

THE EUROPEAN REFERENCE NETWORKS: A VISION FROM INSIDE

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CHAIR,

EUROPEAN REFERENCE NETWORK

COORDINATORS GROUP

COORDINATOR,

EUROPEAN REFERENCE NETWORK

HEREDITARY METABOLIC DISEASES







European Reference Networks

Grouping Rare Diseases In Thematic Networks

- Rare immunological and autoinflammatory diseases
- Rare bone diseases
- Rare cancers* and tumours
- Rare cardiac diseases
- Rare connective tissue and musculoskeletal diseases
- Rare malformations and developmental anomalies and rare intellectual disabilities
- Rare endocrine diseases
- Rare eye diseases
- Rare gastrointestinal diseases
- Rare gynaecological and obstetric diseases
- Group on Cancer Control

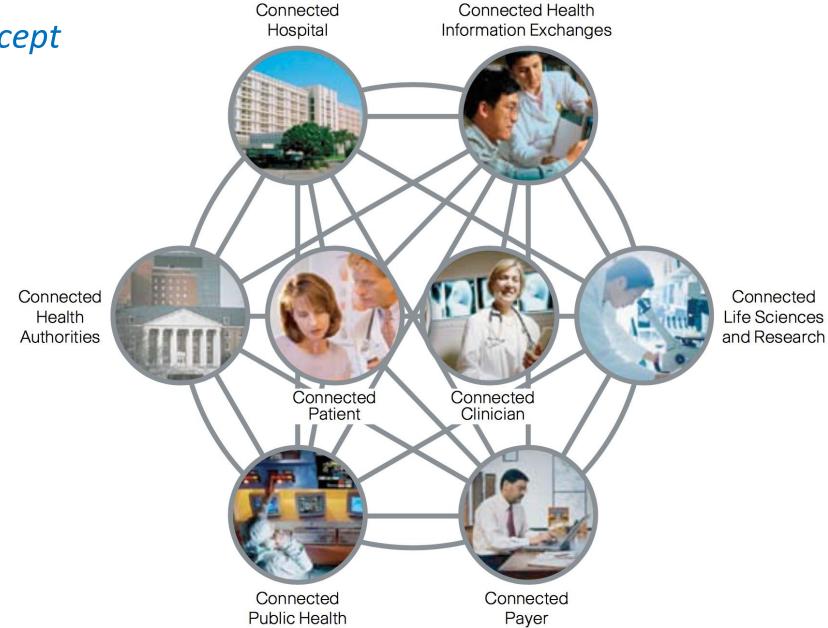
- Rare haematological diseases
- Rare craniofacial anomalies and ENT (ear, nose and throat) disorders
- Rare hepatic diseases
- Rare hereditary metabolic disorders
- Rare multi-systemic vascular diseases
- Rare neurological diseases
- Rare neuromuscular diseases
- Rare pulmonary diseases
- Rare renal diseases
- Rare skin disorders
- Rare urogenital diseases

*Note: The networking of rare cancers is currently under discussion in EC Expert

Connected Health Networks Information Exchanges







Approved ERNs

European
Reference
Networks

1. ERN BOND	European Reference Network on Rare Bone Disorders
2. ERN CRANIO	European Reference Network on Rare craniofacial anomalies and ENT disorders
3. Endo-ERN	European Reference Network on Rare Endocrine Conditions
4. ERN EpiCARE	European Reference Network on Rare and Complex Epilepsies
5. ERKNet	European Rare Kidney Diseases Reference Network
6. ERN RND	European Reference Network on Rare Neurological Diseases
7. ERNICA	European Reference Network on Rare inherited and congenital anomalies
8. ERN LUNG	European Reference Network on Rare Respiratory Diseases
9. ERN Skin	European Reference Network on Rare and Undiagnosed Skin Disorders
10. ERN EURACAN	European Reference Network on Rare Adult Cancers (solid tumours)
11. ERN EuroBloodNet	European Reference Network on Rare Haematological Diseases
12. ERN EURO-NMD	European Reference Network for Rare Neuromuscular Diseases
13. ERN EYE	European Reference Network on Rare Eye Diseases
14. ERN GENTURIS	European Reference Network on Genetic Tumour Risk Syndromes
15. ERN GUARD-HEART	European Reference Network on Uncommon And Rare Diseases of the HEART
16. ERN ITHACA	European Reference Network on Rare Congenital Malformations and Rare Intellectual Disability
17. MetabERN	European Reference Network for Rare Hereditary Metabolic Disorders
18. ERN PaedCan	European Reference Network for Paediatric Cancer (haemato-oncology)
19. ERN RARE-LIVER	European Reference Network on Rare Hepatological Diseases
20. ERN ReCONNET	Rare Connective Tissue and Musculoskeletal Diseases Network
21. ERN RITA	Rare Immunodeficiency, Autoinflammatory and Autoimmune Diseases Network
22. ERN TRANSPLANT-CHILD	European Reference Network on Transplantation in Children
23. VASCERN	European Reference Network on Rare Multisystemic Vascular Diseases
24. ERN eUROGEN	European Reference Network on Rare and Complex Urogenital Diseases and Condition

EUROPEAN REFERENCE NETWORKS

European Reference Networks

- 1. ERN BOND
- 2. ERN CRANIO
- 3. Endo-ERN
- 4. ERN EpiCARE
- 5. ERKNet
- 6. ERN RND
- 7. ERNICA
- 8. ERN LUNG
- 9. ERN Skin
- **10. ERN EURACAN**
- 11. ERN EuroBloodNet
- 12. ERN EURO-NMD
- **13. ERN EYE**
- **14. ERN GENTURIS**
- **15. ERN GUARD-HEART**
- **16. ERN ITHACA**
- 17. MetabERN
- 18. ERN PaedCan
- 19. ERN RARE-LIVER
- **20. ERN ReCONNET**
- 21. ERN RITA
- 22. ERN TRANSPLANT-CHILD
- 23. VASCERN

European Reference Networks Conference



& ERN Kick-off meeting

Vilnius, Lithuania, 9-10 March 2017



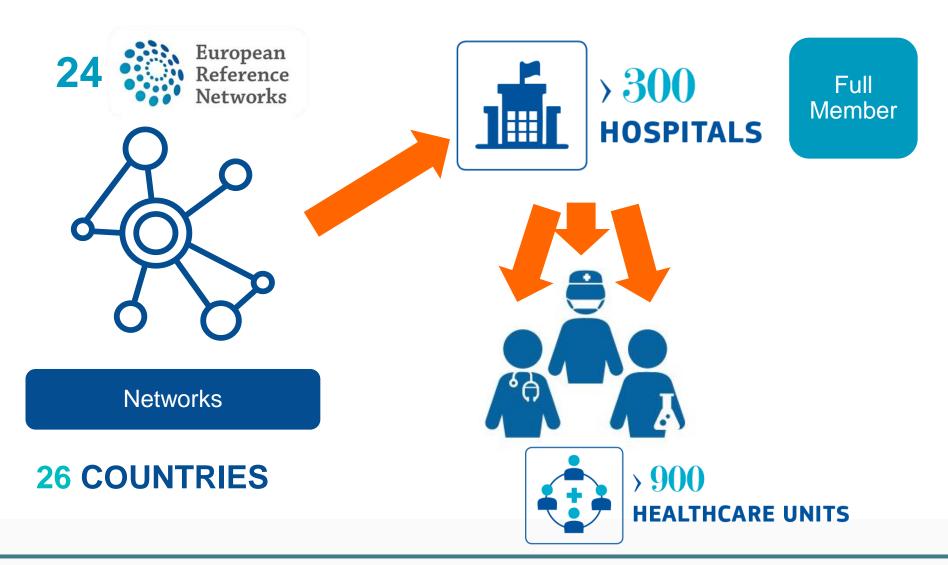


EUROPEAN REFERENCE NETWORKS





Coordination is important since ...





MEMBER STATES	No. ERNS	No. HOSPITALS	No. HCP	MEMBER STATES	No. ERNS	No. HOSPITALS	NUMBER HCP
ITALY	23	66	186	BULGARIA	6	6	7
FRANCE	ALL	38	111	ROMANIA	6	6	7
GERMANY	23	42	121	SLOVENIA	9	3	9
UK	22	35	112	ESTONIA	3	2	3
NETHERLANDS	ALL	13	90	CROATIA	2	1	2
BELGIUM	19	10	36	AUSTRIA	2	1	2
SPAIN	19	16	42	NORWAY	3	2	3
CZECH REPUBLIC	18	8	28	IRELAND	3	1	3
SWEDEN	20	6	30	LATVIA	2	1	2
PORTUGAL	16	8	29	LUXEMBOURG	1	1	1
POLAND	17	12	21	CYPRUS	2	1	2
DENMARK	11	4	20	MALTA	-	-	-
FINLAND	12	4	14	GREECE	-	-	-
HUNGARY	10	4	12	SLOVAK REP.	-	-	-
LITHUANIA	12	2	12	TOTAL		293	905

Involvement of Patients



- care is patient-centred
- transparency in quality of care, safety standards, clinical outcomes and treatment options
- planning, assessment and evaluation of the MetabERN

patients are in place

• All ethical issues & concerns for

- the performance of the MetabERN.
- Provision of patient perspective
- Methods for feedback and evaluation of patient experience,
- transparency in quality of care, safety standards, CO and treatment options
- Clear planning, assessment and evaluation of the MetabERN

Advice

Monitor

Ensure

- Patients involvement is ongoing
- patients representatives are equal participant
- Results and act upon them to implement changes and amelioration of the achievements

Evaluate

- Review involvement mechanism regularly
- Incorporate patienst feedback to implement improvements
- Involve patients in the addressing of their specific needs, preferences, priorities (Survey, feedback systems, etc)



The European Reference Network for Hereditary Metabolic Diseases, MetabERN, as an example of a typical ERN.

INBORN ERRORS OF METABOLISM



- Name proposed by Sir ARCHIBALD GARROD in 1908
- Observations about 4 disorders, with recurrence in families: Alcaptonuria, Pentosuria, Cystinuria and Albinism
- Investigated urine chemistry as a reflection of systemic metabolism and disease
- In 1923 he wrote his best known work:

"INBORN ERRORS OF METABOLISM"

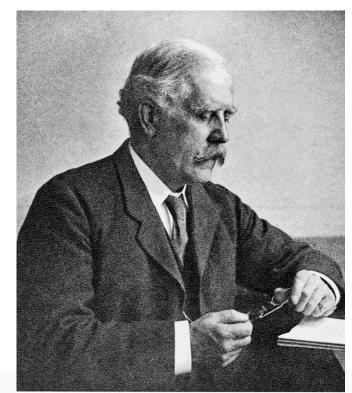
INBORN ERRORS OF METABOLISM

Ву

ARCHIBALD E. GARROD, K.C.M.G.

D.M., I.L.D., F.R.S., F.R.C.P.

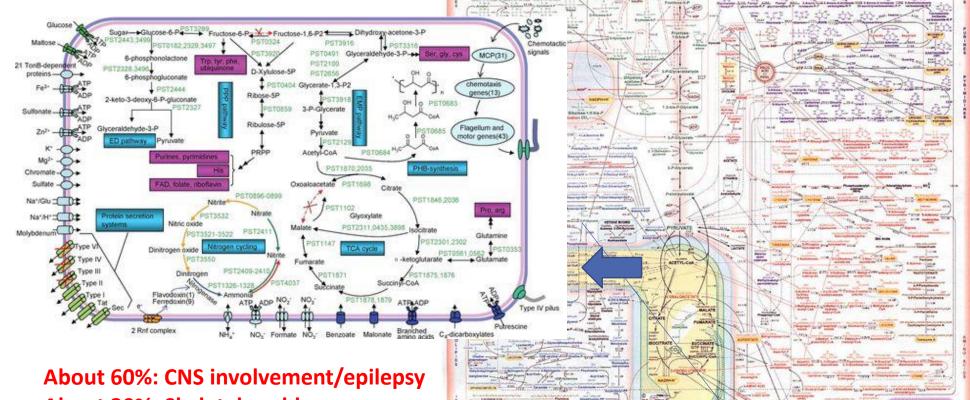
Regius Professor of Medicine in the University of Oxford Consulting Physician to St. Bartholomew's Hospital and to the Hospital for Sick Children



(1856-1937

METABOLISM TODAY>700 diseases





About 30%: Skeletal problems

About 30%: Liver Involvement

About 30%: Cardiological problems

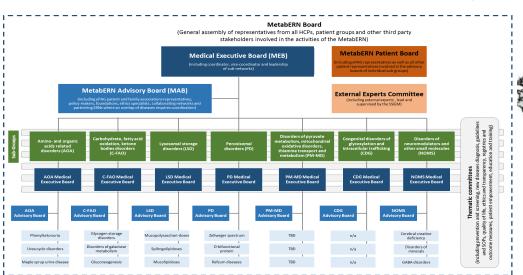
About 25%: Kidney problems

MetabERN: ERN on HEREDITARY METABOLIC DISEASES

Coordinator

Prof. Maurizio Scarpa MD PhD

Helios Dr. Horst Schmidt Kliniken Wiesbaden,



- Aminoacid and organic acids related disorders
- Disorders of pyruvate metabolism, Krebs cycle defects, mitochondria oxidative phosphorylation disorders, disorders of thiamine transport and metabolism
- Charbohydrate, fatty acid oxidation and ketone bodies disorders
- Lysosomal disorders
- Peroxisomal and lipid related disorders)
- Congenital disorders of glycosylation and disorders of intracellular trafficking
- **Disorders of Neuromodulators and Small Moleculel**

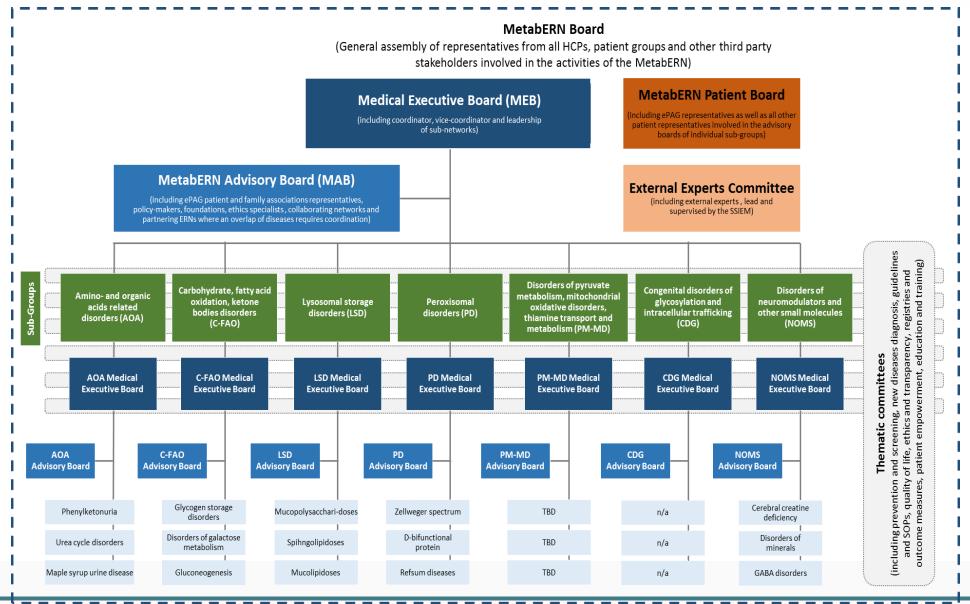
BE	BG	CZ	DE	DK	ES	FR	HR	HU	IT	LT	NL	NO	PL	РТ	SE	SI	UK
6			10														





MetabERN Structure



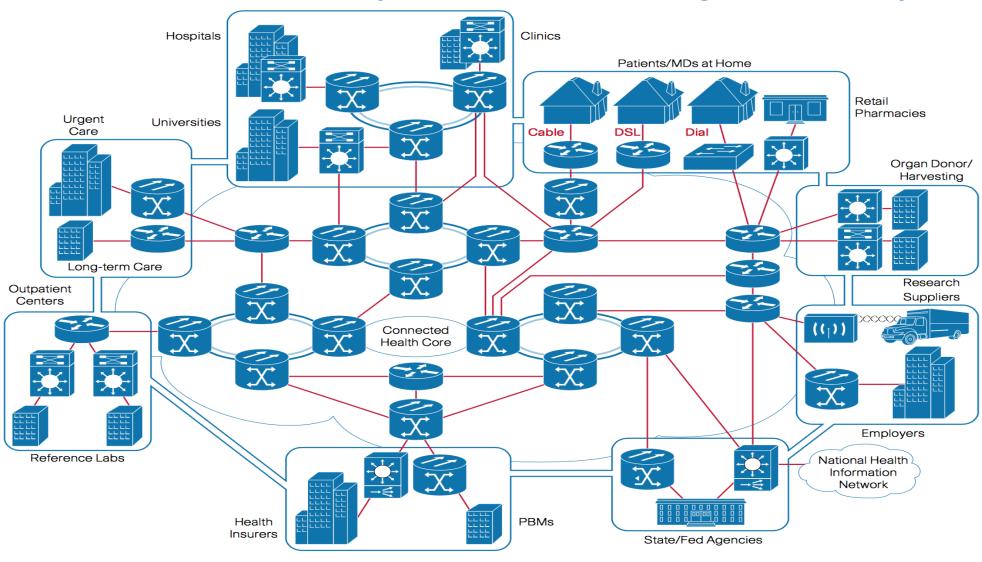




ERN ACTIVITIES

Prevention and Screening					
Diagnosis/New Diseases Diagnosis					
Epidemiology/Registries and Outcome					
Management/Quality of Life and Transition Guidelines and Pathways					
Virtual Counselling					
Education and Training					
Patient Empowerment					
Clinical Trials					
Research					
Dissemination/Stakeholders Relations					

One Of The Secrets For Success Of The ERN Crosslinking: The IT Platform



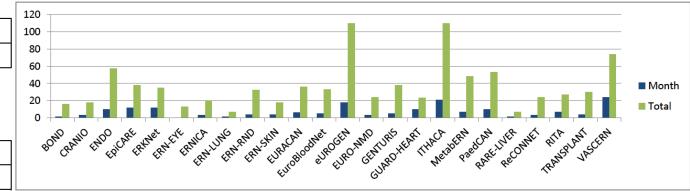
European Reference Networks



CPMS ACTIVITY

ACTIVE USERS/ERN

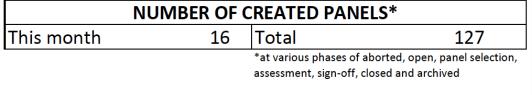
	NUMBER OF U	ISERS REGISTE	RED
this month	64	Total	786



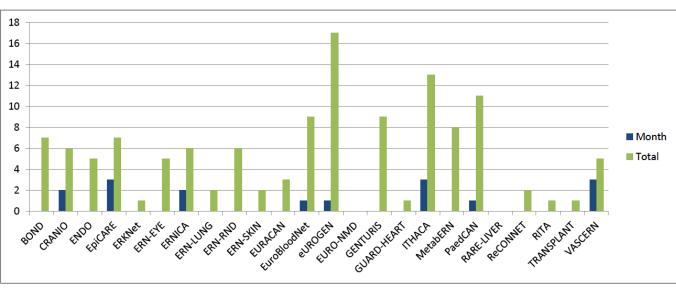
	NUMBER O	F ACTIVE USERS	
This month	174	Total	891

^{*}Total Active users = Sum of active users/Month

PANELS / ERN



NUMBER (OF PANE	ELS CLOSED/ARCHIVED	
This month	4	Total	17





European Reference Networks

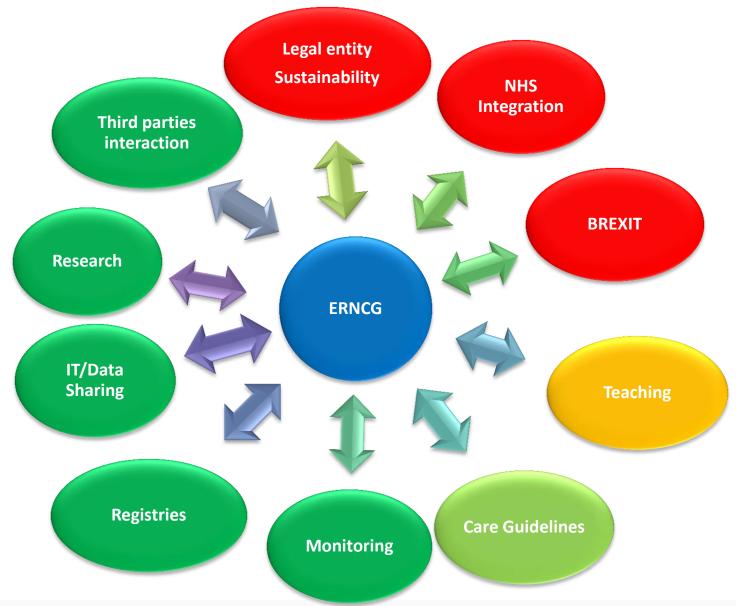
Chair: Maurizio Scarpa, MetabERN Vice-Chair: Franz Schäfer, ERKNET

Board: WG Coordinators

WG	LEADERSHIP
IT & DATA-SHARING	Ruth Ladenstein, ERNPaedcan
RESEARCH	Eduardo López Granados, ERN TransplantChild
LEGAL ASPECTS, DATA PROTECTION & ETHICS	Nicoline Hoogerbrugge, GENTURIS
CROSS-BORDER HEALTHCARE AND	Holm Graessner, ERN-RND;
BUSINESS CONTINUITY	Kate Bushby, EURO NMD
MONITORING & ASSESSMENT	Christopher Chapple, EUROGEN
GUIDELINES, EDUCATION, TRAINING	Paolo Casali, ERN EURACAN
SPECIAL PROJECTS:	Maurizio Scarpa, MetabERN
NHS INTEGRATION	
SUSTAINABILITY	

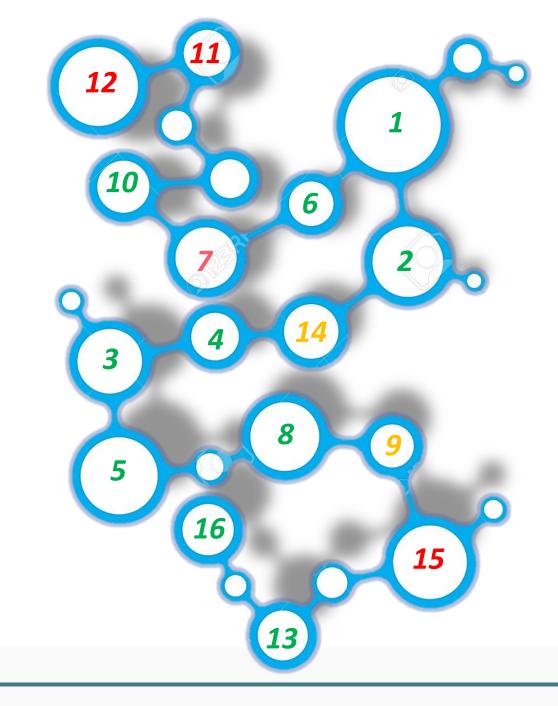
European Reference Networks

Achievements



The ERN Interactome: Coordination of the Activities

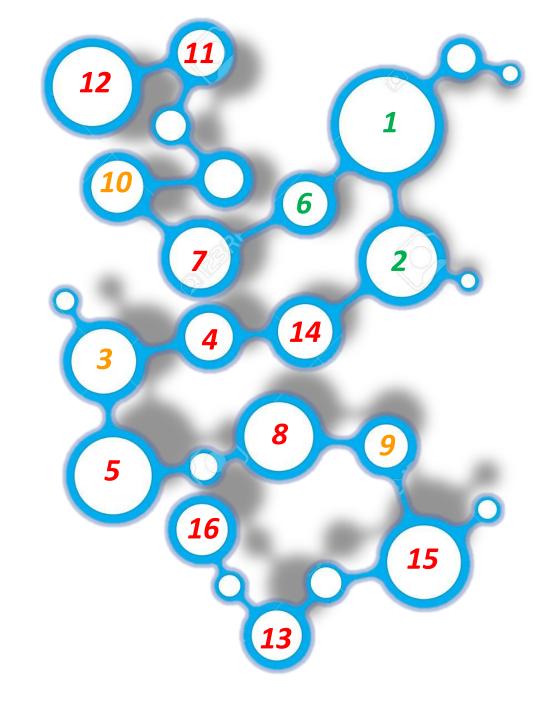
- 1. ERNs COORDINATION
- 2. PATIENT COMMITMENT
- 3. DISEASE IDENTIFICATION
- 4. REGISTRY
- 5. DATA SHARING
- 6. COMUNICATION/AWARENESS
- 7. EDUCATION
- 8. SHARED VIRTUAL COUNSELLING
- 9. NETWORK OF SPECIALISTS
- 10. INSTITUTIONAL STAKEHOLDERS
- 11. PAYERS
- 12. NATIONAL HEALTH SYSTEMS/NPRD
- 13. RESEARCH COORDINATION
- 14. GUIDELINES/PATIENT PATHWAYS
- 15. STANDARD OPERATING PROCEDURES
- 16. QUALITY INDICATORS





THE ERN INTERACTOME 2016

- 1. ERNs COORDINATION
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Work in Progress for the Coordinators

- Continuous collaboration with the BoMS Representatives
- Sustainability of the ERNs
- Integration into the National Health Systems
- Legal entity of the ERNs
- Reimbursement of the ERN activities
- Liability of Coordinators/ recognition of the Coordinator role







Healthcare Companies & European Reference Networks: Expectations & Potential for Collaboration

PROGRAMME

	Morning session co-chaired by:
Chairperson Head of Me	ns: Ms. Claudia Crocione, Managing Director, HHT Europe, Italy & Pr. Josep Torrent-Farnell, edicines Division, CatSalut (Catalan Health Service), Generalitat de Catalunya, Spain
	Morning Session: Exploring opportunities
09:00 – 09:20	Welcome introduction, setting the scene & goals for the day: A reminder of why we are all here. Our shared ambition for ERNs.
	Mr. Yann Le Cam, Chief Executive Officer, EURORDIS, France/Belgium
09:20 – 09:35	State of the art of ERNs: What they are (core responsibilities), how they are structured and organised and their overall vision
	Mr. Jaroslaw Waligora, Policy Officer, European Commission
09:35 - 09:45	Board of Member States Reflections
	Prof. Nicoline Hoogerbrugger , Chair, EC ERN Committee on Data Protection, Ethics & Informed Consent, The Netherlands
09:45 - 09:55	From concept to reality: European Reference Network for Hereditary Metabolic Diseases, MetabERN
	Dr. Maurizio Scarpa, Clinical lead for Rare Metabolic Diseases, Director of the Centre for Rare Diseases Helios Dr Horst Schmidt Clinic, Germany
09:55 - 10:05	Round table Q&A: Current state of play, needs and expectations, looking ahead
	Moderator: Pr. Josep Torrent-Farnell, Head of Medicines Division, CatSalut (Catalan Health Service), Generalitat de Catalunya, Spain
	Panelists:
	Mr. Jaroslaw Waligora, Policy Officer, European Commission
	Dr. Maurizio Scarpa, ERN Chairperson, Clinical lead for Rare Metabolic Diseases, Director of the Centre for Rare Diseases Helios Dr Horst Schmidt Clinic, Germany
	Prof. Nicoline Hoogerbrugger, Professor in Hereditary Cancer, Radboud University Medical Center, The Netherlands & Chair, EC ERN Committee on Data Protection, Ethics & Informed Consent

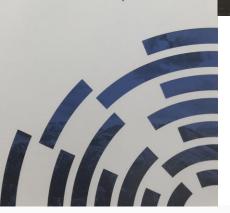






20TH European Health ForumGastein

Health in All Politics – a better future for Europe





- 1) WORKSHOP ON PERSONALISED MEDICINE AND RD
- 2) WORKHOP ON SUSTAINABILITY OF ORPHAN DRUGS
- 3) WORKSHOP ON BIG DATA
- 4) MEETING WITH THE COMMISSIONER:
 - LEGAL ENTITY
 - SUSTAINIBILITY

EUROPEAN REFERENCE NETWORKS



A -28- A B





On the occasion of *Rare Diseases Day* on 28 February 2018, the **European Reference Network for Rare Bone Disorders (ERN-BOND)**, together with MEP Elena Gentile, are delighted to invite you to a European Parliamentary Meeting entitled:



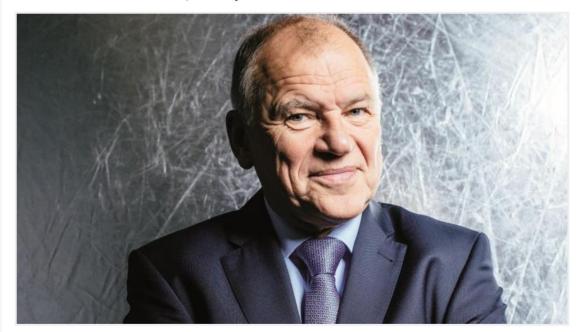




Rare disease research: European reference networks are off to a good start

Written by Vytenis Andriukaitis on 20 February 2018 in Opinion

One year on from their launch, the European reference networks are helping patients access treatment and research from across the EU, writes Vytenis Andriukaitis.



Vytenis Andriukaitis | Photo credit: Natalie Hill

- This way it is the medical knowledge that travels, meaning there is no need for patients to undertake exhausting trips between regions and countries as was often the case in the past.
- In the longer term, I hope to see the ERN model extended to other diseases. I am positive that as we reach a critical mass of patients being analysed, diagnosed and treated, the ERNs will generate more and more research on rare diseases, improving the quality of life of children





In summary, ERNs represent a major opportunities for

European Reference Networks

Patients

- Optimization of care pathways for patients with rare disease: diagnosis, management access to therapy
- Creation of databases/registries/natural histories of patients in a coordinated way
- Close interaction with family associations which may help logistical challenges associated with conducting trials for small patient population
- Counselling the patients in the understanding the value of the clinical trials
- Possibility of generating studies also for rare patients due to the availability of numbers of patients in a coordinated way
- More effective clinical trial designs that consider the very special and unique circumstances of rare disease research
- Close interaction among ERNs to integrate expertise needed for clinical trials
- Protection of patients from not well designed clinical trials



National Health Systems

- Close contact with regulatory authorities, key opinion leaders, patient advocacy organizations. and non-traditional players, like technology companies, to create a new coordinated way to manage patients affected by rare diseases and optimize access to diagnosis and therapy.
- Impact on the National Health System to spare resources, optimize services and avoid waste of expertise
- Impact on the awareness for rare diseases. Creation of an European epidemiology on rare diseases, common registries, databases, research projects.
- Impact on the awareness for cost of rare diseases. Creation of EU HTAs for the calculation of the cost of the management of patients with rare diseases and prediction of sustainability.
- Impact on the discussion on the sustainability of orphan drugs.
- Interaction with National Health Istitute and Drug agency for postmarketing analysis.

European Reference Networks

Conclusions

- ✓ ERNs are NOT a project or a program, they are a CONCEPT and represent the major achievement of the European spirit of collaboration, sharing and health investement in the field of rare diseases
- ✓ ERNs group the most acknowledged centers of excellence in Europe, all sharing the same level of commitment and interest for rare diseases
- ✓ ERNs are NOT single networks, but rather a critical mass of about 300 hospitals and over 1000 specialised units, cross feeding each other to meet the needs of our patients.
- ✓ Crosslinking is in the nature of the ERNs due to multidisciplinarity implications of the cared diseases.
- ✓ The ERNs' integration inside the MS National Health Systems/National Plans for Rare Diseases will represent a major achievement for the Cross Border Care
- ✓ The ERNs'/MS National Health Systems/National Plans for Rare Diseases integration is instrumental to define strategies to optimize the cost of management of patients of rare diseases
- ✓ The ERN Coordinators Group is an outstanding instrument for the EC/ National Health Systems/National Plans for Rare Diseases to define a uniform pan-European plan for rare diseases.