THE COORDINATION OF RARE DISEASES RESEARCH IN EUROPE:

THE EUROPEAN JOINT PROGRAMME ON RARE DISEASES

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TEDDY NETWORK GENERAL ASSEMBLY ROME, 14 OF JANUARY 2018

EUROPEAN JOINT PROGRAMME ON RARE DISEASES

Background of preparatory work

- March 2016 First discussions started at E-Rare strategic workshop in Barcelona
- August 2016 The Commission sends official invitation to MS to nominate experts to the EJP RD working groups
- October 2016 First meeting of the MS EJP RD expert group
- Dec 2016 Feb 2017 Preparation of the 1st Concept Draft of the EJP RD
- April 2017 2nd meeting of the MS EJP RD experts group
- Apr June 2017 nomination of new experts to future WGs
- June 2017 kick off meeting of the extended WGs of the EJP RD
- June Oct 2017 preparation of the 2nd Concept Draft of the EJP RD → more than 70 experts involved + 24 ERN coordinators representing EU, associated and non-EU countries
- 12 Oct 2017 2nd EJP RD Concept Draft sent to the EC and WGs + ERN Coo
- 17 Oct 2017 last meeting of the MS
- End Oct 2017 official publication of the WP 2018 2020 → kick off of the writing phase
- Oct Nov 2017 call for Letters of Interest
- 11 Dec 2017 Kick off of preparatory phase of EJP RD
- 31 Dec 2017 final identification of contributors
- 30 of March 2018 submission of the project



EUROPEAN JOINT PROGRAMME ON RARE DISEASES

OBJECTIVES

- Main objective: Create a research and innovation pipeline "from bench to bedside" ensuring rapid translation of research results into clinical applications and uptake in healthcare for the benefit of patients
- Specific objective: improve integration, efficacy, production and social impact of research on rare diseases through the development, demonstration and promotion of sharing of research and clinical data, materials, processes, knowledge and know-how, and an efficient model of financial support for research on rare diseases
- Union contribution: 55 M€
- **Total budget (min):** 78,5 M€ (→ expected > 110 M€)
- Foreseen number of partners: 70 100
- Foreseen number of participating countries: 29 including 23 EU MS, 4 associated (CH, IL, NO, TK) and 4 third countries (AU, CA, JP, USA)



EJP RD EXPECTED IMPACT

- Improve lives of rare disease patients by providing new and optimised treatment options and diagnostic tools for these diseases
- Decrease fragmentation of rare diseases expertise and research resources
- Increase the EU's capacity to innovate in the field of rare diseases
- Improve healthcare systems' capacity to take up research results
- Reinforce the EU's role as a global leader for rare diseases

RESULTS OF THE CALL FOR LETTERS OF INTENT

112 LOI received representing:

- 25 countries (AT, AU, BE, CA, CH, CZ, DE, DK, EE, ES, FR, HU, GR, IE, IL, IT, LT, LV, NL, PL, PT, SE, TK, UK, USA)
- o 24 ERNs
- o 31 « international » organisations (infrastructures, EURORDIS) + 3 charities

Share of interest between pillars:

- P1: 27 institutions from 20 countries (AT, BE, CA, CH, CZ, DE, EE, ES, FR, HU, GR, IE, IL, IT, LT, PL, PT, SE, TK) + EURORDIS + charities
- o P2: 71 institutions from 18 countries (AT, AU, BE, CH, DE, DK, EE, ES, FR, HU, IT, LV, NL, PL, PT, SE, TK, UK) + ERNs + international (infrastructures)
- P3: 51 institutions from 18 countries (AT, AU, CH, CZ, DE, EE, ES, FR, HU, IE, IT, LT, LV, NL, PL, PT, TK, USA) + international (EURORDIS; infrastructures) + ERNs
- P4: 32 institutions from 10 countries (BE, CH, ES, FR, IT, NL, TK, USA) + ERNs + charities + international (EURORDIS; infrastructures)

EJP RD STRUCTURE

& TRANSVERSAL ACTIVITIES

INTEGRATIVE RESEARCH STRATEFY

COMMUNCATION

SUSTAINABILITY

HELPDESK OFFICE - FAST TRACK TO SUPPORT & INFORMATION

1 FUNDING

COORDINATED ACCESS

2

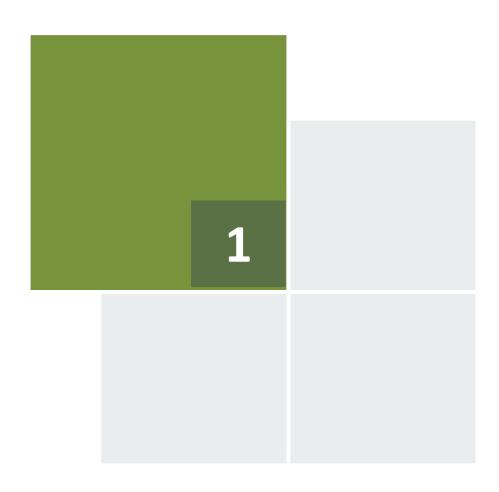
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CAPACITY BUIDLING

INNOVATION

4

PILLAR 1: RESEARCH COLLABORATIVE FUNDING



BACKROUND & JUSTIFICATION

- The need for funding of transnational cooperative research on Rare Diseases (RD) for reducing fragmentation of research and finding synergies across different actors in this field is evident
- Only few European countries fund research on RD through specific dedicated programs
- Complementary to EC funding, the E-Rare funding program has successfully implemented funding for transnational research projects for RD since 2007

Pillar 1 Chairs: Ralph Schuster (DLR, DE) Sonja van Weely (ZonMw, NL)

PROPOSED STRUCTURE

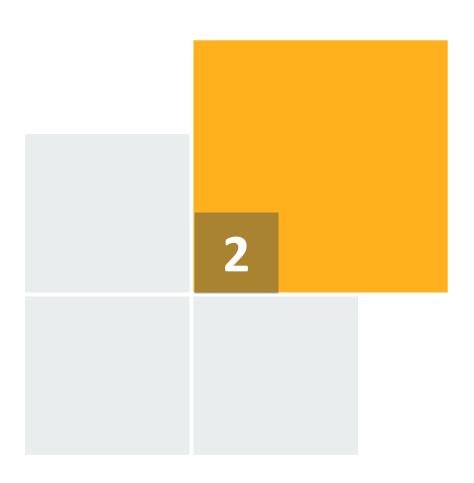
WP1: Joint Transnational Calls for collaborative research projects

WP2: Networking to share knowledge on rare diseases

WP3: Rare disease research challenges

WP4: Monitoring of granted projects

PILLAR 2: COORDINATED ACCESS TO DATA AND SERVICES



BACKROUND & JUSTIFICATION

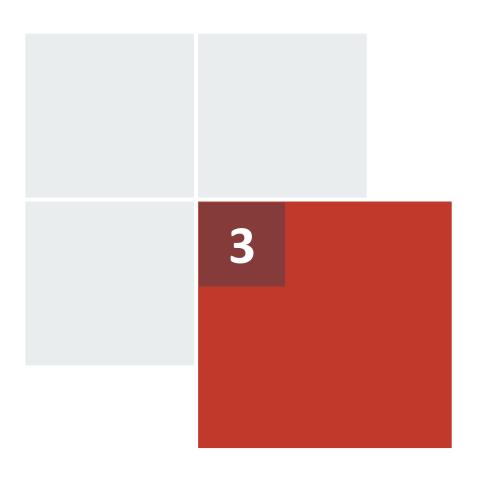
- <u>Existing fragmentation</u> of efforts, data and resources, too many <u>redundancies</u>
 between teams and projects
- Difficulties to re-use results of funded research that is often lost because of lack of sustainability or of anticipation
- Existing inefficiency and inefficacy into the whole research pipeline
- Need for optimisation of tools and resources already existing due to lack of awareness or lack of access
- Need to achieve the ambitious IRDiRC diagnosis & therapies goals

Pillar 2 Chairs:
Ana Rath (INSERM, FR)
Olaf Riess (Univ Tübingen, DE)

PROPOSED STRUCTURE

- WP1: Next-generation platform for data and resources for RD research
- WP2: Development and unification of infrastructures, technologies, data and standards to create a FAIR and federated next-generation information infrastructure for rare disease
- WP3: Developing innovative approaches of the transcribed and translated genome
- WP4: Innovative strategies for development of therapies for RD
- WP5: Innovative small funding service international brokerage system

PILLAR 3: CAPACITY BUILDING AND EMPOWERMENT



BACKGROUND AND JUSTIFICATION

- Patient-centered approach
- Key success factor for patient research partnerships is building the capability of researchers and patients to engage meaningfully with each other, maintain transparency and build trust
- Empowering stakeholders to contribute proactively and help inform research objectives
- Raising the level of knowledge and build capacity within the RD research and care community is critical to ensure equity and optimising outcomes for people living with rare diseases

Pillar 3 Chairs: Virginie Bros-Facer (EURORDIS) Birute Tumiene (Univ Vilnus, LT)

PROPOSED STRUCTURE

WP1: Training on data management & quality

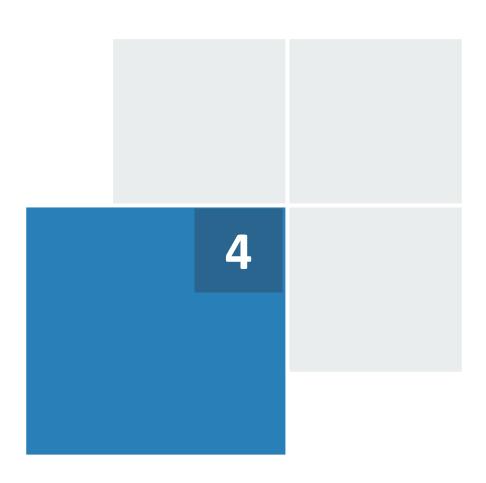
WP2: Capacity building & training of patients and researchers in RD research and processes

WP3: Online academic education courses

WP4: ERN RD training & support programmes



PILLAR 4: INNOVATION



BACKGROUND AND JUSTIFICATION

- The resources and expertise exists but is hard to reach, underused and still scattered
- Patient-driven research is often undertaken by small academic groups with limited possibilities of translation and funding resources
- Lack of structured and continuous support leading to the uptake of final results
- Fragmenting of cohorts between national/regional existing registries,
 biobanks and data resources with limited bridging possibilities
- Newly created ERNs are major resources for a proper and accelerated translation from bench to bedside of clinical programs

Pillar 4 Chairs: Rima Nabbout (Imagine, FR) Maurizio Scarpa (HSK, DE)

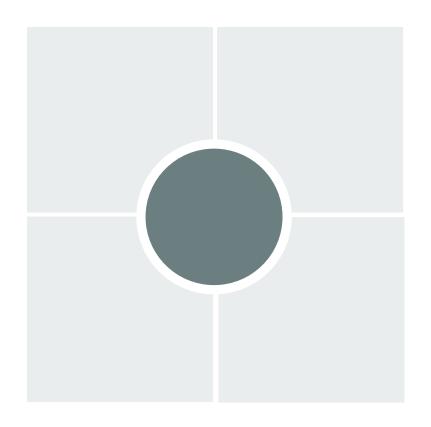
PROPOSED STRUCTURE

WP1: Support to accelerate translational research

WP2: Support to design of clinical trials

WP3: Public-public & public-private partnerships

TRANSVERSAL ACTIVITIES





TRANSVERSAL ACTIVITIES

STRATEGY

SUSTAINABILITY

COMMUNICATION & DISSEMINATION

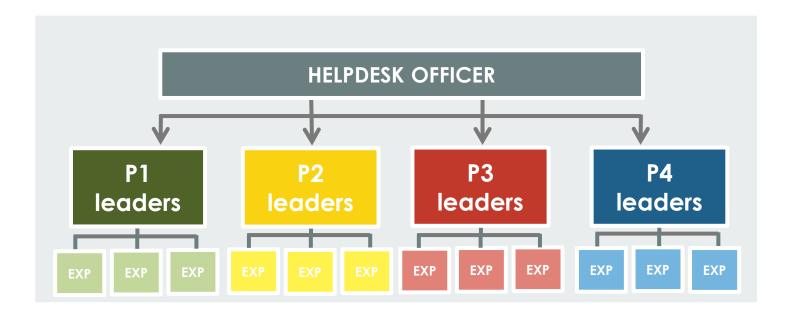
HELPDESK



TRANSVERSAL ACTIVITIES – HELPDESK

HELPDESK IS A FAST TRACK TO INFORMATION & SUPPORT

- A single entry point for the whole EJP RD
- It's role is to respond to questions/requests from the RD community in relation to the activities of EJP RD
- Based on the competences & experts of each of the pillars
- It is NOT replacing already existing helpdesks or supports of other organizations
 BUT facilitates the flow of information and provides response in a most rapid,
 structured and complete manner



E-RARE JOINT TRANSNATIONAL CALL 2018

TOPIC: Transnational research projects on hypothesis-driven use of multi-omic integrated approaches for discovery of disease causes and/or functional validation in the context of rare diseases

- With participation of 18 countries: AT, BE, CA, CZ, CH, DE, ES, FI, FR, GR, HU, IL, IT, LV, NL, PL, RO, TK
- Tentative budget above 18 M€
- Call opened on 7 December 2017 → pre-proposal submission deadline
 6 of Feb 2018
- Focus on collaborative projects on rare diseases (min. 3 teams from 3 different countries)
- Excluded: rare cancers, rare infectious diseases, rare adverse drug events/medical complications in treatments of common diseases & interventional clinical trials
- MORE INFO AT: WWW.erare.eu

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THANK YOU

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