Boosting Drug Development through Public-Private Partnerships: The IMI Model

Hugh Laverty Senior Scientific Project Manager





EMA Human Scientific Committees' Working Party with Patients' and Consumers' Organisations (PCWP) – 30 Nov 2012



# **Key Hurdles in Pharma R&D**



- Disease heterogeneity
- Lack of predictive biomarkers for drug efficacy/ safety
- Insufficient pharmacovigilance tools
- Unadapted clinical designs
- Societal bottlenecks



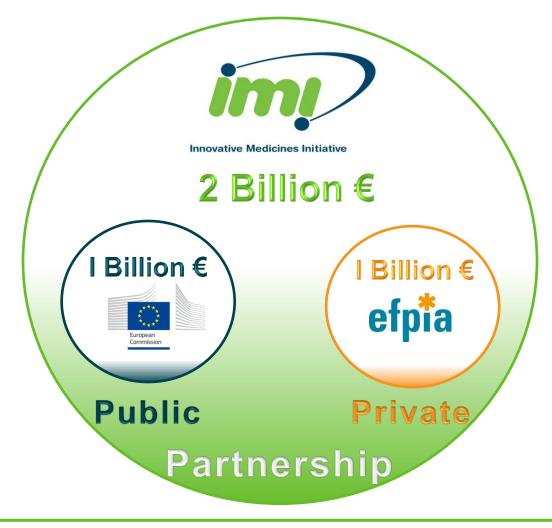
Lack of incentive for industry





# **Innovative Medicines Initiative:** *Joining Forces in the Healthcare Sector*









# **Key Concepts**



# "Non-competitive" collaborative research for EFPIA companies

Open collaboration in public-private consortia (data sharing, wide dissemination of results)

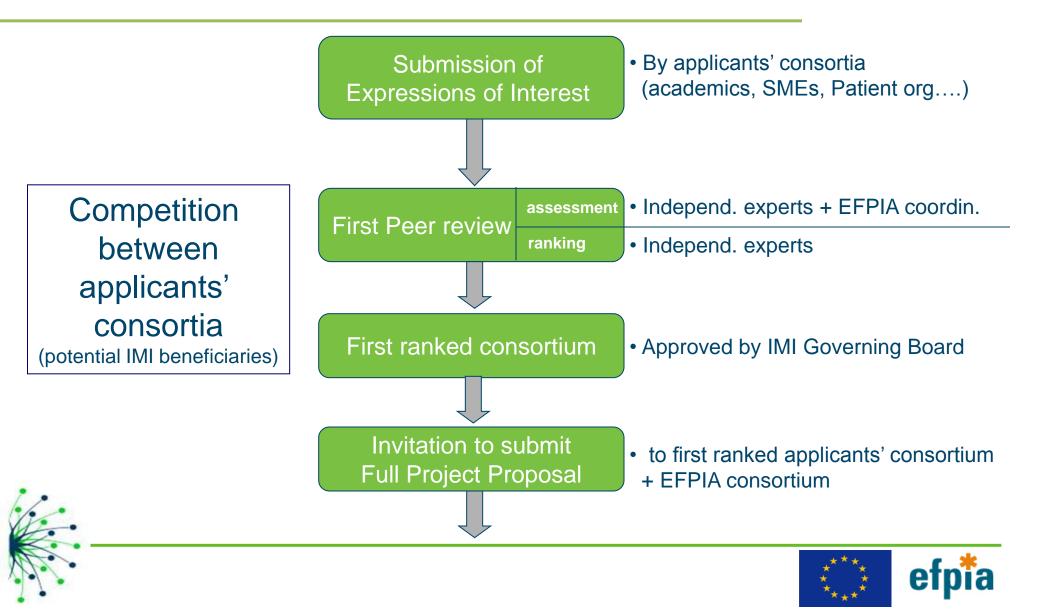
 Competitive calls to select partners of EFPIA companies (IMI beneficiaries)





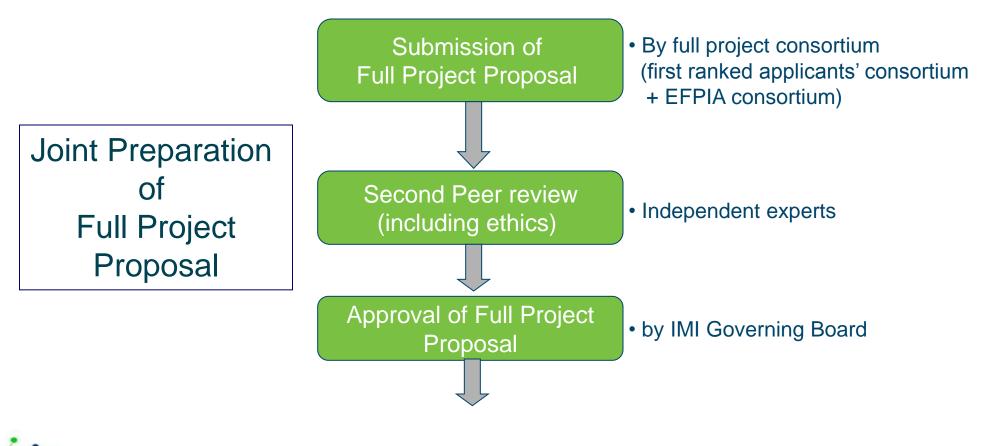
# **Building an IMI Project (1/2)**





# **Building an IMI Project (2/2)**



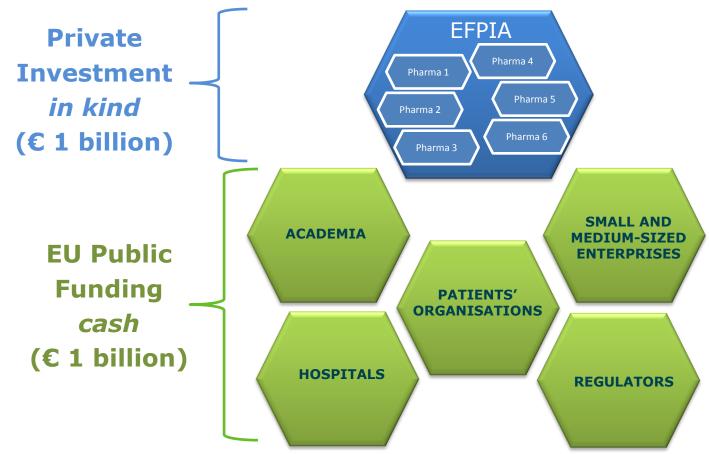






# **A Typical IMI Consortium**









#### **OPINION**

#### Public-private partnerships need honest brokering

Michel Goldman

Given the current challenges in research and development, it's increasingly apparent that collaboration between large pharmaceutical companies, academic teams and biotechnology enterprises is essential for converting basic biomedical discoveries into lifesaving medicines. But these partnerships work best when a neutral third party helps foster them.

A trickling pipeline of new products at many pharmaceutical companies has led to a paradigm shift in the industry's research and development (R&D) strategy. Indeed, the integrated R&D model in which every step of drug development is conducted in-house has proved largely inefficient in delivering the novel therapies needed to address major health challenges. Therefore, this model is being progressively replaced by open innovation networks that allow the leveraging of external pools of knowledge, especially in universities and biotechnology companies<sup>1</sup>.

The pharmaceutical industry realizes that the best approach is to apply an open innovation concept to precompetitive research that encourages companies to share expertise. These principles were the cornerstones of the Critical Path Initiative launched by the US Food and Drug Administration in 2004, which led to the creation of the Critical Path Institute, an Arizona-based nonprofit dedicated to fostering collaborations between industry, academia and regulators<sup>2</sup>.

Across the pond, the Innovative Medicines Initiative (IMI), a public-private partnership between the EU and the European Federation of Pharmaceutical Industries and Associations, is a prototypic example of an organization created to support open innovation and pre-competitive research in the pharmaceutical sector. It has raised awareness about the principles of open collaboration and has launched several education and training programs for scientists from industry or academia interested in drug development and

"A neutral organizer is key to ensure the sustainability of public-private partnerships and to restore trust in and among the stakeholders committed to the development of innovative therapies."

transparent competition, rather than through preexisting connections. For this reason, IMI organizes a competitive process to identify the best partners to match with the pharmaceutical companies that, for their part, invest considerable resources in the projects, propose the research topics and most often coordinate the projects.

This leading role of industry, which distinguishes IMI from most other public-private partnerships, guarantees the optimal exploitation of the knowledge created and its dissemination by the research consortia. As an example, within one of the IMI consortia for diabetes, the optimal exploitation of the first human beta cell line useable for the development of antidiabetic drugs<sup>4</sup> was made possible by the partnership between the academic team that made the basic discovery, a small enterprise that commercializes the cell product and the large pharmaceutical enterprises that will develop drug screening assays relying on this innovative tool.

Ensuring that consortia operate in a balanced manner in terms

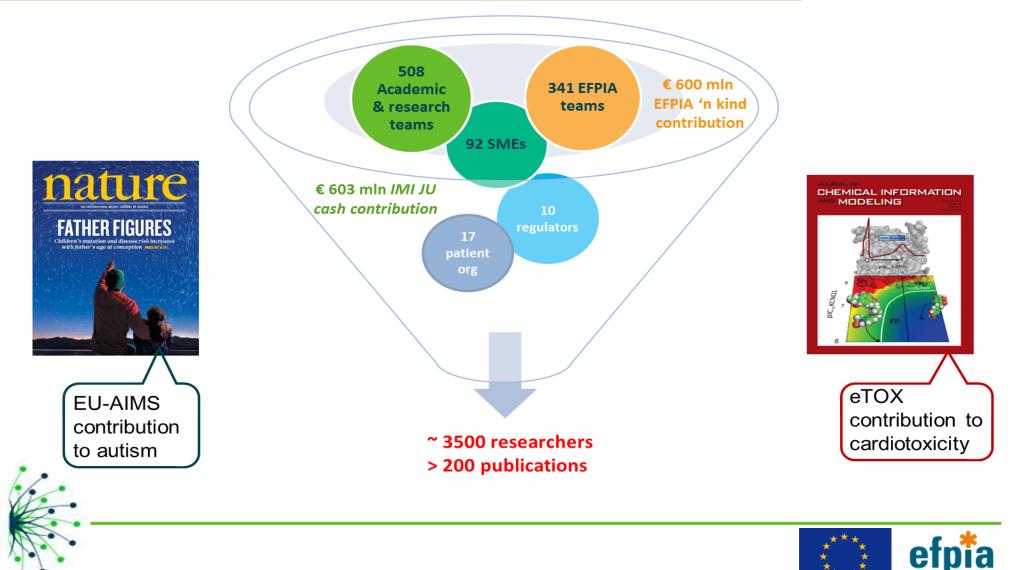
of intellectual property and allocation of resources requires a neutral party that can act as a referee whenever needed. To address this need, IMI facilitates consortium agreements by playing the role of impartial broker. A key mission of a neutral body such as IMI is, of course, to ensure the sound management and allocation of public funds in the interest of both industry and society. Here, IMI develops performance indicators suited to measure the added value of public-private partnerships<sup>5</sup>. As an example, IMI is closely

# Nature Medicine 18: 341, 2012



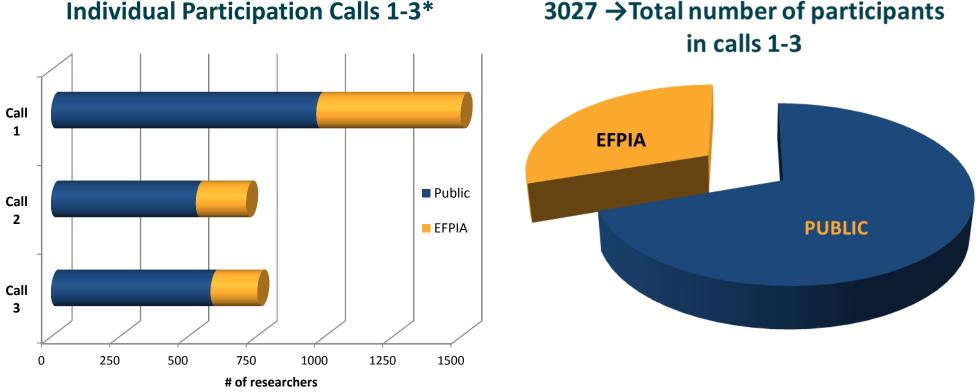


# Key Figures of 37 On-going Projects









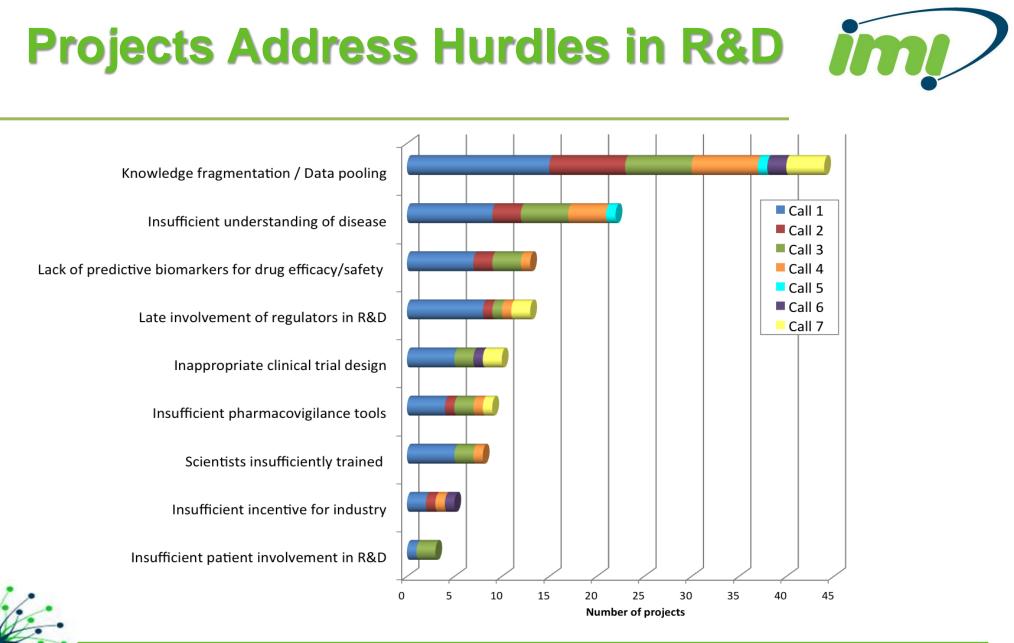
**Individual Participation Calls 1-3**\*

#### On average in calls 1-3 there are 100 participants per project

\* the numbers are based on the data available and might be underestimated

(data sources: staff listed in the Technical Annex, for call 1 also data from interim reviews and project websites)







# How Does IMI Improve R&D Productivity?

im

Establishment of robust validated models for drug development

e.g. first human  $\beta$  cell line - diabetes, Tg models - AD, translatable challenge models – AD, chronic pain

#### Elimination of poorly predictive pre-clinical models

#### Novel biomarkers

e.g. AD, pain

#### Novel targets

e.g. pain



e.g. in silico model to predict cardiac toxicity, translational biomarkers - cardio, renal and hepatotoxicity



# How Does IMI Improve R&D Productivity?



Agreeing development and regulatory submission of key standards for drug development

e.g. diagnostic criteria - severe asthma, virtual carotid histology - diabetic macroangiopathy, biomarker qualification strategy

Developed new international consensus for definition of severe asthma

- New patients reported outcome in COPD
- More efficient patient enrolment in clinical trials (localisation of patients for targeted clinical trials)

e.g. clinical investigator network - antibiotic development and autism, patient involvement, electronic health records



Faster and cheaper clinical trials

e.g. schizophrenia, Alzheimer's disease



# **Closer Look – CNS Disorders**



Expected output	nemeds	PharmaCog	EU-AIMS Autism Research in Europe	Eur <b>o</b> pain
Mechanistic knowledge	<	×	√	<
Patient stratification	<	≺	<	<
Standardized model - in vitro -			×	
Standardized model - in vivo -	×	×	×	√
Predictive biomarkers - genetic -	×	×	×	
Predictive biomarkers - "omics" -	×	√	×	
Predictive biomarkers - "imaging" -	×	<	×	
Early involvement of regulators		×	×	



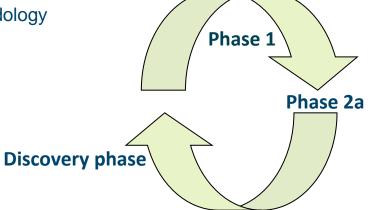


#### Novel Methods leading to New Medications in Depression and Schizophrenia



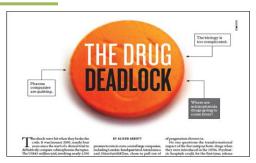
✓ Identified phenotypes associated with schizophrenia CNVs (1300 subjects)

- ✓ Developed animal models carrying the CNVs
- ✓ Developed animal-human imaging methodology



 ✓ Validated cognitive and electrophysiological batteries in animal models

 14 animal models of schizophrenia evaluated in a proteomic markers panel



Nature, 11 November 2010

- ✓ 2 Clinical trials initiated
- Workshop on Negative symptoms held



- The largest databases: schizophrenia trials (> 23,000 patients) and treated depressed populations (2146 DNA samples)
- Clinical trials in schizophrenia modified
- $\checkmark$  <u>depressiontools.org</u>  $\rightarrow$  clinical meaningfulness calculator



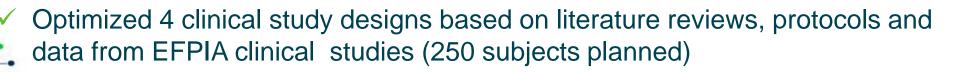
# Advancing Science and PharmaCog Treatment of Alzheimer's Disease

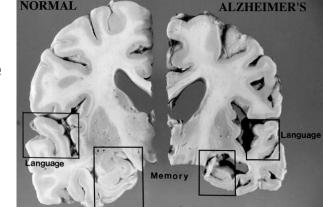
#### The Objective:

To develop and validate the models required to increase the effectiveness of the drug discovery process in Alzheimer's disease

#### **Progress:**

- Established a translatable challenge model based on sleep deprivation in three different species
- Development of a translatable, cognition touchscreen methodology for rodents (NEWMEDS)
- Identified novel biomarkers that follow disease progression in Tg mice







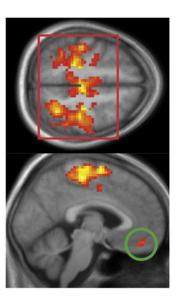




# Understanding Chronic Pain and Improving its Treatment



#### **Progress:**



✓ Identification of CXCL5 as novel translatable pain target (Dawes et al, 2011)

✓ Pooling data from 43 trails to understand the mechanism of action of pain medications and identify factors important in placebo response

✓ Developed translatable experimental models: evoked pains (cold), neuronal activity (µENG), quality of life (anxiety), imaging biomarkers

✓ Discovered new imaging biomarkers of brain activation related to chronic pain: "Predictors of response – a randomized, double-blind, placebo-controlled, cross-over study" on-going at two sites in Denmark

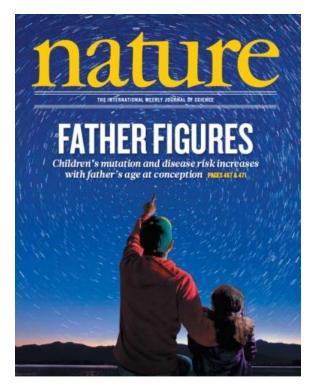






## Developing New Knowledge on Autism Spectrum Disorders





As a man ages, the number of de novo mutations in his sperm increases, and the chance that his child would carry a deleterious mutation that could lead to autism or schizophrenia increases proportionally.



# **Science Publication - Autism**



11 stories, 3 top-tier



#### Animal Study Offers Prospect Of Autism Treatment

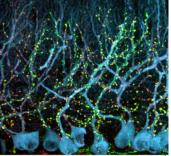
Roche, in collaboration with Seaside Therapeutics, is testing treatments for autism spectrum disorders, targeting the mGlu receptors.

#### Roche: New Findings From A Preclinical Study Of Autism

"The pharmaceutical company Roche along with the Biozentrum has discovered new insights to the study of autism."







#### The Emerging Biology of Autism Spectrum Disorders

"Synaptic connections in the brain of an autistic mouse"

#### New Scientific Research Attacks Behaviors In Autism

"According to Swiss drug maker, Roche Holding, Changes in the brain caused by autism can be reversed in mice, a new preclinical study showed, opening a potential path to develop a treatment for the incurab

# **Closer Look – Respiratory Disorders**



Expected output	U-BIOPRED		PREDICT-TB
Patient stratification	√		
Standardized model - in vitro -	×		<
Standardized model/tools - in vivo -	×	×	<
Predictive biomarkers - genetic -	×		√
Predictive biomarkers - "omics" -	×		√
Predictive biomarkers - "imaging" -			√
Patient involvement	*	×	
Early involvement of regulators	×	×	<





# Unbiased Biomarkers in the Prediction of Respiratory Disease Outcome







#### The Objective

Developing biomarker profiles from molecular, physiological, and clinical data integrated by into *handprints* for the prediction of clinical course, therapeutic efficacy and identification of novel targets in the treatment of severe asthma

#### Progress

- Developed an international consensus on diagnostic criteria
- Creating novel phenotype 'handprints' by combining molecular, histological, clinical and patient-reported data – validation and refining is on-going
- Two novel animal models have been identified (FCA/HDM, CT & MRI imaging of chronic HDM model)
- Preparation and recruitment for cohort clinical study have started, 14 centres across Europe targeting 1025 subjects, to validate the handprints for their predictive efficacy in gold standard and experimental therapeutic intervention





# Physical activity as a crucial patient reported outcome in COPD



#### The Objective:

To develop, validate and approve a new patient reported outcome capturing the experience of Physical Activity by patients with COPD

#### **Progress:**

✓ Evaluated 104 PA instruments with  $\approx$  500 publications, 2000 items, 16 qualitative studies, 91 validation studies → draft of the conceptual model

✓ Developed a conceptual framework based on available evidence and 23 one-to-one interviews + 8 focus groups of 55 patients in 4 different countries

✓Completed investigation of 6 activity monitors in laboratory studies, field studies and the usability study– 2 monitors were selected



✓Completed initial validation of PRO tools - 5 centers, 280 patients → one of the largest validation study undertaken in COPD



# **Closer Look– Diabetes**



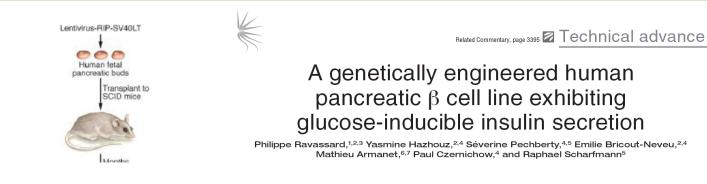
Expected output	European combined excellence	SUMM T		
Knowledge management tool	≺	<	×	<
Mechanistic knowledge	✓	<		
Patient stratification		<		<
Standardized model - in vitro -	~			
Standardized model - in vivo -	×	×		<
Predictive biomarkers - genetic -		×		<
Predictive biomarkers - "omics" -	~	×		<
Predictive biomarkers - "imaging" -	~	×		<
Early involvement of regulators		~		





# inidia IMIDIA: New knowledge on $\beta$ cells



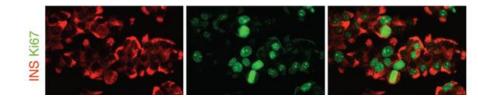


# Finally! A human pancreatic $\beta$ cell line

#### 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



# SUMM Surrogate markers for micro- and macro-vascular hard endpoints in diabetes



#### The Objective

Development of surrogate markers for micro- and macro-vascular complications in diabetes to predict risk and monitor the effect of interventions

#### **Progress:**

- Phenotype definitions
- GWAS large scale data generated, genome associations candidates identified

(5000-T1D, 7300-**T2D nephropathy,** T2D/CVD 13700 )

- Completed lipodomics and progressing metabolomics screening initial analysis identified candidate biomarkers (>2700 readouts)
- Developed first prototype for virtual carotid histology patent application! (20000 carotid exams performed)
- Established new animal models



# eTOX: In silico toxicology



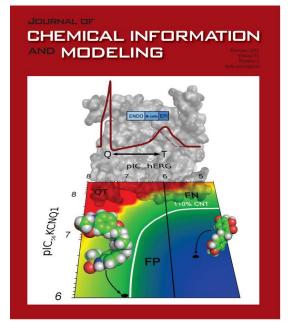
- Builds a large searchable database containing drug toxicity-related data extracted from relevant pharmaceutical pre-clinical legacy reports
- Develops innovative methodological strategies and novel software tools to predict toxicological profiles in silico

#### **25 Partners**

- 13 EFPIA companies
- 8 Public organisations
- 4 SMEs

#### **First achievement**

An innovative multi-scale modelling strategy for the prediction of cardiotoxicity has been developed, successfully tested and published



J. Chem. Inf. Model. 51:483-92 (2011)





## eTOX: A key role for SME

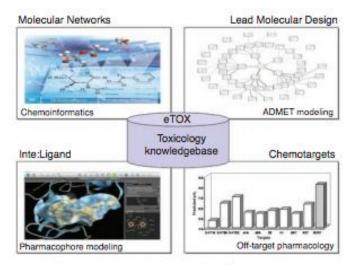


#### Shaping the future of safer innovative drugs in Europe

#### To the Editor:

An Editorial entitled "Members need only apply" published in the July issue<sup>1</sup> expressed concerns about the input of small- to medium-sized enterprises (SMEs) into the agenda of the Innovative Medicine Initiative (IMI) Joint Undertaking. The editorial argued that the SMEs currently participating in IMI projects do not represent the whole spectrum of companies that make up the innovative biotech space in Europe. We would like to address these criticisms in the context of the eTOX consortium, one of the projects funded following the IMI's first call for proposals in 2008 and specifically singled out for comment in the Editorial.

The eTOX consortium comprises 11 European pharmaceutical companies, 8



<sup>1</sup>Chemotargets, IMIM–Hospital del Mar, and University Pompeu Fabra, Barcelona, Catalonia, Spain. <sup>2</sup>Inte:Ligand, Vienna, Austria. <sup>3</sup>Lead Molecular Design, Sant Cugat del Vallès, Spain. <sup>4</sup>Molecular Networks, Erlangen, Germany.

e-mail: jmestres@imim.es

Figure 1 Innovative SME contributions to the integrative *in silico* toxicology approach currently under development within eTOX, an IMI EU project.



#### Nature Biotechnology, 29: 789, 2011





# SAFE-T: Development of novel biomarkers for drug development



OPEN CACCESS Freely available online

PLOS ONE

Real Time Identification of Drug-Induced Liver Injury (DILI) through Daily Screening of ALT Results: A Prospective Pilot Cohort Study

Development of liver injury alert algorithm for real time patient assessment and comparison with the efficacy of the routine examination

The new strategy was much more efficient in identifying potential liver injury incidents, **12x more** cases were identified than with the standard strategy

The cases identified with the centralized strategy were much milder allowing for timely intervention



This new approach presents a significant improvement in timely identification of DILI cases and will allow faster intervention to prevent from more serious events, such as liver failure





# **SOWHAT?**

## How are your results improving R&D productivity?

## How is your project impacting patients?

How will the project outcomes improve healthcare?









	COORDINATOR	Duration of the project (months)	Maximum IMI JU contribution (Mio EUR)
TOPIC 1 - EMIF	GSK	60	24,356,849
TOPIC 2 - eTRIKS	AstraZeneca	60	10,309,818
TOPIC 3 - COMPACT	SANOFI	60	10,184,921
TOPIC 4 - OrBiTo	AstraZeneca	60	8,975,392
TOPIC 5 - CHEM21	GSK	48	9,829,638
TOPIC 6 - StemBANCC	ROCHE	60	26,000,000
TOPIC 7 - K4DD	BAYER	60	8,286,932
TOTAL			97,943,550





# **5th Call: European Lead Factory**





 Industry partners will have access to unique high-quality Joint European Compound Library

≥ 300.000 compounds from industry partners – €60m 'in kind' contribution 200.000 compounds from public partners

- Industry-like lead discovery platform available for public projects focus on value generation
- ✓ Addressing 'intractable targets'
- ✓ 48 high throughput screening projects per anno
- ✓ Support in assay development

Sustainable model for the screening centre to establish independent business entity





# 6<sup>th</sup> Call for Proposals 2012 "Combating Antibiotic Resistance" NEWDRUGS4BADBUGS (ND4BB)









#### The crisis of no new antibiotics—what is the way forward?

#### Laura J V Piddock

Antibiotic use not only underpins modern medicine, but has brought huge changes to the world, especially in expectations of survival of children into adulthood. The theme of World Health Day, 2011, was "antimicrobial resistance: no action today and no cure tomorrow". The demise of antibacterial drug discovery brings the spectre of untreatable infections. To prevent this crisis immediate action is needed and a new initiative, Antibiotic Action, has been launched. By bringing together communities who need these drugs with academia, health-care professionals, and pharmaceutical companies, this initiative aims to strengthen and enhance academic-industrial partnerships, bring about revision of costly and laborious processes of licensing and regulation of new antibiotics, and address the economics of antimicrobial drugs (cost of use *vs* profit). A global alliance for antibiotic drug discovery and development would provide a platform for these initiatives.

#### The looming crisis

Many articles in medical and scientific journals and the press have documented the problems of rising numbers of antibiotic-resistant bacteria.<sup>1,2</sup> Recently, some articles have revealed the impending catastrophe linked to the failure to develop new antibiotics and its implications for the practice of modern medicine.<sup>3-7</sup> The discovery, development and widespread use of antibiotics are

and others still cause serious global health concerns (eg, *Mycobacterium tuberculosis* and *Neisseria gonorrhoeae*<sup>16</sup>).

Human beings do not live in a sterile world. Food and water can be contaminated and many different events occur that affect sharing of microorganisms between ecosystems and antibiotic-resistance genes between pathogenic and commensal bacteria. Floods, earthnuakes and tsunamis have affected public health

#### Published Online November 18, 2011 DOI:10.1016/S1473-3099(11)70316-4

(W

Antimicrobial Agents Research Group, School of Immunity and Infection, College of Medical and Dental Sciences, University of Birmingham, Edgbaston, Birmingham, UK (L J V Piddock PhD)

Correspondence to: Prof Laura J V Piddock, Antimicrobial Agents Research Group, School of Immunity and Infection, College of Medical and Dental Sciences, University of Birmingham, Edgbaston, B15 2TT, UK I.j.v.piddock@bham.ac.uk

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www.thelancet.com/infection Published online November 18, 2011 DOI:10.1016/S1473-3099(11)70316-4





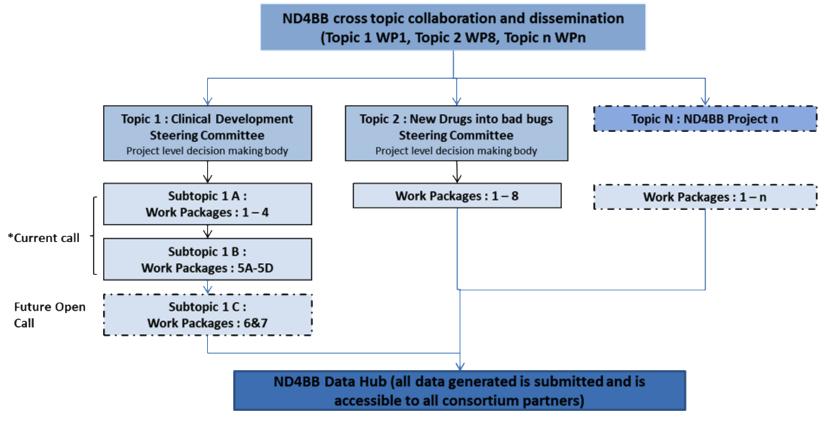
# The Broad Picture of the IMI Anti-Microbial Resistance Programme

- As a public-private partnership aiming at removing bottlenecks in drug development, IMI is the ideal instrument to solve the scientific challenges, to provide the necessary incentives for industry and to revisit the regulatory environment in order to reinvigorate R&D on antibiotics
- The 6<sup>th</sup> Call is the first Call of a series of IMI Calls which will address additional major challenges in the near future
- First clinical trials were selected according to products that are ready to be tested in view of a rapid introduction in clinical care





# Architecture of the IMI Anti-Microbial Resistance Programme



Topics in current call.

\*Note : calls for additional beneficiaries required to implement WP5B&5D will be managed by the Topic 1 consortium as outlined below

Subject to future open calls implemented by the IMI JU office



# **Call 7 for Proposals**



#### **Two topics**

- Developing a framework for rapid assessment of vaccination benefit/risk in Europe
- Incorporating relative effectiveness research into development strategies

#### **Budget**

- EFPIA contribution: €13 Million
- Maximal IMI JU contribution: €13 Million

#### Timelines

- Call launch: July 2012
- Deadline for Eols submission: 09 October 2012
- Grant agreement signature: Q2 2013





Two topics part of the Anti-Microbial Resistance Program:

- Fighting Staph. aureus infections: epidemiological studies and clinical trials with a monoclonal antibody
- Discovery and development of new drugs from gram- infections

#### Additional two topics

- Developing an etiology-based taxonomy for human diseases (Rheumatoid arthritis, Lupus, Parkinson...)
- Building a European bank to hold and supply iPS stem cells



#### Call launch: Mid-December 2012





## Budget to be committed by end of 2013:

• 3 to 4 Calls launched

# Projects started in 2013- 2014 will run until 2018 – 2019

Any future PPP will be part of Horizon 2020 and launched in 2014





# A future PPP under Horizon 2020



## Moving forward with a PPP in Innovative Health Research

Will be based on experience from IMI

#### Criteria to be fulfilled:

- Added value of action at the Union level
- Scale of impact on industrial competitiveness, sustainable growth and socioeconomic issues
- Long-term commitment from all partners based on a shared vision and clearly defined objectives
- Scale of the resources involved and the ability to leverage additional investments in research and innovation
- Clear definition of the roles for each of the partners and agreed key performance indicators over the period chosen
- Continued partnership with EFPIA
- Plan to enlarging partnership to include vaccine, medical imaging and medical information technology industries



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2012 - Research to - European lead factory: Joint Eu screening centre - preliminary top - Antibiotics research to tackle re	ropean compound library and ic outline now available	tio.	IMI NEWSFLASH 16/02/2012 : EU Health Commissioner John Dalli praises IMI in Financial Times article http://t.co/40beg51T 16/02/2012 : Meet IMI at DIA	
ABOUT IMI The Innovative Medicines Initiative (IMI) is Europe's largest public-private initiative and safer medicines for patients. IMI supports collaborative research projects and builds networks of industrial and academic seprets in order to boost		STH CALL OPEN INFO DAY - REGISTRATION OPEN IMI will hold an Open Info Day on its Sth Call for proposals © in Brussels, Belgium on Monday 27 February. Registration is now open. The event will focus on the 5th	EuroMeeting2012 in Copenhagen – visit us at booth 233 or go to one of the session: featuring IMI: http://t.co /Y1oLk2yw Follow us on Twitter	
IMI is a joi European industry as	utical innovation in Europe. ht undertaking between the Union and the pharmaceutical sociation EFPIA. efpia more (*)	Call topic furgoean Lead Factory: Joint European compound library and screening centre <sup>1</sup> .	PRESS RELEASES & MEDIA more (*) NEWSLETTER Subscribe to the IMI newslette	
PARTNER SEARCH TOOL UPDATED 10th has updated its Partner Search Tool with the indicative topics European Lead Factory (building a joint European compound library and screening centre) and NewDrugs#Badbugs (antimicrobial resistance).	VISIT IMI'S ONGOING PROJECTS INI currently (Inde 23 projects with a combined budget of over 4500 million and covering drug safety and efficacy, knowledge management, and education & training.	EDUCATION & TRAINING IMI project SafesCiMET is launching three new courses relating to dinical safety. More information on these and other SafeSiMET courses, as well as details of how to apply, can be found on the SafeSCIMET website	NEW IMI FUNDING RULES AND SIMPLIFIED PROCEDURES • See the press release & and factsheet • Read the revised Grant Agreement @	

• Questions? E-mail us: infodesk@imi.europa.eu



**Innovative Medicines Initiative** 

# THANK YOU! Hugh.Laverty@imi.europa.eu www.imi.europa.eu



