

This representation is submitted on behalf of the Neurological Alliances of Scotland, England, Wales and Northern Ireland, who represent 140 organisations supporting people with neurological conditions across the UK.

Approximately one in six people in the UK have at least one neurological condition, with an estimated 600,000 people diagnosed each year. There are over 600 known neurological conditions - any condition that affects the brain, spinal cord or nervous system. They can affect anyone, at any age and at any time.

We urge the UK Government to prioritise investment into research investigating neurological conditions in the next iteration of the budget.

### **Economic impact of neurological conditions**

With an ageing population, the prevalence of certain neurological conditions, such as dementias, is increasing. Public Health Scotland forecast the annual disease burden to increase 21% over the next 20 years, with neurological diseases, cardiovascular diseases, cancers accounting for 68% of the total increase in forecasted disease burden (Public Health Scotland 2022). A study published in 2024 by the Lancet has evidenced neurological diseases to be the leading cause of overall disease burden in the world, exceeding all other diseases such as cancer (Steinmetz, Jaimie D et al 2024: 344).

This has a significant impact on the economy. In a report published by the Economist Impact in 2024, they found:

- **The collective number of people with neurological conditions in the country comes to 14.5m**, and the direct and indirect economic burden is over 4.3% of GDP in 2019, equivalent to at least £96bn for the UK.
- **Existing interventions for the studied conditions substantially reduce this toll.** Economist Impact looked at a range of specific interventions for each of the ten conditions for which the best data was available: Alzheimer's disease (along with other dementias), brain cancer, idiopathic epilepsy, migraine, multiple sclerosis (MS), Parkinson's disease, spinal cord injury, spinal muscular atrophy (Type I), stroke and traumatic brain injury. It determined the amenable burden -the extent to which it is possible to reduce the toll of these conditions by adopting the best current practices in preventive, treatment, and rehabilitative interventions.
- **The human and economic costs are far higher than necessary for the conditions studied.** Direct and indirect costs can be reduced by about one-third. The amenable economic burden for the ten conditions studied was estimated as 1.4% of GDP in 2019, equivalent to £30.8bn for the UK.

(Niraula 2024: 4)

### **Funding disparity**

Despite their prevalence, their cost and their expected rise, funding for research investigating neurological conditions remains disproportionately low, constituting only 8.9% of the UK's health research expenditure in 2022 (UK Clinical Research Collaboration 2023: 33).

Researchers working in the field of neurological conditions face the prospect of losing their

jobs due to insecure funding, and clinical trials are limited in their number and scope. Moreover, in 2022 over 30% of public investment into inflammatory, immune and neurological research in the UK was provided by charities (AMRC 2024).

This disparity undermines opportunities to improve the lives of the one in six people living with a neurological condition and hinders progress in addressing one of the most critical areas of health, now and in the future.

While we recognise the significant work undertaken in neurodegenerative areas such as dementias, there is a pressing need for research and support into the breadth of neurological conditions such as congenital, neonatal, and infectious conditions that cause neurological damage (Steinmetz, Jaimie D et al 2024: 344).

In recognition of neurological conditions as vastly under researched, the Institute for Public Policy Research Commission on Health and Prosperity published a report in 2024 recommending that the UK increases public expenditure on health investment by £5 billion by the end of the next Parliament, identifying ‘under researched’ areas such as ‘cardiovascular disease, Alzheimer’s/dementia, neurological conditions and mental health’ (IPPR 2024: 79) as key areas for investment.

With £20.4 billion committed to research and development in the UK Autumn Budget, £2 billion of which is allocated to the National Institute for Health and Care Research (NIHR) to support life sciences innovation and accelerate the delivery of the health and growth missions, we are calling on the Department of Health and Social Care and the Department of Science, Innovation and Technology to ensure neurological conditions are a research priority in this budget.

### **Leveraging partnerships**

Initiatives like the Octopus MS Clinical Trials Platform, Decode ME and MND-SMART illustrate the potential for impactful collaboration between the private, public and third sector on neurological research. By fostering partnerships with pharmaceutical companies, academic institutions and the third sector, the Government can maximise the impact of public investments, accelerating the development of treatments, disease management options, and identifying areas of early intervention and prevention to help mitigate the burden of disease. However, private-sector contributions to neurological research remain limited compared to other fields, such as cancer. Addressing this disparity requires proactive government leadership to incentivise and direct investment toward neuroscience.

### **We have identified 5 recommendations for the UK Government:**

1. Invest in neurological research in line with the proposal from the Institute for Public Policy Research’s Commission on Health and Prosperity (2024)
2. Provide stability and long term certainty for neurological research through 10 year budgets (as identified in the Autumn budget)
3. Prioritise neurological condition research in the newly accounted research initiatives such as the [new Life Sciences Innovative Manufacturing Fund](#)
4. Improve equity of access to clinical trials by prioritising neurological conditions as a research area in the new [Commercial Research Delivery Centres \(CRDCs\)](#). While we welcome the recent announcement of CRDCs to

shift research into the communities, there is no mention of neurological conditions within the initial scope of these centres.

5. Commit to working with key research funders including medical research charities and industry to direct investment into neurological conditions

Failing to adequately fund neurological research disregards the needs of millions living with these conditions across the UK. As the UK seeks to position itself as a global leader in science and innovation, prioritising neurological research is a strategic opportunity. By increasing investment in this field, the government can drive groundbreaking advancements, reduce health inequities, and demonstrate its commitment to improving the lives of all citizens.

We stand ready to collaborate with the government to advance these goals. Together, we can ensure that the UK leads the way in addressing the challenges posed by neurological conditions and improving the lives of those affected.

Signed on behalf of:

The Neurological Alliance of Scotland  
The Neurological Alliance  
The Wales Neurological Alliance  
The Northern Ireland Neurological Charities Alliance

## References

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The current version available (1.2) contains two small corrections to pages 18 and 128.

Accessible: <https://hrcsonline.net/reports/analysis-reports/uk-health-research-analysis-2022/>