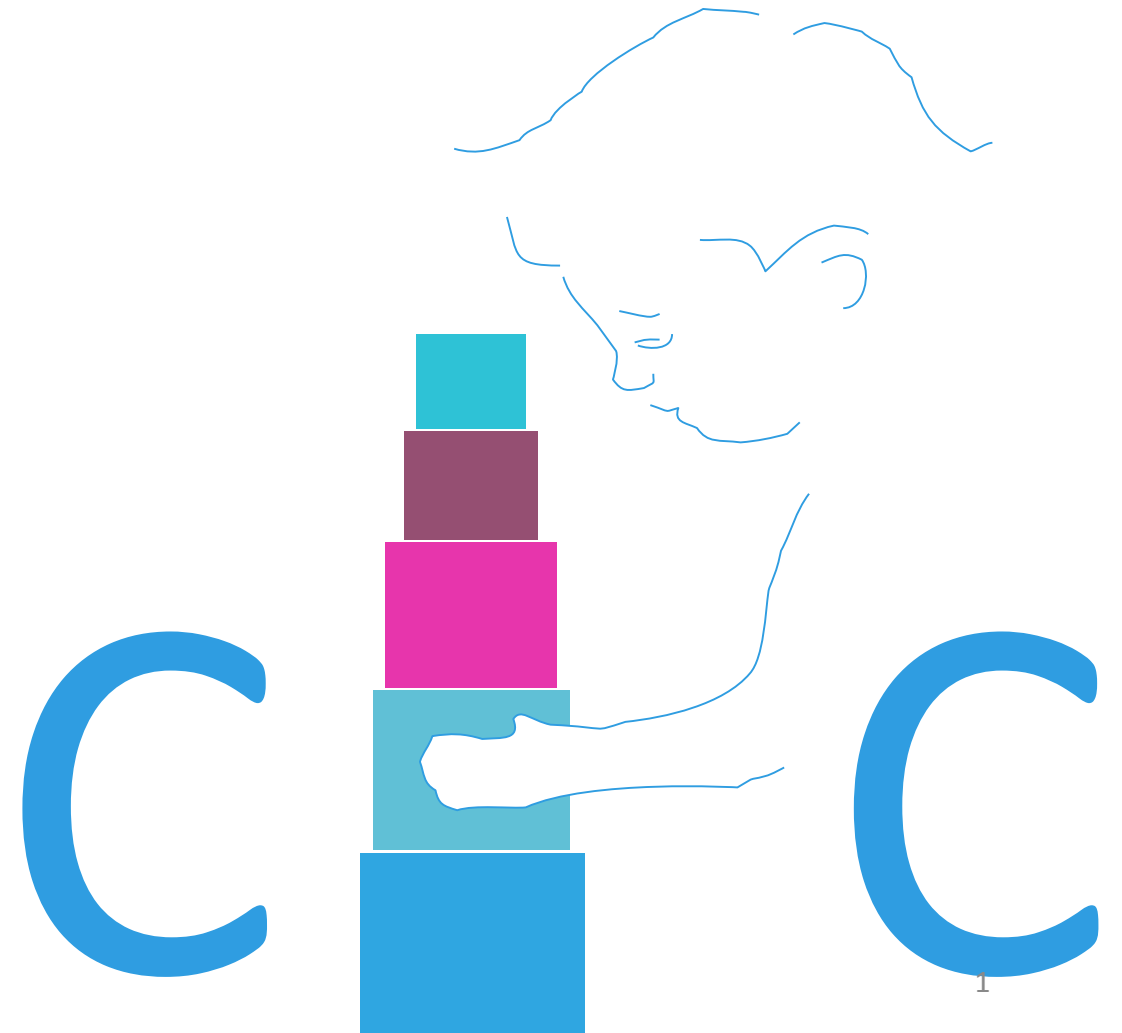


# Pediatric CIC network : 2000 - 2016

## FRANCE

2000 : 3 centers  
2005 : 8 centers  
2007 : 15 centers - CENGEPs  
2013 : 15 centers - ~~CENGEPs~~



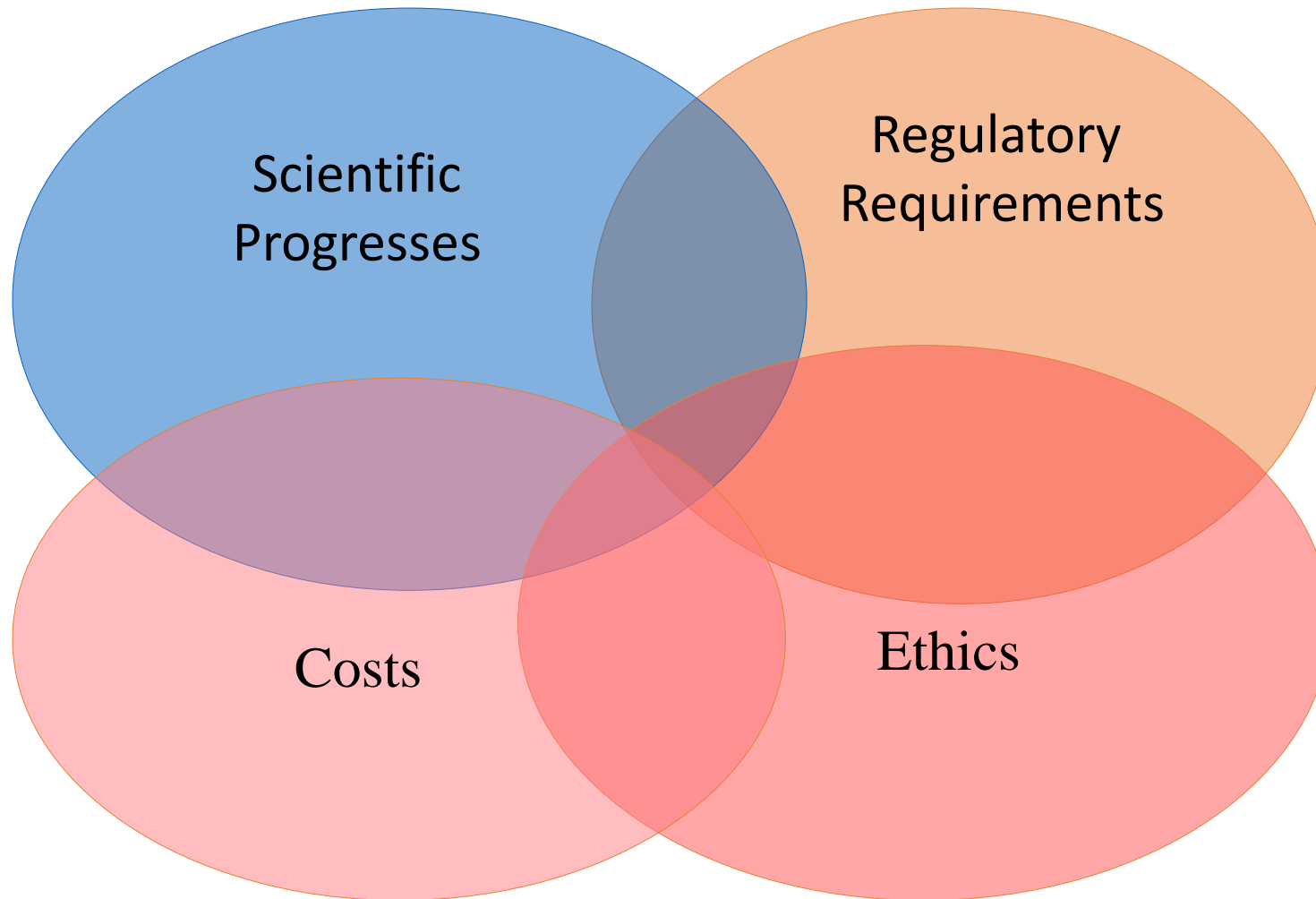
## Aims of Pediatric CICs in France (2000)

- **Develop** paediatric clinical research
- **Interact** with health care professionals and industry
- Participate to improve **trial design** (PK simulation, adapted bayesian design, paediatric tools etc...)
- Participate to **feasability, screening and inclusions, trial conduct**
- Participate to **training** (trial conduct, ethics...)
- Ensure close interactions with industries, specialized networks...

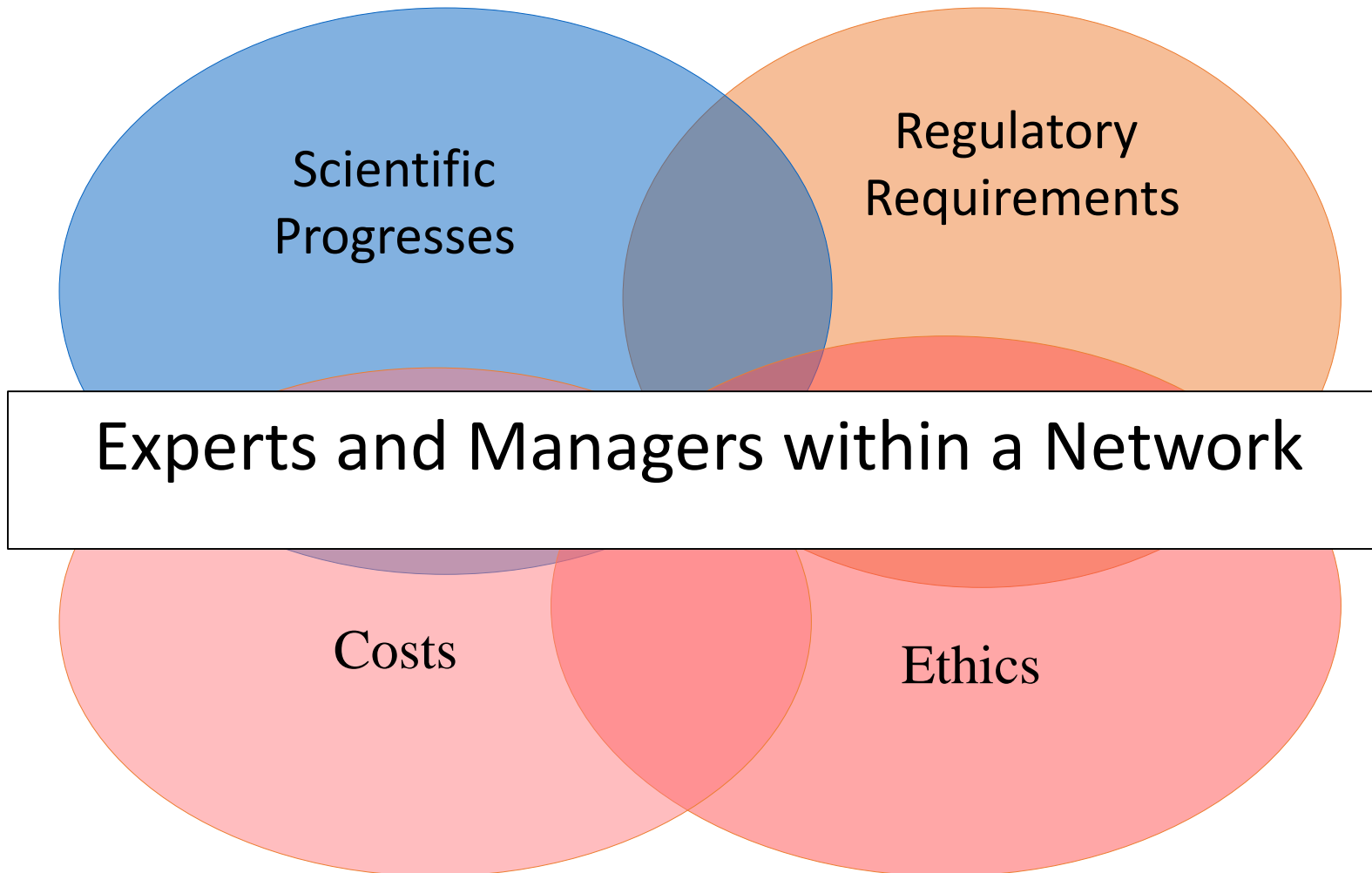
## The Paediatric CIC network today

- **Ensures the general coordination of high standard research activities and effective communication between sponsors, CIC partners, pediatricians...**
- Interacts at an early stage to **adapt drug evaluations** to children in the different age groups, and optimize drug evaluation : we have **experts** in pharmacology, methodology, epidemiology, statistics, modelisation in order to optimize trial design ...
- Provide competences required to perform studies in all pediatric area : researchers, paediatricians, research nurses, project managers, research and lab technicians...
- Harmonie **adapted tools – procedures** allowing the collaboration between partners
- Train health care professionals to evaluate feasibility, ensure trial conduct (screening, inclusions and follow-up)...under GCP, GLP and high ethical standards,
- **Coordinate the national organisation of paediatric drug evaluation through interactions with industries**

Comment augmenter l'évaluation des médicaments chez l'enfant  
CONCILE DIFFERENT OBJECTIVES



Comment augmenter l'évaluation des médicaments chez l'enfant  
CONCILE DIFFERENT OBJECTIVES



# Paediatric Clinical Investigation Center

- 15 Research units in a University hospital Pediatric team - pediatrician, nurses, research and lab technicians - dedicated to research
- Pediatric experts
- Research facilities : beds 24h hospitalisation, research lab, investigations for research ...

Activities : 50% academic, 50% industry trials  
75% drug related ...

Pediatricians : experts of different subspecialties

CIC Bordeaux : Pneumology / CRCM (Cystic fibrosis EU network)

CIC Lille : Gastro-entérology

CIC RDebré / Rennes / Tours : Néonatology (Neonatology network)

CIC Marseille : Oncology - Néphrology...

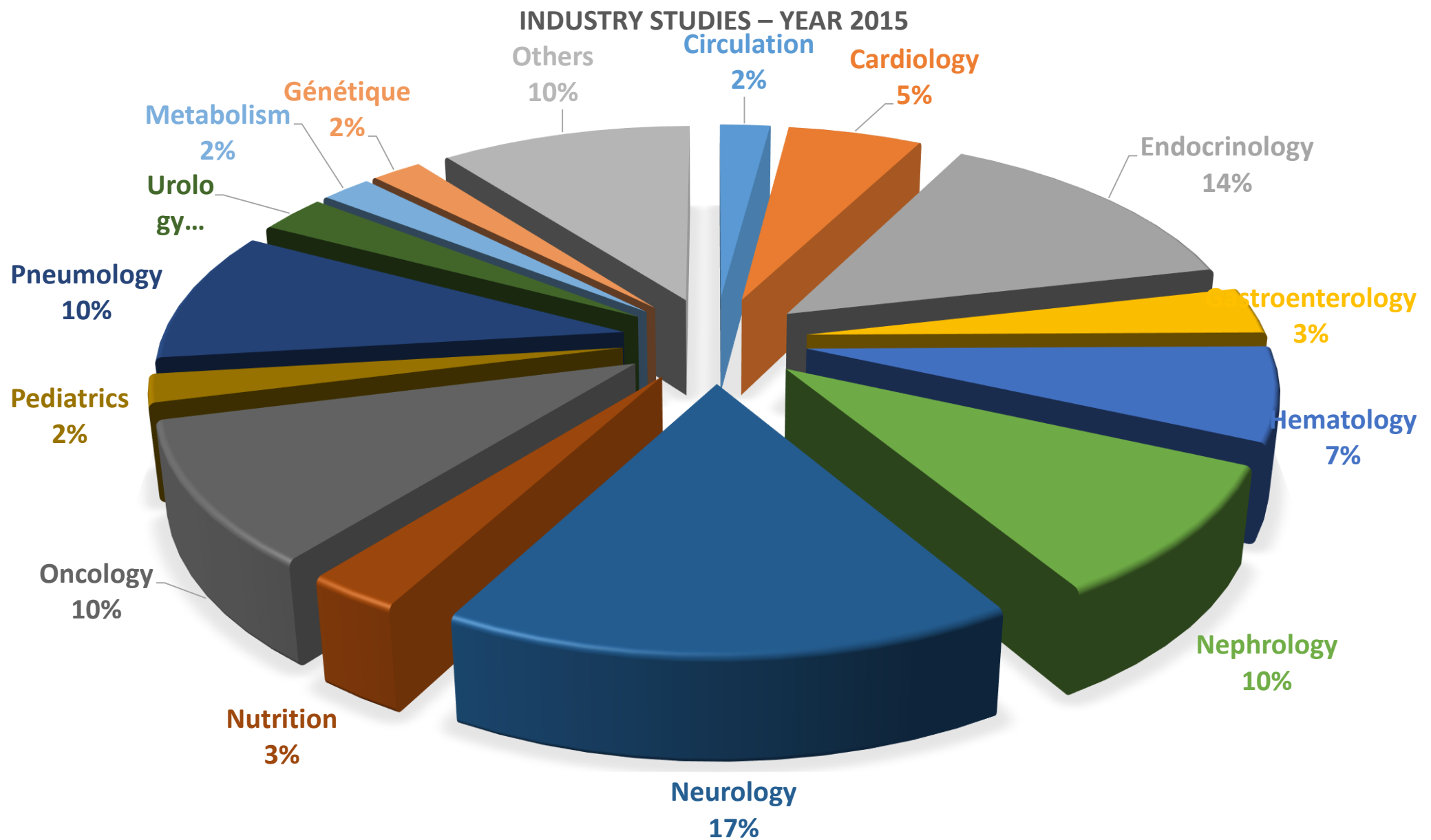
## CIC Hospital Robert Debré



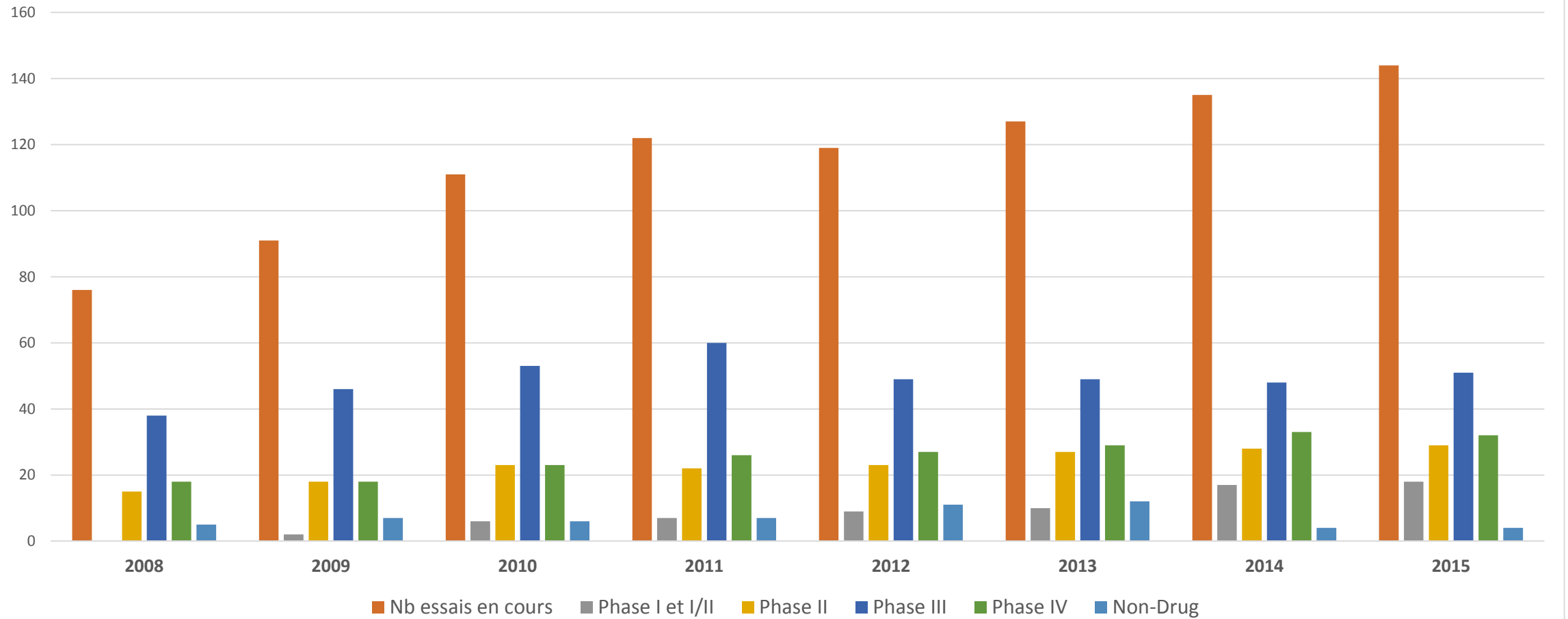


## Industry studies

<b>Drug trials</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>
New studies	32	29	35	39	31	36	36	41
<b>Active studies</b>	<b>76</b>	<b>91</b>	<b>111</b>	<b>122</b>	<b>119</b>	<b>127</b>	<b>135</b>	<b>144</b>
Studies closed	12	18	27	30	23	29	30	21



## Phases - 2008 à 2015



**Both the number of pediatric trials and « early trials (Phases 1 and 2) increases**

## Industry studies in the different CLC centers

Centres	2011	2012	2013	2014	2015
1*	28	34	37	49	41
2	/	/	2	2	5
3	9	6	4	5	3
4	2	2	1	0	2
5	5	6	9	11	7
6*	20	22	26	34	31
7*	29	25	28	29	24
8*	12	14	17	19	20
9	3	6	9	11	14
10	9	10	10	9	6
11	0	0	0	1	1
12*	20	22	26	26	41
13	12	9	9	13	9
14*	32	31	33	42	54
15	5	6	6	8	7

....Funds to support structures are not available / Industry funds are dedicated to sponsor specific drug trials

# Network activities

- Ethics – in collaboration with CIC – Bordeaux
- Training : exchanges between centers (Rouen) and within hospital (Neonatology)
- Collaboration with specialised networks / Experts
  - Neonatology (FS Neonatology)
  - Neurology (RIPPS)
  - Nephrology (FS Pediatric Nephrology)
  - EU projects : TINN, **GRIP**, Neovanc
  - EmprEMA

All EU pediatric networks / ECRIN

IMI project..

EPTCRI

EU projects

TINN (3)  
GRIP  
NeoVan

Pediatric CIC Network (n=15)  
Governing council

CIC  
LYON

Neurology  
**RIPPS**

CIC Lille

Urgences

CIC  
Bordeaux

CRCM  
EU CF

CIC Robert  
Debré

Nephrology

CICRDebré  
Rennes

Neonatology

# Points for discussion

**A network has to conduct both industry and academic trials :**

Industry trials focus on one drug...drug trials

We need also an evaluation of therapeutic strategies...

**Performances of « academics » are key issues always questioned :**

Optimisation of all delays ... (answer feasibility , optimize screening, increase quality ..)

**Interactions with industries can also be improved : design (and reference arm...),** delay between first contact (through CROs..), feasibility and real start, quality of interactions with industry « partners » ...., real evaluation of costs (not only on patients'costs...)

# Why a paediatric French « STRUCTURAL » network ?

There are many major scientific, practical and ethical issues in relation to studying medicines in children

- limited number of patients with comparable diseases in each site.
- need for adapted formulations
- need for suitable methodological approaches for clinical trials
- limited number of trained investigators with expertise in neonatal clinical trials (inadequate critical mass of investigators in any single European country)
- centralisation of information
- set up transversal procedures and avoid duplication of tasks
- need to optimize recruitment
- major ethical issues
- Interaction with “SPECIALIZED networks....
- Interactions with regulators



# Why a paediatric French « STRUCTURAL » network ?

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- need for adapted formulations
- need for suitable methodological approaches for clinical trials

- limited number of patients  
(inadequate sample size)

critical

- centralisation

- set up transversal procedures and avoid duplication of tasks

- **need to optimize recruitment**

- major ethical issues

- Interaction with “SPECIALIZED networks....

- Interactions with regulators

Registries

+++ Mobile research teams +++

trials

# CIC Pédiatrique – Hopital Robert Debré

