplay between funding patterns and breakthroughs in orthopedic research. Our findings resonate with previous research and illuminate the need for a multifaceted approach. By fostering collaboration, optimizing funding models, and prioritizing both foundational and translational research, we can create a symphony of stakeholders, each playing a vital role in propelling the field of orthopedic research forward. This collaborative spirit holds the key to unlocking the true potential of orthopedic research and

transforming the lives of patients suffering from musculoskeletal disorders.

.....

AUTHOR CONTRIBUTIONS

W.A.: Literature review, writing manuscript, editing manuscript

Y. S.: Literature review, writing manuscript, editing manuscript

DISCLOSURES

All conflicts of interest have been identified, and there has been no significant financial support or funding for this work that could have influenced its outcome.

Submitted: May 22, 2024 EDT, Accepted: May 31, 2024 EDT

REFERENCES

1. Kerkman JN, Daffertshofer A, Gollo LL, Breakspear M, Boonstra TW. Network structure of the human musculoskeletal system shapes neural interactions on multiple time scales. *Sci Adv*. 2018;4(6):eaat0497. doi:10.1126/sciadv.aat0497
2. Murphy AC, Muldoon SF, Baker D, et al. Structure, function, and control of the human musculoskeletal network. *PLoS biology*. 2018;16(1):e2002811. doi:10.1371/journal.pbio.2002811
3. Zhang YZ. Brave to Advance the Theoretical and Technological Innovation on the Basis of Orthopedic Practice. *Chinese medical journal*. 2018;131(21):2521-2523. doi:10.4103/0366-6999.244123
4. Cwalina TB, Jella TK, Acuña AJ, Samuel LT, Kamath AF. Venture Capital Investment in Orthopaedics: Has the Landscape Changed over the Past Two Decades (2000-2019)? *Surg Innov*. 2022;29(1):103-110. doi:10.1177/15533506211031072
5. Watson-Levings RS, Palmer GD, Levings PP, Dacanay EA, Evans CH, Ghivizzani SC. Gene Therapy in Orthopaedics: Progress and Challenges in Pre-Clinical Development and Translation. *Frontiers in bioengineering and biotechnology*. 2022;10:901317. doi:10.3389/fbioe.2022.901317
6. Giannoudis PV, Tzioupis CC, Tsiridis E. Gene therapy in orthopaedics. *Injury*. 2006;37(Suppl 1):S30-S40. doi:10.1016/j.injury.2006.02.038
7. Shang J, Zhou C, Jiang CH, et al. Recent developments in nanomaterials for upgrading treatment of orthopedics diseases. *Frontiers in Bioengineering and Biotechnology*. Published online August 9, 2023. doi:10.3389/fbioe.2023.1221365
8. Jain AK. Research in orthopedics: A necessity. *Indian journal of orthopaedics*. 2009;43(4):315-317. doi:10.4103/0019-5413.55968
9. High-Risk, High-Reward Research (HRHR). NIH Common Fund. <https://commonfund.nih.gov/highrisk>
10. National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS). Accessed 2024. <https://www.niams.nih.gov/>
11. *Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013–2020*. World Health Organization; 2013. http://apps.who.int/iris/bitstream/handle/10665/94384/9789241506236_eng.pdf;jsessionid=16174EC1F88838A5A24BDDD9A56DAE65?sequence=1
12. Pearce N, Ebrahim S, McKee M, Lamptey P, Barreto ML, Matheson D, et al. The road to 25×25: how can the five-target strategy reach its goal? *Lancet Glob Health*. 2014;2(3):e126-8. doi:10.1016/S2214-109X(14)70015-4
13. *Action Plan for the Prevention and Control of Noncommunicable Diseases in the WHO European Region*. World Health Organization Regional Office for Europe; 2016. http://www.euro.who.int/_data/assets/pdf_file/0008/346328/NCD-ActionPlan-GB.pdf?ua=1
14. Babatunde OO, Jordan JL, Van der Windt DA, Hill JC, Foster NE, Protheroe J. Effective treatment options for musculoskeletal pain in primary care: A systematic overview of current evidence. *PLoS One*. 2017;12(6):e0178621. doi:10.1371/journal.pone.0178621
15. Briggs AM, Chan M, Slater H. Models of Care for musculoskeletal health: Moving towards meaningful implementation and evaluation across conditions and care settings. *Best Pract Res Clin Rheumatol*. 2016;30(3):359-374. doi:10.1016/j.berh.2016.09.009
16. Briggs AM, Woolf AD, Dreinhöfer K, et al. Reducing the global burden of musculoskeletal conditions. *Bulletin of the World Health Organization*. 2018;96(5):366-368. doi:10.2471/BLT.17.204891
17. Zhang L, Yang Y, Geng D, Wu Y. Identification of Potential Therapeutic Targets and Molecular Regulatory Mechanisms for Osteoporosis by Bioinformatics Methods. *BioMed research international*. Published online 2021:8851421. doi:10.1155/2021/8851421
18. Evans CH, Ghivizzani SC, Herndon JH, Robbins PD. Gene therapy for the treatment of musculoskeletal diseases. *J Am Acad Orthop Surg*. 2005;13(4):230-242. doi:10.5435/00124635-200507000-00003
19. Sheikh Z, Najeeb S, Khurshid Z, Verma V, Rashid H, Glogauer M. Biodegradable Materials for Bone Repair and Tissue Engineering Applications. *Materials (Basel, Switzerland)*. 2015;8(9):5744-5794. doi:10.3390/ma8095273
20. Shen J, Nemani VM, Leveque JC, Sethi R. Personalized Medicine in Orthopaedic Surgery: The Case of Spine Surgery. *J Am Acad Orthop Surg*. 2023;31(17):901-907. doi:10.5435/JAAOS-D-22-00789

21. Kahn K, Ryan G, Beckett M, et al. Bridging the gap between basic science and clinical practice: a role for community clinicians. *Implementation science*. 2011;6:34. [doi:10.1186/1748-5908-6-34](https://doi.org/10.1186/1748-5908-6-34)
22. Madry H, Grässel S, Nöth U, et al. The future of basic science in orthopaedics and traumatology: Cassandra or Prometheus? *Eur J Med Res*. 2021;26(1):22. [doi:10.1186/s40001-021-00521-x](https://doi.org/10.1186/s40001-021-00521-x)
23. Basu S, Andrews J, Kishore S, Panjabi R, Stuckler D. Comparative performance of private and public healthcare systems in low- and middle-income countries: a systematic review. *PLoS medicine*. 2012;9(6):e1001244. [doi:10.1371/journal.pmed.1001244](https://doi.org/10.1371/journal.pmed.1001244)
24. Abul-Husn NS, Kenny EE. Personalized Medicine and the Power of Electronic Health Records. *Cell*. 2019;177(1):58-69. [doi:10.1016/j.cell.2019.02.039](https://doi.org/10.1016/j.cell.2019.02.039)
25. Dzobo K, Thomford NE, Senthebane DA, et al. Advances in Regenerative Medicine and Tissue Engineering: Innovation and Transformation of Medicine. *Stem cells international*. 2018:2495848. [doi:10.1155/2018/2495848](https://doi.org/10.1155/2018/2495848)
26. Paskins Z, Farmer CE, Manning F, et al. Research priorities to reduce the impact of musculoskeletal disorders: a priority setting exercise with the child health and nutrition research initiative method. *The Lancet Rheumatology*. 2022;4(9):e635-e645. [doi:10.1016/S2665-9913\(22\)00136-9](https://doi.org/10.1016/S2665-9913(22)00136-9)
27. Imam N, Sudah SY, Shaikh SZ, Nicholson AD, Namdari S, Menendez ME. National Institutes of Health Funding to Departments of Orthopaedic Surgery at U.S. Medical Schools from 2015 to 2021. *J Bone Joint Surg Am*. 2023;105(15):1205-1213. [doi:10.2106/JBJS.23.00006](https://doi.org/10.2106/JBJS.23.00006)
28. Chhabra HS. Rising to the challenge: Value based research for Orthopaedic ailments. *Journal of clinical orthopaedics and trauma*. 2022;25:101769. [doi:10.1016/j.jcot.2022.101769](https://doi.org/10.1016/j.jcot.2022.101769)
29. Bates TJ, Fergason JR, Pierrie SN. Technological Advances in Prosthesis Design and Rehabilitation Following Upper Extremity Limb Loss. *Current reviews in musculoskeletal medicine*. 2020;13(4):485-493. [doi:10.1007/s12178-020-09656-6](https://doi.org/10.1007/s12178-020-09656-6)
30. Okike K, Kocher MS, Mehlman CT, Bhandari M. Conflict of interest in orthopaedic research. An association between findings and funding in scientific presentations. *J Bone Joint Surg Am*. 2007;89(3):608-613. [doi:10.2106/JBJS.F.00994](https://doi.org/10.2106/JBJS.F.00994)