

# Interview: Teresa Corona Vázquez General Director, National Institute of Neurology and Neurosurgery, Mexico

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*Dr. Teresa Corona Vázquez, the general director of one of the leading neuroscience institutions in Latin America, details their most important research partnerships and achievements, notably with regards to neurodegenerative diseases, and her expectations of fostering a heightened research-based relationship with the pharmaceutical industry.*

## **What have been some of the most important achievements of the Institute over the past years?**

Over the past five years, the Institute has been focused on three main pillars: conducting high-impact scientific research published in national and international literature, boosting its researchers' membership of the Mexican System of Researchers (Sistema Nacional de Investigadores), while we continue to further work at linking biomedical disciplines to clinical and sociomedical research.

Clear examples of our research achievements can be found in the treatment of neurodegenerative illnesses such as Parkinson's disease for instance. In this regard, various research approaches have been implemented, from the most basic to purely clinical ones. This led to extremely positive results, with ongoing surveys on care quality indicating higher patient outcomes and greater family satisfaction.

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In the case of Dementia, findings of biomedical studies have been released by our clinical dementia laboratory on the prevalence and incidence of the condition, as well as on the risk factors that exist among the Mexican population. These studies have notably been carried out into cerebral proteins and other indicators, as well as into genetics, to ensure that susceptible families are provided with appropriate genetic counseling.

Meanwhile, there has been a rise in outreach to family and patient associations related to both illnesses, and to the support groups offered to the institute's patients and families. Furthermore, the liaising work carried out with international institutions active in these fields in Spain, the UK, Germany, and France clearly demonstrates the high impact level of this scientific research. For example, partnerships established with the CEM-CAT in Vall D'Hebron Hospital in Barcelona, King's College in London or in Dusseldorf, as well as our long-standing relationship primarily focused on brain tumors the Pitié-Salpêtrière Hospital in France, have also come to fruition in terms of research outcomes and training of highly specialized human resources. Of course, close relationships have also been nurtured with various institutions in the United States, Canada and throughout Latin America and The Caribbean.

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### **How is the Institute partnering with the pharmaceutical industry and what are your main expectations toward the private sector?**

Several agreements have been bound with the pharmaceutical industry, mainly with regards to clinical trials of medicinal products or molecules that are about to be introduced in Mexico. These new treatments need to be trialed among the local population, because we see metabolic differences or other particular features from one geographical area to another that can affect therapeutic impact.

Nevertheless, I believe the Institute's relationship with the industry could be further enhanced through clear and transparent agreements aiming to jointly conduct essential research, but also to meet our training needs. Finally, we would also like to look at fostering a greater collaboration to develop new treatment technologies. To this end, the National Institutes of Health and High Specialty Regional Hospitals Coordinating Commission has notably been working to produce a National Institutes of Health Act, which frames this increasing public-private collaboration.

### **What have been some of the Institute's initiatives to improve and strengthen the patient-physician relationship?**

This topic is both extremely relevant and utterly important in the Institute's agenda. Our junior doctors undergoing training at the Department of Postgraduate Studies Unit of the UNAM's Faculty of Medicine can now take an online course in ethics, but that is obviously not enough.

The example that professors must set for their students is then key to ensure the fair and ethical treatment of patients, as well as the respect for their conditions, their rights contained in the Bill of Patients' Rights, and the general human right to equality and non-discrimination.

In this respect, we have been working together with the Teaching Department and the Ethics Committee of the Institution to raise awareness and promote a heightened care environment, which is a topic that is particularly close to my heart.

### **We see the current government is passing structural reforms to address the fragmentation of the national health system and notably improving the portability of services among the different social security institutions. What do you identify as the impact these reforms would have on the treatment of patients with neurological diseases?**

The Federal Ministry of Health is rolling out a Universal Services program to steadily ensure all Mexican citizens will be provided with access to health care, as enshrined in the Mexican Constitution. I understand that all public social security institutions will be participating in this program (IMSS, ISSSTE and others) in a combined effort aimed at avoiding the duplication of patient care across the different institutions.

This will support all areas of neurological patient care: emergency, in-patient care, rehabilitation, access to support groups, supply of medicines, etc. For example, for cerebrovascular disease, which is the third or fourth most common cause of death both in Mexico and worldwide, the total timeframe comprising patient care and recovery is rather short. As a result, patients should ideally go straight to emergency where they can be treated through a highly-specialized program. For this to occur, there must be a certain consensus during the treatment, which led us to design special guidelines for the most common neurological conditions, in collaboration with all Mexican healthcare institutions. Of course, to fully leverage the implementation of these guidelines, it requires the existence of specific infrastructure and specialized personnel in these areas.

**What do you identify as the key requirements for further develop to prevention, diagnosis, and treatment of multiple sclerosis (MS) for Mexican patients?**

During the past ten years, great progress has been made in the study of MS in Mexico and Latin America. There has been an obvious increase in the prevalence and incidence of the illness, and a greater understanding provided by studies into the genetic considerations, risk factors and the clinical presentation of the illness, in Mexico as well as the rest of the world.

Despite Mexico being considered a low-prevalence country according to the MS world map, the illness does affect productive young people and eventually leading to their disability, MS being the second most frequent disability cause after car accidents for this population. As far as prevention is concerned, we have worked to provide physicians with general training so that patients can be swiftly referred to specialists, as we know that early diagnosis and treatment lead to a more positive evolution of the condition. The increased infrastructure, high-resolution imaging equipment, as well as the rise in neurophysiological and cerebrospinal fluid studies, have served to enhance diagnostic sensitivity. However, it is important to stress that despite the fact that medicines already exist for the treatment of MS, and that the variety of these molecules is constantly increasing, most of them are costly and then out of the reach for patients. Moreover, treatment also requires neurological and cognitive rehabilitation, as well as measures for social and professional reintegration.

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**You have been heading the Institute for more than nine years, while your current mandate will end in February 2017. How would you summarize your main achievements at the helm of this prestigious institution?**

Clearly, the National Institute of Neurology and Neurosurgery is currently experiencing a positive boom in terms of research, care and training of human resources. We have released several guidelines that has been praised internationally, and when it comes to research, we made great strides in neuropsychiatry, as well as in the areas of psychosis, depression, comorbidity with neurological and neurosurgical illnesses, and in neurology, among many others. Cutting-edge laboratories are also in place for neurocysticercosis, infectology, immunology, neurochemistry, genetics, brain tumors and epilepsy, where the average age of our researchers is between 45 and 50 years-old, which gives us good hopes to see the productivity curve growing exponentially during the upcoming years.

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As the General Director of the National Institute of Neurology and Neurosurgery for almost ten years, I can assure you that the Institute is now one of the leading neurological institutes in the region and perhaps in the world, and the wide array of nervous system pathologies we treat within the Institute's walls backs this credibility. The quality and impact of our publications, the number of patients operated under our highly specialized surgical procedures, our imaging studies that use cutting-edge infrastructure to generate increasingly accurate diagnoses, the progress made in social medicine, and the study of primary care providers, family care, and thanatological care are absolutely paramount.

Our strong relationships with not-for-profit organizations that have lent us their support, such as the En Compañía Foundation, the Gonzalo RÃo Arronte Foundation, the Duerme Tranquilo Foundation, the National Council of Science and Technology, and the Armstrong Foundation, is an evidence of the trust they granted us, while we always maintained the most stringent transparency in the use of federal and our own funds.

The crucial importance of the day-to-day activities of all our people working in the various human resources areas should not be underestimated, nor should be overlooked the importance of a positive working environment, environmentally friendly facilities, and the will to serve the country's public health and education institutions with honesty and transparency.

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