



Innovative Medicines Initiative

# IMI 2: The New European Engine for Therapeutic Innovation

Michel Goldman  
*Executive Director*

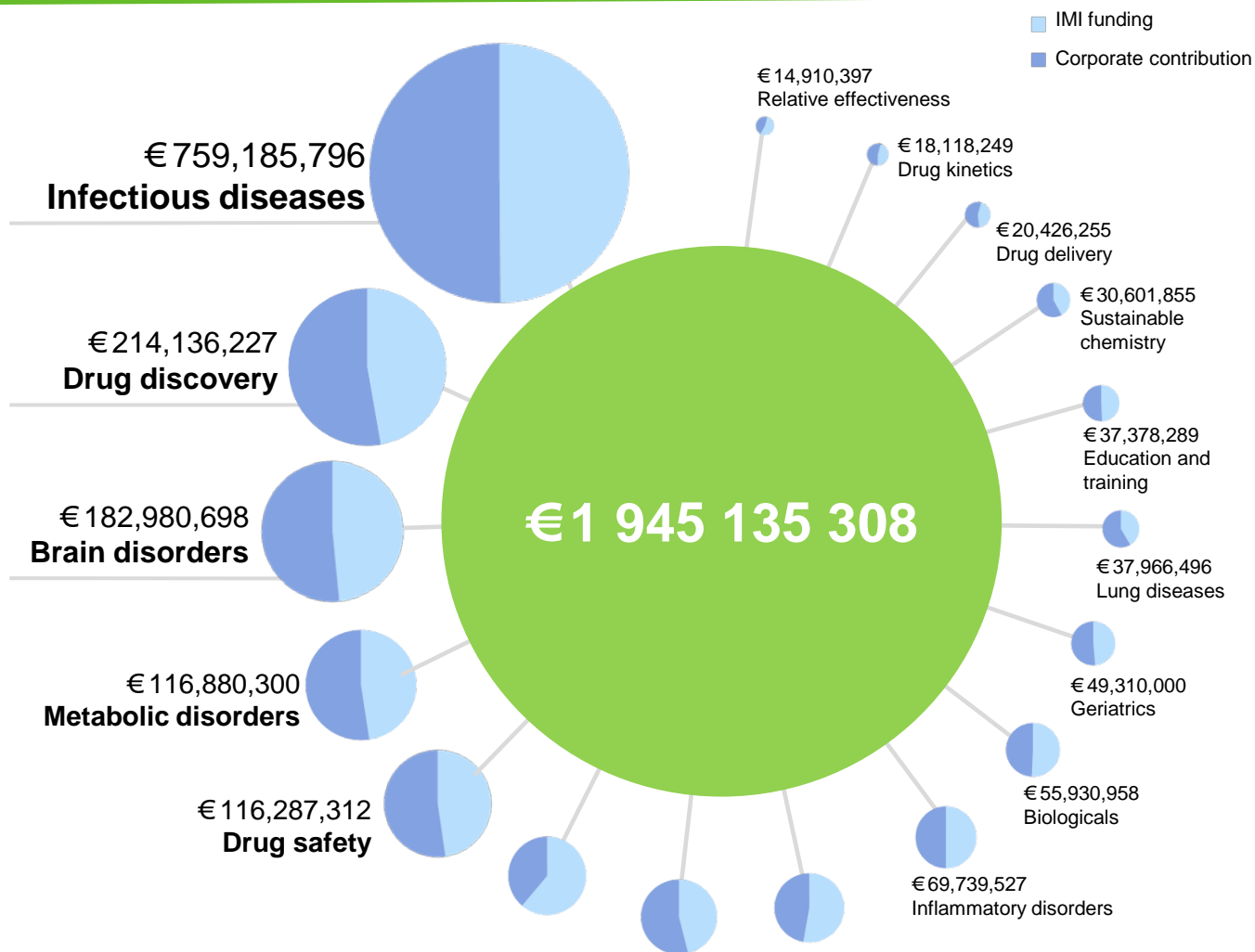
# Joining forces from public and private bodies

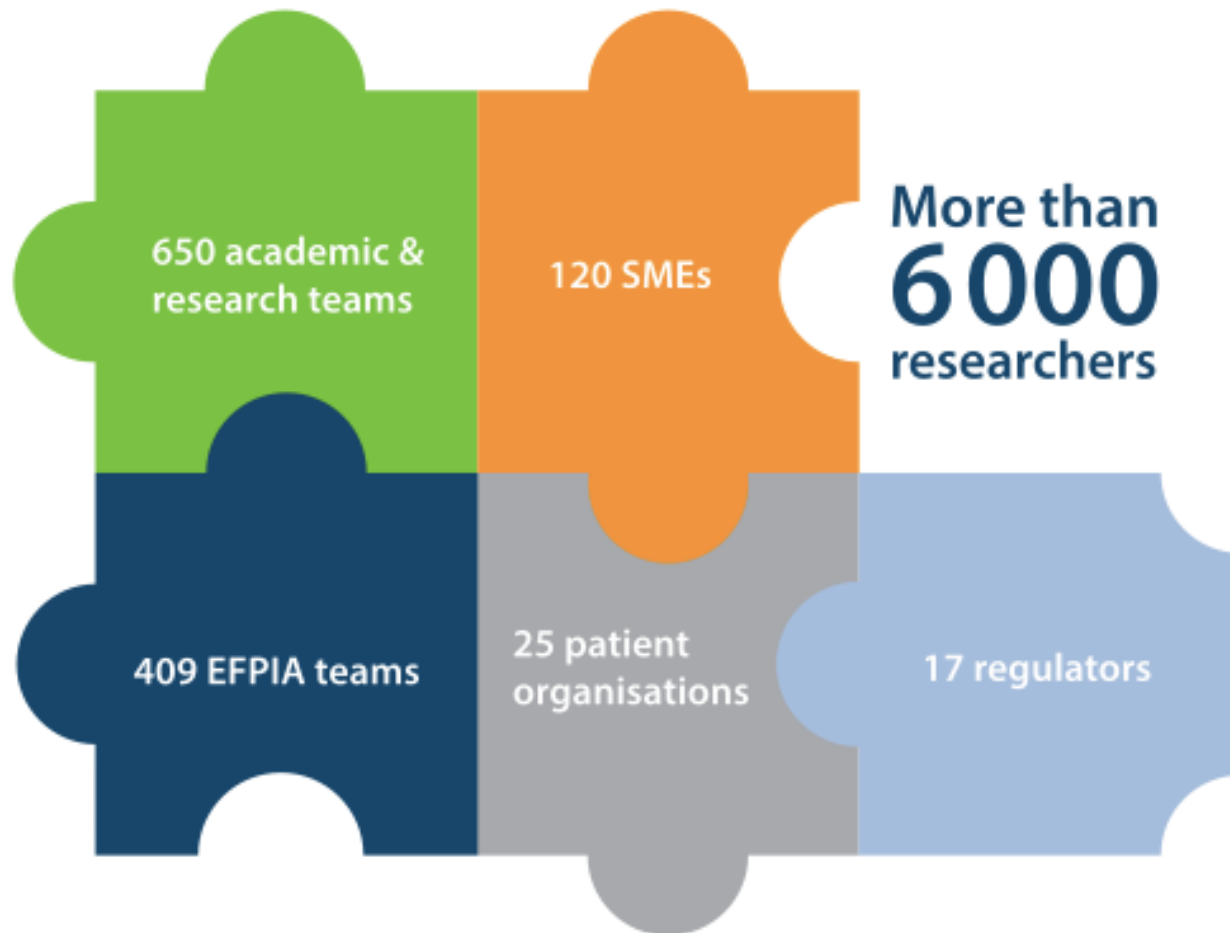


**\* IMI 1+2  
2008-2020**



# IMI1: budget breakdown





## Working for

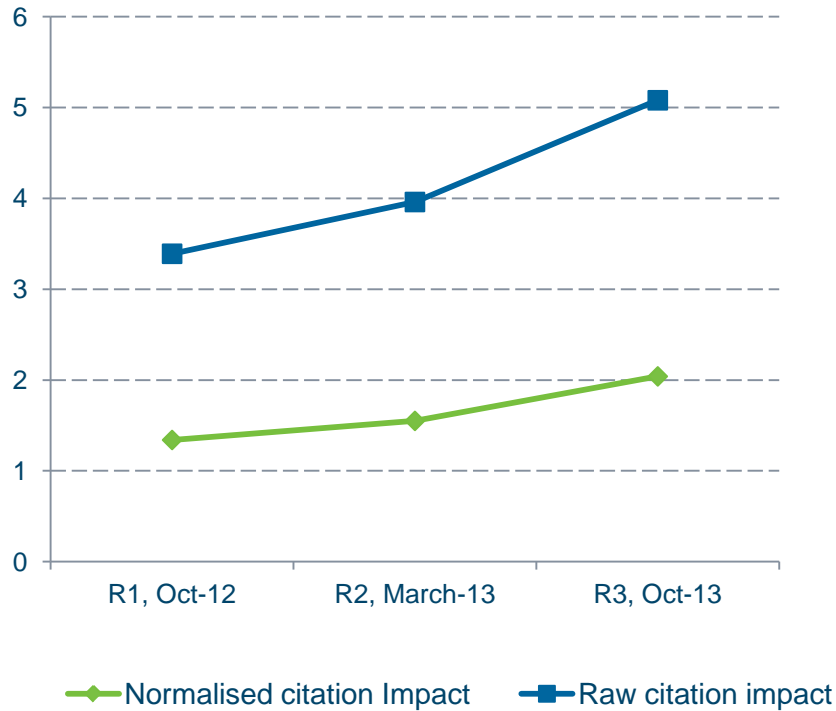
- Collective intelligence networks
- Improved R&D productivity
- Innovative approaches for unmet medical needs

# Quality increases over time

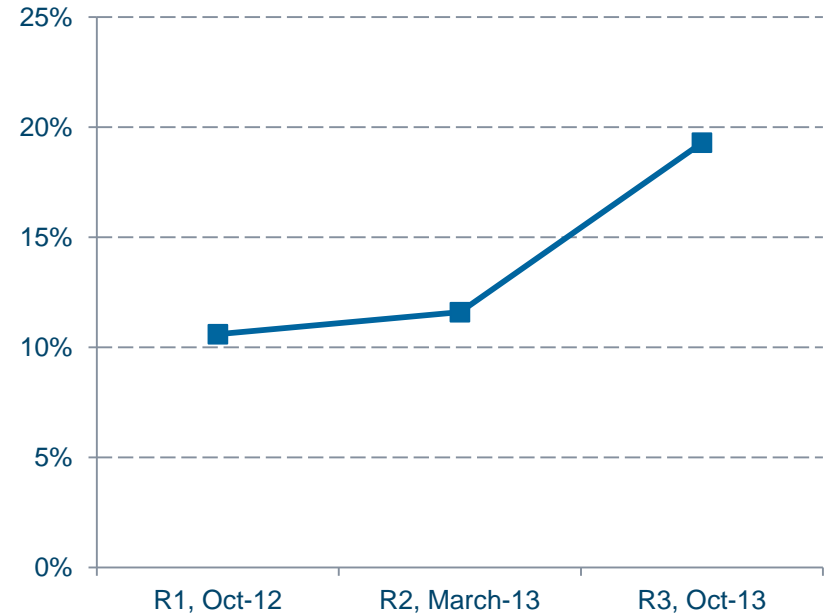
*Bibliometric indicators trend analysis*



### Citation impact



### % highly cited papers

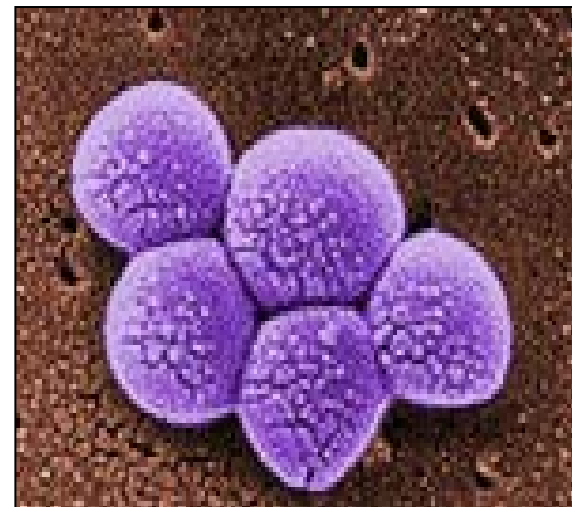


# Antimicrobial resistance – a growing threat

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**25 000**

Europeans killed / year



**€1.5 bn**

costs to economy / year

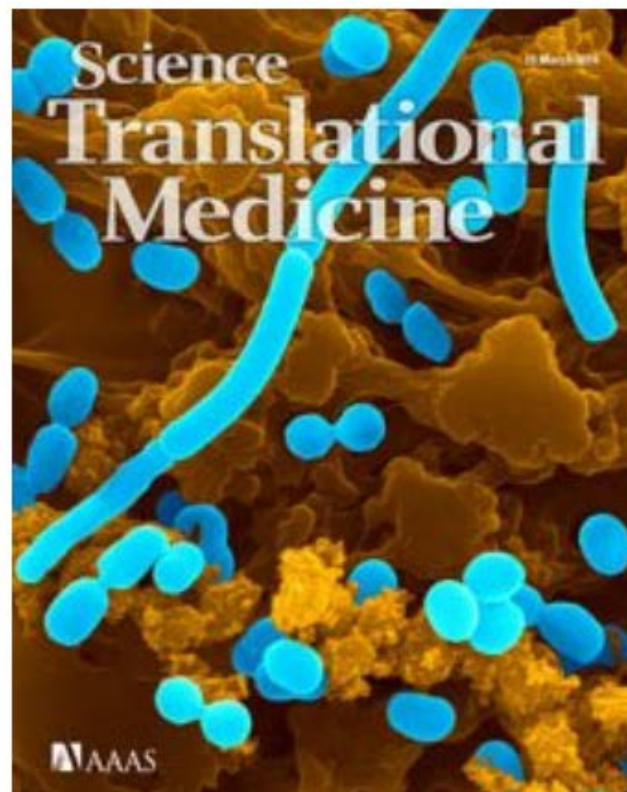
**2** new classes of antibiotics  
in the last 30 years

COVER STORY | EDITORIAL

## How to Get Good Drugs into Bad Bugs

*Robert A. Stavenger, Mathias Winterhalter*

The **TRANSLOCATION** project deciphers how to help antibiotics penetrate the surface of Gram-negative bacteria.



# ALZHEIMER'S DISEASE:

## An urgent need for new therapeutic strategies

### Major Public Health Need

- **10m** Europeans affected, will reach **14m by 2040**
- Annual cost in EU: **€180b**, will reach **250b by 2030**

### Recent failures

#### Inconclusive results of 3 large clinical trials:

- solanezumab
- bapineuzumab
- human immunoglobulins

### Hurdles to drug development

**Complexity of brain pathology**

**Patients' heterogeneity**

**Lack of validated markers for disease activity**



# How IMI addresses Alzheimer's disease

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IMI invests **€167 million** in 4 projects aiming at:

- Developing models to predict the efficacy of drug candidates in patients
- Connecting data on 40 millions of individuals to decipher links between genetic background, biological abnormalities, brain imaging changes, mental symptoms and disease progression
- Identifying subgroups of the disease allowing to tailor therapies according to the different causal factors involved
- **Implementing innovative trial designs**



# AUTISM SPECTRUM DISORDERS:

## A paradigm for non-competitive Public-Private Partnership

### Major Public Health Need

**1% children affected**

**High societal burden**

- Lifetime cost: €3mi/patient
- UK annual cost: €40 billion

### Distrust in past-research

**MMR vaccine allegation**

**Psychoanalytic theories (France)**

### Hurdles to drug development

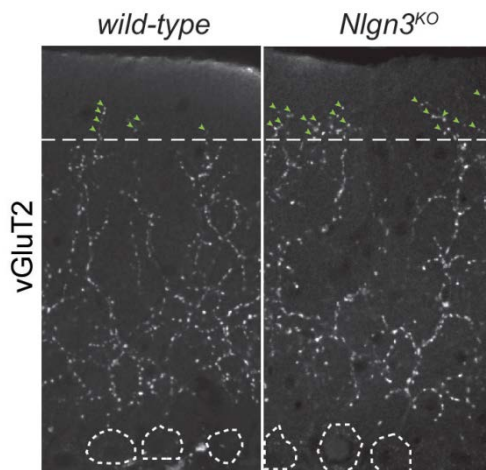
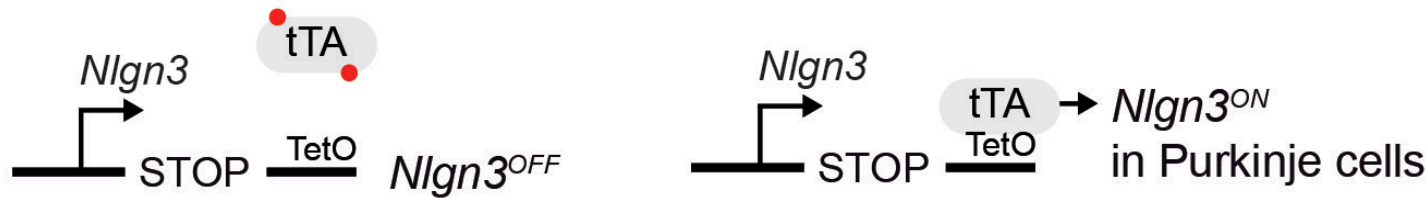
**Complexity of brain circuitry**

**Patients heterogeneity**

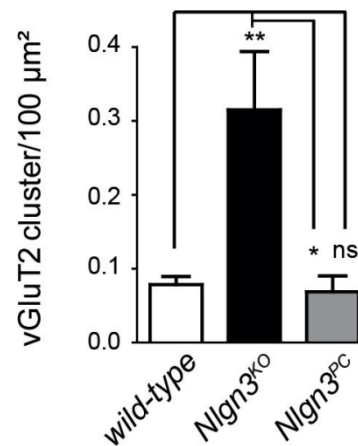
**Lack of validated markers for disease activity**

# Neuronal Alterations are Reversible

Re-expression of Nlgn3 in adolescent mice restores normal mGluR1 protein levels and results in removal of ectopic



Density of ectopic vGluT2 clusters



Baudouin et al.,  
*Science*, 2012

- 1 21 March 2013  
2 EMA/CHMP/40896/2013  
3 Committee for Medicinal Products for Human Use (CHMP)

- 4 **Concept paper on the development of Medicinal**  
5 **products for the treatment of Autism Spectrum**  
6 **Disorder**

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Agreed by CNS Working Party	February 2013
Adopted by CHMP for release for consultation	21 March 2013
Start of public consultation	4 April 2013
End of consultation (deadline for comments)	4 July 2013

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Comments should be provided using this [template](#). The completed comments form should be sent to [CNSWPsecretariat@ema.europa.eu](mailto:CNSWPsecretariat@ema.europa.eu)

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Keywords	Autism, Paediatric population, Asperger's Disorder, Rett's disorder, Childhood disintegrative disorder and Pervasive Developmental Disorder – not otherwise specified
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## Shared data set of patient-level data from:

- 5 companies (AstraZeneca, J&J, Eli Lilly, Lundbeck, Pfizer)
- 34 clinical trials testing second generation anti-psychotics
- 11,670 patients



### Drug-placebo differences already significant:

- after 4 vs.6 wks observation
- with 40% less patients

when appropriate gender balance, symptoms and disease duration are selected

Rabinowitz J et al., J Clin Psychiat 2014, in press

# DIABETES:

## Fighting the epidemic through Public-Private Partnership

### Major Public Health Need

Diabetes will affect 43  
million Europeans in 2030

€89 million spent on 2011  
on treating diabetes and its  
complications

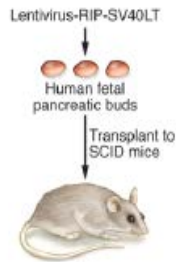
### Distrust in past-research

Cardiovascular  
complications of  
rosiglitazone and  
benfluorex

### Hurdles to drug development

Patients' heterogeneity

Lack of reliable markers  
for disease activity and  
complications



Related Commentary, page 3395  Technical advance

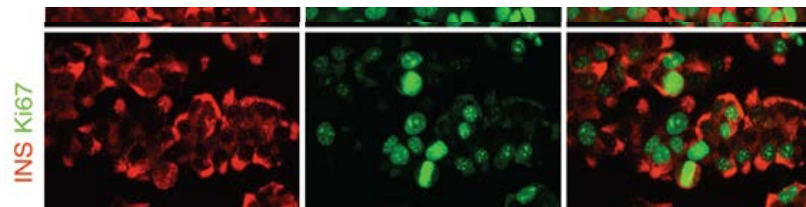
## A genetically engineered human pancreatic $\beta$ cell line exhibiting glucose-inducible insulin secretion

Philippe Ravassard,<sup>1,2,3</sup> Yasmine Hazhouz,<sup>2,4</sup> Séverine Pechberty,<sup>4,5</sup> Emilie Bricout-Neveu,<sup>2,4</sup>

# Finally! A human pancreatic $\beta$ cell line

**Gordon C. Weir and Susan Bonner-Weir**

Section on Islet Cell Biology and Regenerative Medicine, Research Division, Joslin Diabetes Center, and Department of Medicine, Harvard Medical School, Boston, Massachusetts, USA.



The Journal of Clinical Investigation <http://www.jci.org> Volume 121 Number 9 September 2011



# PROTECT



EUROPEAN MEDICINES AGENCY

+

4 other regulatory agencies

12 EFPIA companies

11 Academic institutions

1 Patient coalition

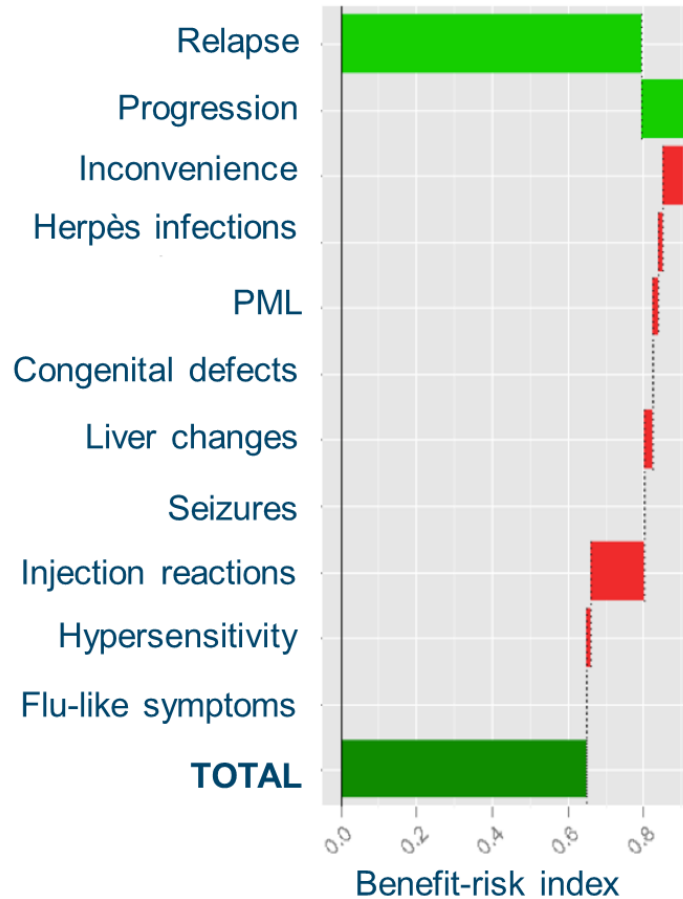
2 SMEs

Budget: 29.8 Mi €

# Advancing benefit-risk assessment methods



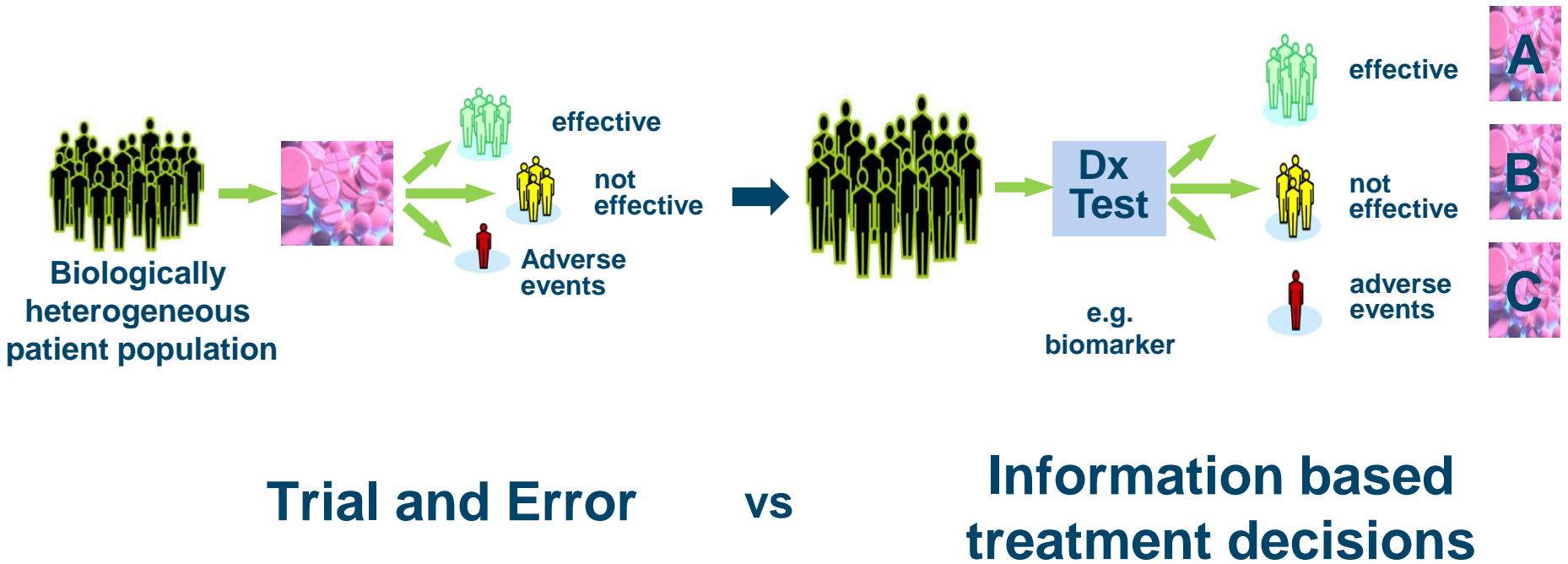
## Case study: **Natalizumab**



efpia



# The Vision for IMI2 – The right prevention and treatment for the right patient at the right time



## Priority Themes

1. Neuro-degeneration
2. Immuno-inflammation
3. Metabolic disorders
4. Infection control
5. Translational Safety

## Support Technologies

1. Imaging
2. ICT
3. Medical devices....

## Enablers

### Patient access to innovative solutions (MAPPs):

- Target validation
- Stratified medicine, precision medicine
- Innovative trials
- Data generation and interpretation
- Prevention, disease interception
- Patient adherence
- Health disease management
- Regulatory framework
- Reimbursement/patient access

# IMI2 - Broad participation to be able to set ambitious goals

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**IMI is evolving, with a stronger focus on the needs of patients and society and with simpler rules and procedures**

## **Evolution in scientific focus**

- Stronger focus on needs of patients and society, including unmet needs
- Increased emphasis on improving patient access to innovative medicines (in addition to medicines development)
- **The right treatment for the right patient at the right time**

# IMI2 - Broad Participation to achieve ambitious goals:

**Bigger budget: 3,45 Billion Euro, equally shared by EU and industry**

- **Not limited to EFPIA members**
- **Open for other industries / companies, which can contribute to the PPP goals (Healthcare IT, medical devices,...) giving them the opportunity to establish their own projects**

Specified Budget: 225 million Euros reserved (to be matched by in kind/cash contributions)

## ➤ 2 Topics:

### 1. Discovery & validation of novel endpoints for retinal diseases

- ✓ Technical, medical and health economic appropriateness of new methods including imaging methods and patient-reported outcomes;
- ✓ Bridging pre-clinical and clinical studies.

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### 2. Translational approaches to modifying therapy of type 1 diabetes

- ✓ In-depth characterization of type 1 diabetic patients using “omics”, electronic records, databases, biobanks...;
- ✓ Bridging pre-clinical and clinical studies.

*For more information: [magda.gunn@imi.europa.eu](mailto:magda.gunn@imi.europa.eu)*

- All relevant Call materials is available on IMI's website:  
<http://www.imi.europa.eu/content/>
- Launch of first call: **9<sup>th</sup> July 2014**  
**EoI submission: 12 November 2014**
- 2nd Call: mid-December 2014

Thank you  
[www.imi.europa.eu](http://www.imi.europa.eu)



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