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### IMI: Vision





New model for Public Private Partnership in Life Science

Focus on
 Efficacy in 5 Disease Areas,
 Safety,
 Knowledge Management and
 Education & Training



### **IMI**: Were we are today

- 1st Call launched April 30, 2008.
   Projects started from mid 2009 early 2010 (15 projects).
   Total Project Budget 280 Mio €.
- 2<sup>nd</sup> Call launched November 27, 2009.
   8 projects launched in Feb/March 2011
   Total Project Budget 180 Mio €.
- 3rd Call launched October 20, 2010
   Projects are currently put together (7 projects).
   "Fostering Patient Awareness On Pharmaceutical Innovation"
   ⇒ EUPATI
   Total estimated Project Budget in the range of 140 200 Mio €.
- 4<sup>th</sup> Call launched July 18 2011
   7 potential projects
- 5th Call and future Calls (2012 2013).

## Unmet need of patient and public on information on therapeutic innovation



- Drug development: a highly regulated, costly, long and complex process, largely unknown to the public
- Patients and patient advocates
  - seek up-to-date, correct, understandable and credible information about innovation in treatments
  - are largely unaware about clinical trials, translational research, personalized medicine, pharmacoeconomics - and their potential supportive roles in those areas
  - lack the education and training required to participate as a partner in drug research and development (R&D) - from participation in clinical trials to advising on protocol design, informed consent and ethical review process, marketing authorization, value assessment and healthcare policy
- FP7-funded PatientPartner project demonstrated
   a clear need and willingness of
   patient advocates to contribute to
   pharmaceutical R&D

## What is the European Patients Academy on Therapeutic Innovation?





- initiated and led by key European Patient Advocacy organisations
- the key European initiative to develop and provide objective, credible, correct and up-to-date public knowledge about medical research
- a paradigm shift in empowering patients and the public to understand medical research and how to contribute to it
- a strong multi-stakeholder consortium of patient organisations, academia, NGOs and industry

## EUPATI: European Patients' Academy on Therapeutic Innovation

- develop and disseminate accessible, well-structured and user-friendly information and education resources on therapeutic innovation
- build competencies among well informed patients and the public about pharmaceutical R&D
- build expert capacity in patient advocates
- create the leading public library on patient information in six most common languages
- establish a widely used, sustainable infrastructure for objective, credible, correct and up-to-date knowledge
- facilitate patient involvement in R&D to support industry, academia, authorities and ethics committees

## **EUPATI:** Outreach to advocacy leaders and public at large





### **Topics addressed by EUPATI**

	Implementation by WP4 task forces				EUPA C
Needs Assessment	Content Sourcing	Content Development	Quality Control	Quality Assurance/ Validation	Delivery / Deployment
TF1: Med	dicines deve	lopment proc	ess from res	earch to app	roval
TF2: Per	sonalized ar	nd predictive i	medicine.		
TF 3: Dru	ıg safety an	d risk/benefit	assessment	of medicines	
TF 4: Ph	armaco-eco	nomics and h	ealth technol	ogy assessn	nent.
TF 5: De	sign and ob	j <mark>ectives of cli</mark> r	n <mark>ical trials</mark> (&	involved stak	eholders)
	tients roles of the comment of the c	& responsibili	t <mark>ies in innov</mark> a	ative medicin	ies

# EUPATI – led by 4 key pan-European patient associations with broad outreach





#### European Patients Forum

- EUPATI Project coordination
- 50 umbrella patient organisations. Through 'members of members', potential outreach to 150 million patients



#### European Genetic Alliance Network

 Linked with national and regional patient alliances in Germany, Eastern Europe, Italy, Netherlands, United Kingdom and Ireland, Sweden, Spain, Italy, Greece and Balkan countries



#### EURORDIS – Rare Diseases Europe

 Representing 479 rare disease organisations in 45 different countries (25 EU countries)



#### European AIDS Treatment Group

More than 100 members in over 30 countries.

## Academic & research excellence in the consortium



















- Strong academic impetus from key academic partners, e.g. Universities of Manchester and Copenhagen, with unique expertise in core aspects of the project
- Some organisations of consortium have an academic or science arm, or are effectively 'academic networks' themselves.
- Project staff of consortium, both public and private partners, have strong research or academic track record
- Project Advisory Board includes some of the most renowned and well respected academics in the field in Europe
- EUPATI Network will gather a wide range of academic expertise to feed into the project and provide a vibrant intellectual and challenging platform

## Industry partners contributing to EUPATI



#### **Partners**



### Contribution



































- In line with the IMI philosophy most major pharmaceutical companies (15) and two national pharma associations from major EU countries participating
- Contributing with expertise e.g. in modern R&D and IT, communication/dissemination and with cash contribution to fund logistics of the project
- Independence and governance will be closely monitored by EUPATI's advisory boards

### Uniqueness of the partnership

- Unique and unprecedented partnership between patient organisations, other public partners and pharmaceutical industry based on the philosophy of the IMI
  - Unique in IMI that EUPATI is patient- and not industry-led
  - Opportunity to establish an effective, transparent and credible partnership
  - Exceptional learning experience for industry representatives to work with patient organisations in a constructive and reflective manner, which could serve as a role model in other environments as well
  - Making best use of industry expertise in medicines R&D, incl. e.g. the legislative environment and development of ITP as required by law
- Opportunity to strengthen the voice of the patients in the search for innovation and new medicines
- Chance to reduce fear, lack of trust and misconception among patients regarding the pharmaceutical industry



## Mechanisms to ensure independence and credibility of EUPATI

- QUEILLE
- Quality control in task forces and by experts. Materials will be tested/validated prior to dissemination
- **EUPATI Regulatory Advisory Panel** involving 4 regulatory bodies EMA, BfArM, Swissmedic, MHRA.
  - ensures objectivity, transparency, impartiality and independence of EUPATI's content
  - supervises adherence to the 'Core Quality Principles of information to patients on diseases and treatment options' (Pharmaceutical Forum)
  - Provides guidance and advice to the project teams
- EUPATI Project Advisory Board with leading independent experts from different areas, including Cochrane
- EUPATI Ethics Panel with genuine ethics expertise,
- Effective Codes of Practices in place
  - EUPATI Code of Practice
  - EUPATI Ethical Framework
  - EFPIA 'Code of Practice on Relationships between the Pharmaceutical Industry and Patient Organisations'

## More Information on www.patientsacademy.eu





#### Web:

www.patientsacademy.eu

#### **Twitter:**

@eupatients

### Thank you!

























**EATG** 















Boehringer Ingelheim











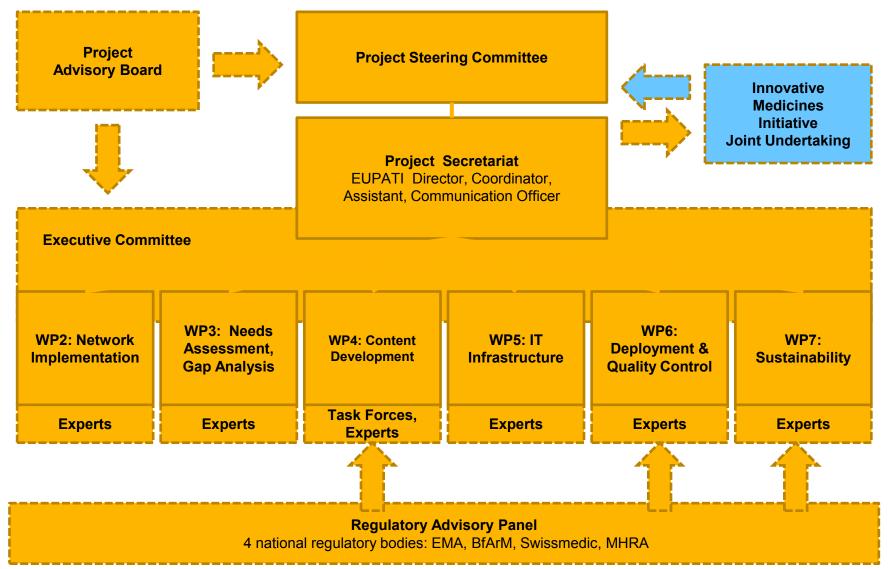




### backup slides

### **Governance structure**







### Work Packages and Work Plan

on Therapeutic Innovation

	Preparation Phase M1-18	Confirmation Phase M19-48	Sustain Phase M49-60
WP1 Coordination	Project management tools, communication tools, financial manual	Work plans, Project management, Communication and	ctivities, evaluation, reporting, IMI Interface
WP2 Network Implem.	Establishment of the EUPATI Network	Annual Conferences, Network meetings, Regio Development of Ambassador Programme	
WP3 Needs Assessment & Gap An.	Needs & gap analysis, Review of existing education material, focus groups	Quantitative survey, Peer review publication	
WP4 Content Dev.	Strategy development, e.g Syllabus for course+toolbox	dology and content development, development and production o Toolbox and IT Platform, translation work	Extension, refinement, quality control
WP5 IT Infrastr.	Design, Development and support of ted	chnical infrastructure, technical framework for EUPATI IT Pllatfo	rm and eLearning
WP6 Deploy- ment & Quality Assurance		First course performed EUPATI IT Plat	form launch  Deployment dissemination & evaluation,, Events and trainings
WP7 Sustainability	Research on Patient Partnership models  Research on Best practice guidel Recommendation teaching methor	ine dev., Development of code of conduct for patient involvement	nability concept dev.  New technologies and future remit strategy

## EUPATI in 2012-2016: What we will have achieved



- EUPATI platform fully loaded with training, education, information material in multiple languages
- EUPATI Patient Ambassador, Patient Journalist, Train-the-Trainer Programme in place
- Good practice guideline for patient involvement released
- Annual Conferences and at least 5 Regional Workshops performed. Expert network established.

## **Beyond EUPATI: Creating sustainable impact beyond 2016**



### **EUPATI** will develop:

- New and innovative concepts that will ensure more active involvement of patient experts in pharma R&D, HTA
- Guidelines for interaction between stakeholders, ethical principles and best practice procedures.
- Best practice guidelines for patient involvement in research and drug development from trial design to study implementation, safety monitoring, approval, access, reimbursement, pharmacovigilance and benefit/risk assessment.
- Road map for future collaboration with highly innovative sectors of industry, including and beyond the pharmaceutical industry, and Health Authorities

## Supported by leading advisors, strengthening independence, governance



### **Project Advisory Board**

- Prof. Jean-Jacques Cassiman, Head of the Centre for Human Genetics, Catholic University of Leuven, Belgium
- Dr. Vincenzo Costigliola, President, European Medical Association, Brussels, Belgium
- Dr Karen Facey, HTAi Interest Group for Patient/Citizen Involvement, UK
- Prof. Jozef Glasa, Professor of Clinical Pharmacology & Therapeutics, Hepatology and Medical Ethics/Bioethics at the Slovak Medical University in Bratislava, Slovakia
- Prof. Panos Kanavos, Senior Lecturer in International Health Policy at London School of Economics, London UK
- Dr. Klaus Koch, Institut für Qualitat und Wirtschaftlichkeit im Gesundheitswesen (IQWiG), Germany
- Prof. Finn Børlum Kristensen, Director of Coordinating Secretariat and Chairman of Exec Committee, EUnetHTA
- Britta Lang , German Cochrane Centre, Germany
- Peter O'Donnell, Associate Editor, European Voice, Brussels, Belgium
- Kathy Oliver, Patient advocate, Director of the International Brain Tumour Alliance (IBTA),UK
- Prof. Munir Pirmohammed, Department of Health, Chair of Pharmacogenetics, University of Liverpool, UK
- Ysbrand Poortman, Patient advocate, Vice President of the WAO, The Hague, and Secretary General IGA, Washington
- Anke Steckelberg, EBM Expert, University of Hamburg, DE
- Victoria Thomas, Head of Patient and Public Involvement Programme, National Institute for Health and Clinical Excellence, UK

### Regulatory Advisory Panel

- BfArM Birka Lehmann, Dir. and Prof, Alternate: Dr. Anne-Isabel Roth, Clin. Assessor
- **EMA** Isabelle Moulon, Head of Medical Information Sector
- MHRA Prof. Sir Alasdair Breckenridge, Chairman of the Board. Alternates: Dr. June Raine, Director of Vigilance Risk Management of Medicines (VRMM); Jeremy Mean, Access and Information for Medicines and Standards Group Manager
- Swissmedic Dr. Petra Dorr, Head of Management Services and Networking, Member of the Management Board, Alternate: Cordula Landgraf, Head of Networking

