



RICERCA, INNOVAZIONE E COMPETITIVITÀ:

QUALI VANTAGGI PER IL PAESE E PER I PAZIENTI?

IL FARMACO: UN SETTORE TRAINANTE PER LA RICERCA E LO SVILUPPO?

DA INDUSTRIA 2015 A HORIZON 2020

Lunedì 3 dicembre 2012

ore 8.30 - 14.00

I network di ricerca in pediatria TEDDY e GRIP

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TEDDY e GRIP oggi

TEDDY

Task-force in Europe for Drug Development for the Young

European <u>multispecialty</u> Network aiming at promoting paediatric drug development through good clinical research



GRiP

Global Research in Paediatrics

E' un progetto mondiale finanziato nell'ambito del 7° Programma Quadro (2011- 2015)

<u>AIM</u>: to implement an infrastructure matrix to stimulate and facilitate the development and safe use of medicine in children. This implementation entails the development of a comprehensive training programme and integrated use of existing research capacity, whilst reducing the fragmentation and duplication of activities.





Teddy Network of Excellence

Funded under the Community's Sixth Framework Programme



TEDDY was established as a Network of Excellence funded under the 6 Framework Program (2005-2010), encompassing 19 Research Centers and 10 European Countries and Israel. The project involved with more than 200 researchers and experts

Aimed at increasing availability of paediatric safe and efficacious drugs































...how TEDDY was born...

2003 FP6 LSH-2003-1.2.1.1

Medicines for children

aimed at structuring efforts on:

- Clinical and biological research
 - Hoping and reality
 - Ethics and methodology
- Drug use in children
- Dissemination of knowledge



...how TEDDY has grown...

TEDDY has grown in the context of the Paediatric Regulation entered into force since 2007

to share and support EU Authorities for:

- Therapeutic Needs and Research Priorities
- Methodology for Paediatric Trials
- Ethics
- Paediatric drug authorisation
- Database of paediatric drugs, prescriptions and AEs



TEDDY is not a Scientific Society





TEDDY is not a Clinical

Trials Center

TEDDY is not a Consultative Body

TEDDY IS A NEW RESEARCH INSTRUMENT

to straightening paediatric research and supporting both TEDDY Research groups and the existing external Networks, Societies and Experts to perform common and innovative initiatives

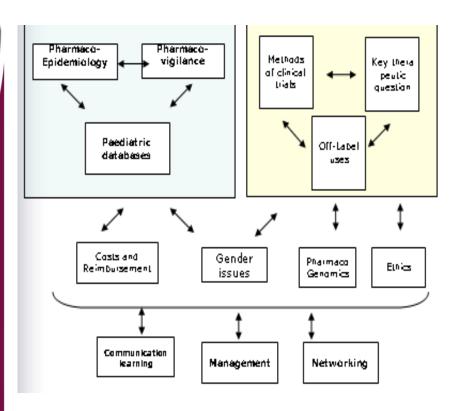
including those that would be more difficult to execute in lack of a supportive action.

Networking is the core of the mission of TEDDY





TEDDY NoE STRUCTURE 7 objectives/12 WPs

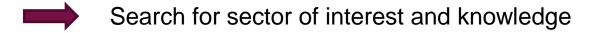


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WP1
Pharmacoepidemiology
WP2
Genomics and pharmacogenomics
WP3
Clinical Trial Methodology
Key Therapeutic questions
WP5
Rare Diseases
Post-marketing studies
Ethics
<u> </u>
Paediatric Drug Database
WP9
Communication, Information
=========
WP10 Project Management
- Toject Management
WP11
Joint Initiatives
WP12
Gender Issues

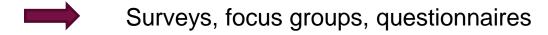


Networking Methodology

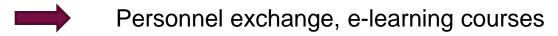
 Contact and interconnect 'noncompeting' people having similar interest or concerns



 Create consensus on content and instruments to be used for common research



 To circulate knowledge and skills along the 'points' and the 'nodes' of the Network



Favour relationship among interested parties

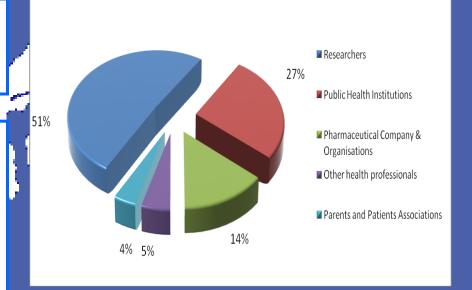


TEDDY networking

Internal (145 TEDDY Experts) and external (970 global Contacts) expertise

TEDDY collaboration with Paediatric Scientific Groups

SIOP Europe, EU Paediatric Cardiology
Association (AEPC), EU Society for
Paediatric Endocrinology (ESPE), EU
Society for Paediatric Infectious Diseases
(ESPID), EU Respiratory Society (ERS),
Socirtà Italiana per le Malattie Respiratorie
Infantili (SIMRI), EU Society for Paediatric
Gastroenterology, Hepatology and
Nutrition (ESPGHAN), Società Italiana di
Pediatria (SIP), Societé Francaise de
Pediatrie, Paediatric Spanish Society,
EUCROF-Paediatric Initiative



European Countries: 25 Non EU Countries: 8



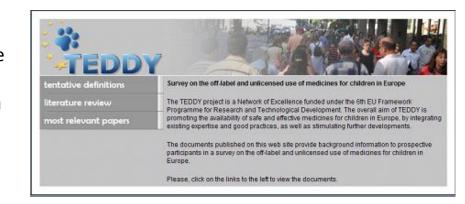
Defining off-label and unlicensed use of medicines for children: results of a Delphi survey

The aim of this Delphi survey is to develop common definitions for unlicensed and off-label drug use in children to be used for research and regulatory purposes. After a literature review on the current status of unlicensed/off-label definitions, a two-stage, web-based Delphi survey was conducted among experts in Europe. Results were then consulted with the European Medicines Agency (EMA)

The lowest level of consensus reached was for questions related to a different formulation or if a drug was given although contraindicated. At the final step, 85% of the responding experts agreed on the proposed definition for off-label (use of a drug already covered by a Marketing Authorisation, in an unapproved way) and 80% on the definition for unlicensed.

Table 1: Composition of the Expert Panel

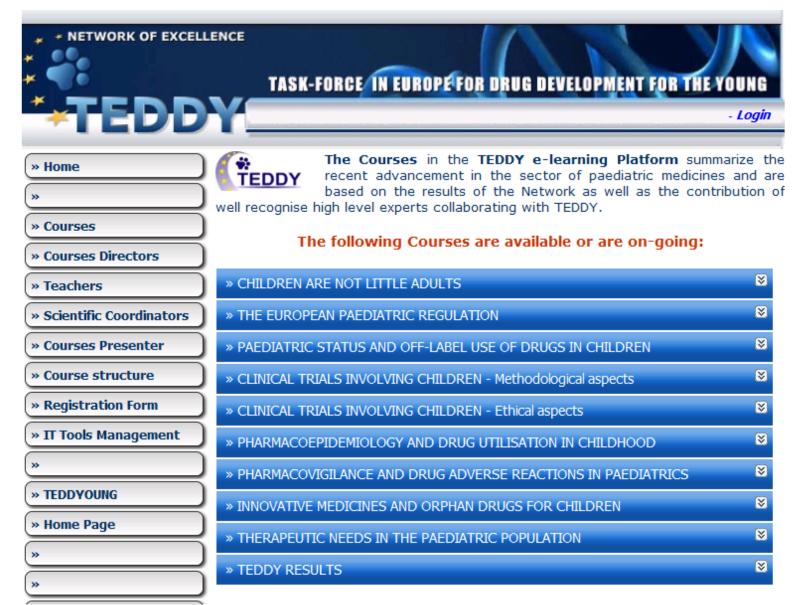
	Invited % (n)	participants % (n)	
Health Professionals	14.29 (12)	20.59 (7)	
Industry	8.33 (7)	8.82 (3)	
Regulatory	20.24 (17)	14.71 (5)	
Scientists	52.38 (44)	55.88 (19)	
Other	4	0	
Total	84	34	





E-learning courses

www.teddylearning.com





Multidisciplinarità **Pubblicazioni**



Health-care Development

Challenges in prescribing drugs for children with cancer

Linon Dean 1903 5 176-45 Paeditaric concology has achieved high our er races despite the limited available representative and distributed for the rin children with cancer. History of these drugs has reconstructed in the representation of the representation of the reconstruction of the

studies, schedules defined by age, and appropriate formulations can lead groups, resulting in a potential lack of benefit, development of resist These major clinical concerns have promoted initiatives in Europe sin Regulation, aimed at improving the risk-benefit ratio of such drugs in cl overcome the limitations of the past. However, to undertake the appr financial support is essential. Europe is now showing its committen prescribing for children with cancer by threoducing measures tha will All those involved, including researchers, paediarric encologists, lear agencies, and pharmacourical companies, need to become more familinew regulation, which is aimed at providing an increased cooperation the benefit of children.

THE LANCET Oncology

RESEARCH

Drug use in children: cohort study in three European countries

Downloaded from bmj.com on 27 January 2009

Miriam C J M Sturkenboom, professor in analysis of observational data,12 Katia M C Verhamme, assistant professor in pharmacoepidemiology.1 Alfredo Nicolosi, director, senior associate research scientist.3 Macey L Murray, teaching and research fellow,5 Antje Neubert, postdoctoral research fellow,5 Daan Caudri, researcher, Gino Picelli, analyst, Elif Fatma Sen, PhD student, Carlo Giaquinto, head of dinical research unit,7 Luigi Cantarutti, director,8 Paola Baiardi, director,9 Maria-Grazia Felisi, researcher,9 Adriana Ceci, scientific coordinator,9 Ian C K Wong, professor of paediatric medicines research,5 on behalf of the TEDDY European Network of Excellence

CA Rotterdam, Netherlands

Centre, Rotterdam, Netherlands Zentre, Rottentam, Netherlands

Department of Epidemiology and Aedical Informatics, Institute of Somedical Technologies, National Research Council, 20090 Segrate, Abon Italy

Centre, 20033 Desig Italy University Hospital, Padus, Italy Società Servizi Telematici 35131 Padus, Italy 7100 Ravia, Italy

ObjectiveTo provide an overview of drug use in children in

Design Retrospective cohort study, 2000-5. Netherlands (IPCI), United Kingdom (IMS-DA), and Italy

Participants 675 868 children aged up to 14 (Italy) or 18 Main outcome measure Prevalence of use per year

calculated by drug class (anatomical and therapeutic).

Prevalence of "recurrent/chronic" use (three or more prescriptions a year) and "non-recurrent" or "acute" use (less than three prescriptions a year) within each therapeutic class. Descriptions of the top five most commonly used drugs evaluated for off label status within

Pesults Three levels of days use muld be distinguished in the study population: high (10/100 children per year), moderate (1-10/100 children per year), and low (c1/100 children per year). For all age categories, anti-infective, dematological, and respiratory drugs were in the high use emun, whereas cardiova scular and antineoplastic drues. were always in the low use group. Emollients, topical steroids, and asthma drugs had the highest prevalence of recurrent use, but relative use of low prevalence drugs was more often recurrent than acute. In the top five highest prevalence drugs topical inhaled and systemic steroids, oral contraceptives, and topical or systemic antifungal drugs were most commonly used off label. Condusion This overview of outpatient paediatric prescription patterns in a large European population

Recent years have seen growing concerns about the incompleteness of the evidence relating to the efficacy and safety of drugs used in children. Almost all of the

could provide information to prioritise paediatric

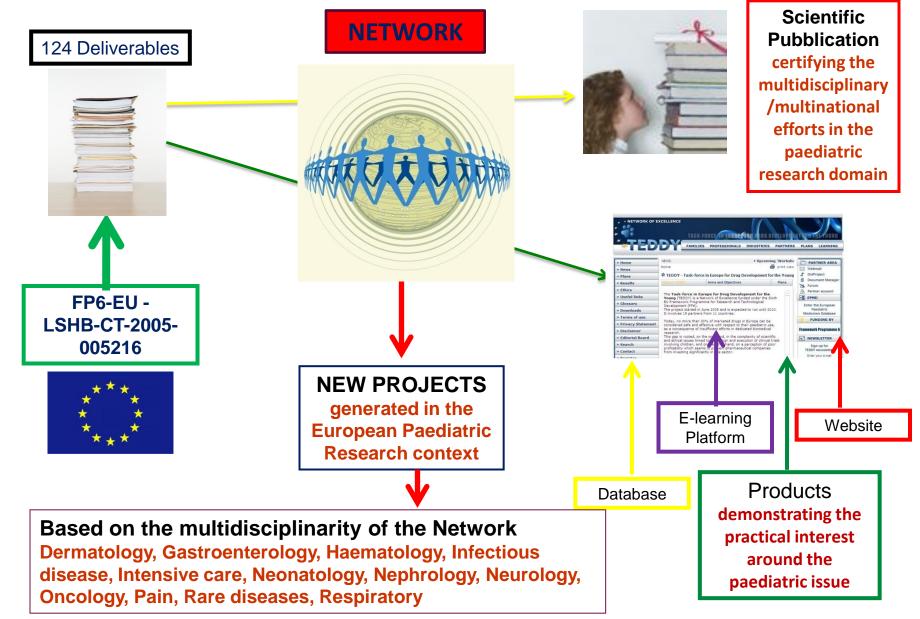
drugs prescribed to children are the same as those originally developed for adults. They are often prescribed on an unlicensed or "off label" basis (percentages ranging from 11-80%) simply by extra-polating data for adults, without conducting any paediatricclinical, kinetic, dose finding, or formulation studies in children. Diseases in children might be different from their adult equivalents, and the processes underlying growth and development might lead to a different effect or an adverse drug reactior unseen in adults (Reye's syndrome is an outstanding

To provide legitimate and appropriate treatment for children's diseases, new legislation was approved in the United States in 2003 and the European Union in 2007.2 Both the Food and Drug Administration (FDA) and the European Medicines Agency for the Evalua-tion of Medicinal Products (EMEA) now offer extensions of drug licences to companies who provide evidence concerning the efficacy and safety in children of new drugs or off label drugs. ³⁶ The World Health Organization underlines the needfor these actions and in December 2007 launched a global campaign to "make medicines child size" to address the need for medicines for all children.7

Weinvestigated the current use of paediatric drugs in children in three European countries, using population based data on primary care prescriptions.

The primary care of children is entrusted to general practitioners in the UK and the Netherlands and to paediatricians in Italy.⁸⁹ Access to health care is free in Italy and the UK and fully covered by healthcare insurance in the Netherlands. In these countries,







Progetto in Neonatologia



European multicenter network to evaluate pharmacokinetics, safety and efficacy of Meropenem in neonatal sepsis and meningitis.

Home page The Project Partners Coordination Publications News & Events Contact us

To evaluate PK, safety and efficacy of meropenem in comparison to standard care in late-onset sepsis and describe PK and safety in bacterial meningitis in neonates and infants aged less then 3 months.

Welcome in NeoMero

NeoMero project aims at adapting an off-patent medicine to the specific need of paediatric populations: in specific to evaluate PK, safety and efficacy of meropenem in comparison to standard care in late-onset sepsis and describe PK and safety in bacterial meningitis in neonates and infants aged less than 3 months in order to be able to register it for use in this age group with a PUMA.

This project has been funded with support by the European Commission under the FP7 programme

Latest News

3 September 2012

Randomisation 1st Patient

We are very happy to announce you that the first patient has been randomized this morning in...

Read more

13 March 2012

NeroMero Tials registration on Clinicaltrials.gov

NeoMero Trials were registered on Clinicaltrials.gov



Progetto in Ematologia





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Background

DEEP Project

Project partners

Project Structure

News and Events

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place at the Grand Nile Tower Hotel in Cairo, Egypt.

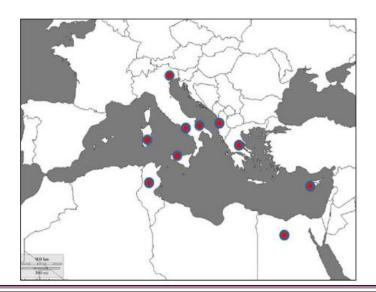
DEEP Partners will discuss the state-of -the-art of the project after the submission to the European Commission of the first official report and the relevant issues linked to the start of the clinical trials.

Nicosia (Cyprus), May 16th - 18th, 2012

Cleopatra Hotel - Workshop on GCP & Investigator Meeting DEEP1/DEEP3

DEEP Project: what it is?

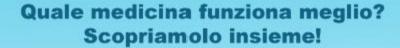
- DEEP is a 4 years multinational Project
- The DEEP Consortium is composed of 12 recruiting European Centres (from Italy, Greece, Cyprus) and 3 recruiting non-European Centres (from Egypt, Albania, China) with scientific partners from EU
- A pharmaceutical group (ApoPharma and APOTEX) based in Canada and in Europe, is part of the DEEP Consortium





Informative Package for children

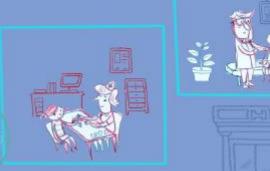
Age < 6 years



A casa, Gianni prende uno sciroppo tre volte al giorno.

Sara invece prende una compressa che si scioglie nell'acqua e fa le bollicine.





Una volta alla settimana vanno in ospedale. L'infermiera Vera preleva una provetta di sangue.

Una volta al mese fanno una visita con il dottor Cacciaferro.



Alla fine dell'anno, il dottore controllerà se le due medicine funzionano bene e se può darle anche agli altri bambini.

Vuoi fare anche tu come Gianni e Sara?



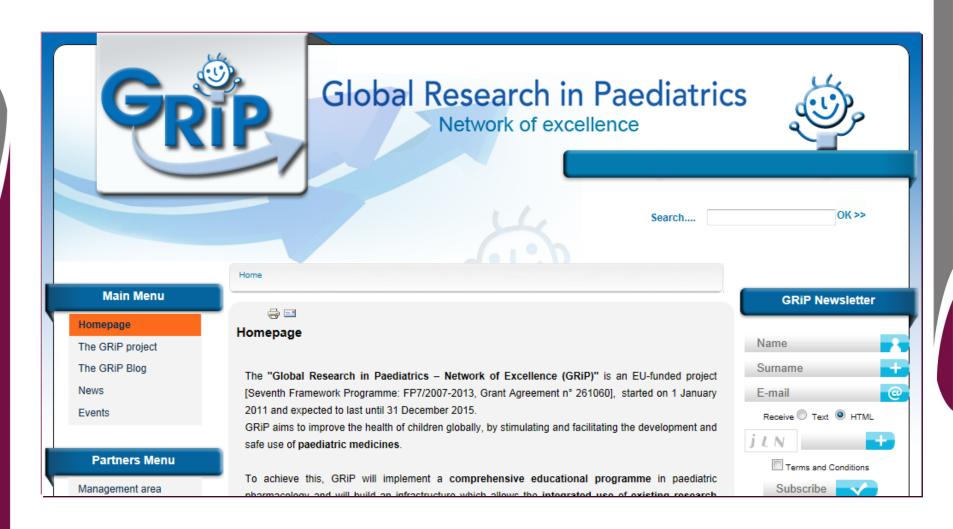
Informative Package for children Age from 6 to 12 years





Progetto GRiP

Http://www.grip-network.org/







GRiP Partnership

ld.	Participant organisation name	Acronym	Country	Lead Scientist
- 1	Azienda Ospedaliera di Padova	AOPD	Italy	Carlo Giaquinto
2	National Institutes of Health	NICHD-NIH	USA	Steven Hirschfeld
3	European Medicines Agency (=	EMA	UK	Agnes Saint-Raymond
4	Erasmus Universitair Medisch Centrum Rotterdam	EMC	The Netherlands	M Sturkenboom
-5	University of Liverpool, MCRN	ULIV-MCRN	UK	Mark Turner
6	Ospedale Pediatrico Bambino Gesù	OPBG	Italy	Paolo Rossi
7	Institut national de la santé et de la recherche médicale	INSERM	France	Evelyne Jacqz Aigrain
8	National Center for Child Health and Development	NCCHD	Japan	Hidefumi Nakamura
9	St George's Hospital	SGUL	UK	Mike Sharland
10	Consorzio per le Valutazioni Biologiche e Farmacologiche, TEDDY	CVBF-TEDDY	Italy	Adriana Ceci
11	Rijksuniversiteit Leiden	UL	The Netherlands	Oscar Della Pasqua
12	Academic Medical Center	AMC	The Netherlands	Martin Offringa
13	Fundación Vasca de Innovación e Investigación Sanitarias	BIOEF	Spain	Adolfo Valls-i-Soler
14	Instytut Pomnik Centrum Zdrowia Dziecka	PCZD	Poland	Marek Migdal
16	World Health Organization 🛑	WHO	Switzerland	Sue Hill
	School of Pharmacy	SoP	UK	lan Wong
18	Helsingin Ja Uudenmaan Sairaanhoitopiirin Kuntayhtymä	HUS	Finland	Kalle Hoppu
19	Brighton Foundation	BF	Switzerland	Jan Bonhoeffer
20	PENTA Foundation	PENTA	Italy	Silvia Faggion
21	Vereniging Samenwerkende Ouder - En Patientenorganisaties (NL)-EGAN	VSOP-EGAN	The Netherlands	Cor Oosterwijk
22	The Hospital for Sick Children	SICKKIDS	Canada	Shinja Ito



Struttura in WPs



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Global Re (GRif Excelle improve t globally facilitati and sa



Global Research in Paediatrics

Global Research in Paediatrics (GRiP) is a Network of Excellence which aims to improve the health of children globally, by stimulating and facilitating the development and safe use of paediatric medicines



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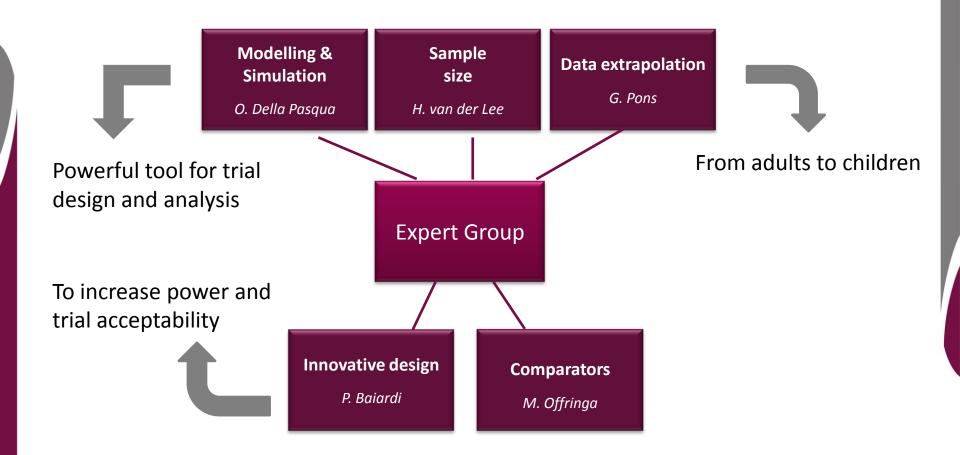
NEW METHODS FOR CLINICAL STUDIES IN PAEDIATRICS

A structured approach to clinical drug development has been established for adults, but this is not automatically applicable to children. Drug development programs in children need to be considered on a case-by-case basis depending on the drug, the condition and the target population, and a specific approached

paediatric clinical research methods used in studies that have already been performed. WP4 will begin from the identification of innovative approaches that are likely to be accepted by the Regulatory Authorities and the scientific community. It will then focus on achieving a scientific consensus on:



WP4 - New methods for clinical study in paediatrics



From "test of hypothesis" to "evidence synthesis"

To create "new" protocols





Conclusioni

- Networking in the Paediatric Research sector is well accepted and represent an useful tool
- Collaboration with Existing Networks, Regulatory Bodies, Professional Associations, Pharmaceutical Industry, Patients/parents Associations is possible
- Multidisciplinarity and Multisectoriality of participants lead to building up critical mass of capacities and knowledge