



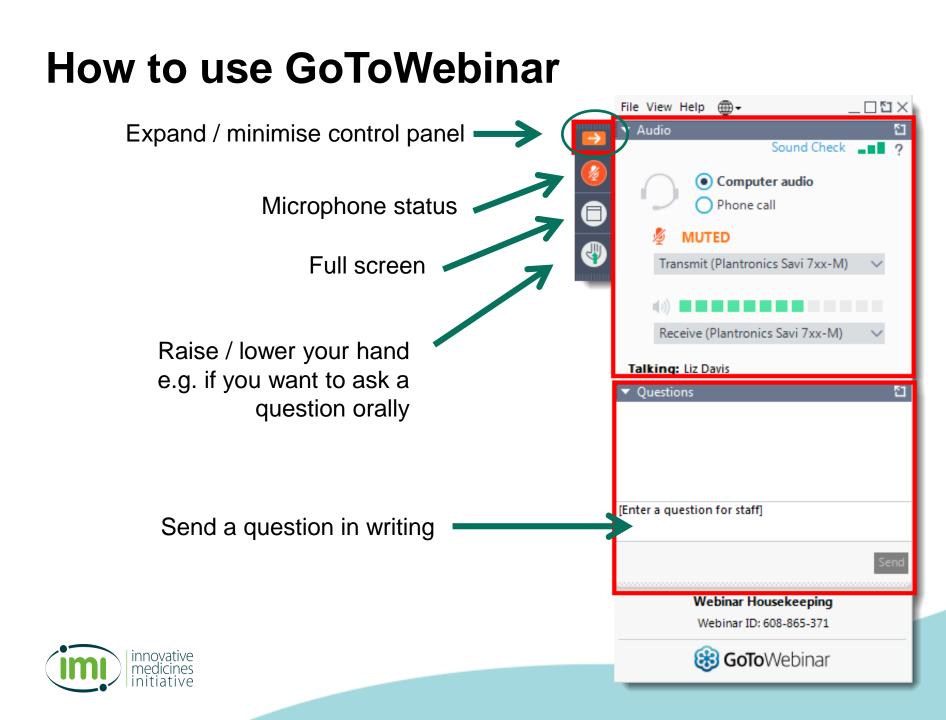
Webinar | IMI2 - Call 15 Antimicrobial Resistance Accelerator – Pillars A and B

16.07.2018

Agenda

- How to use GoToWebinar Catherine Brett, IMI
- Introduction to IMI & the Call process Nathalie Seigneuret, IMI
- Introduction to the IMI2 Antimicrobial Resistance (AMR) Accelerator programme – Rob Stavenger on behalf of the industry consortium, GlaxoSmithKline
- AMR Accelerator programme Pillar A: Capability Building Network (CBN) – Rob Stavenger on behalf of the industry consortium, GlaxoSmithKline
- AMR Accelerator programme Pillar B: TB drug development Network (TBDDN) – Joel Lelievre, on behalf of the industry consortium, GlaxoSmithKline
- Involvement of SMEs, patient groups, regulators Nathalie Seigneuret, IMI
- Questions & answers





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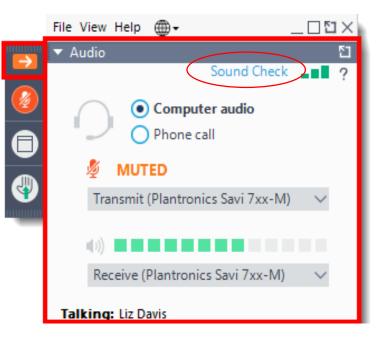
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Before we start...

- This webinar is being recorded and will be published on the IMI website and / or IMI YouTube channel
- Presentation slides will be published on the webinar web page
- A participant list will be circulated and published on the website
- All information regarding future IMI Call topics is indicative and subject to change. Final information about future IMI Calls will be communicated after approval by the IMI Governing Board.







Webinar IMI2 - Call 15 **Antimicrobial Resistance (AMR) Accelerator** programme **Pillar A: Capability Building Network to accelerate and** validate scientific discoveries Pillar B: Tuberculosis drug development network to accelerate and validate scientific discoveries and advance the R&D pipeline of new and innovative agents to address the global tuberculosis epidemic

Nathalie Seigneuret

Today's webinar

Will cover all aspects of the Call topics

- Introduction to IMI programme
- Proposed projects for AMR Accelerator Pillars A and B
 - Objectives, need for public-private collaborative research
 - Key deliverables
 - Structure of the project
 - Expected contribution of the applicants
 - Contribution of industry consortium

Will not cover:

- rules and procedures (webinar held on 10 July)
- AMR Accelerator Pillar C (webinar held on 6 July) Recording and presentations available at <u>www.imi.europa.eu/news-events/events/imi2-call-15-and-16-</u>



IMI – Europe's partnership for health

IMI mission

IMI facilitates open collaboration in research to advance the development of, and accelerate patient access to, personalised medicines for the health and wellbeing of all, especially in areas of unmet medical need.



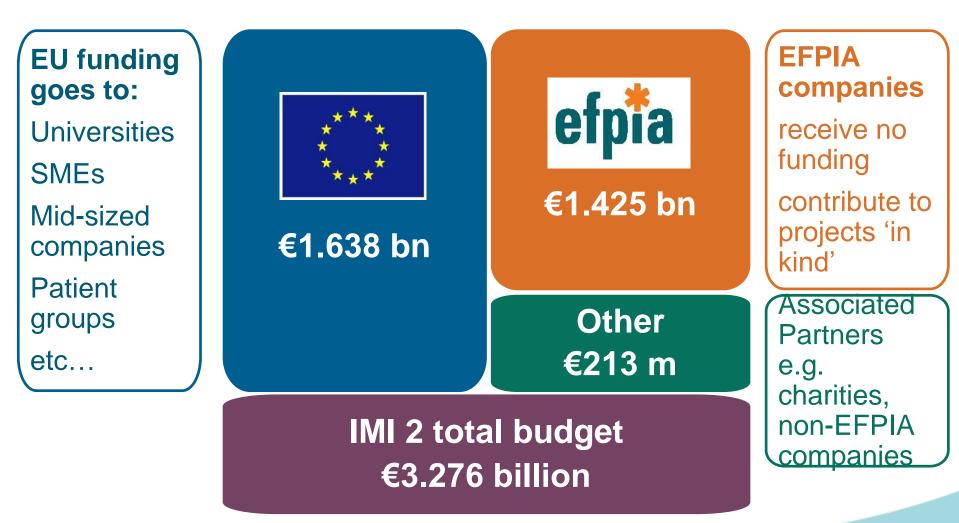
IMI – Ecosystem for innovative collaborations

- Allow engagement in a cross-sector, multi-disciplinary consortium at the forefront of cutting-edge research
- Provide the necessary scale by combining funding, expertise, knowledge, skills and resources
- Build a collaboration based on trust, creativity and innovative and critical thinking
- Learn from each other new knowledge, skills, ways of working
- Take part in transformative research that will make a difference in drug development and ultimately patients' lives

IMI is a **neutral platform** where **all involved** in drug development can engage in **open collaboration** on **shared challenges**.



IMI 2 budget (2014 – 2024)





How a topic is generated

Industrial partners align themselves around a real challenge for industry and agree to work together **and commit resources**

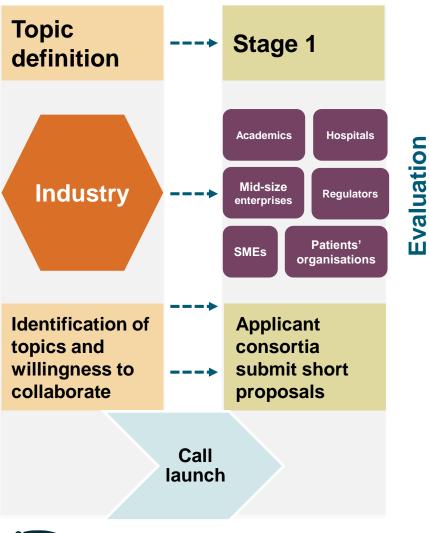
New ideas from public sector, universities, SMEs etc. are needed to address the challenge

Scale is a key to success and is provided through IMI funding

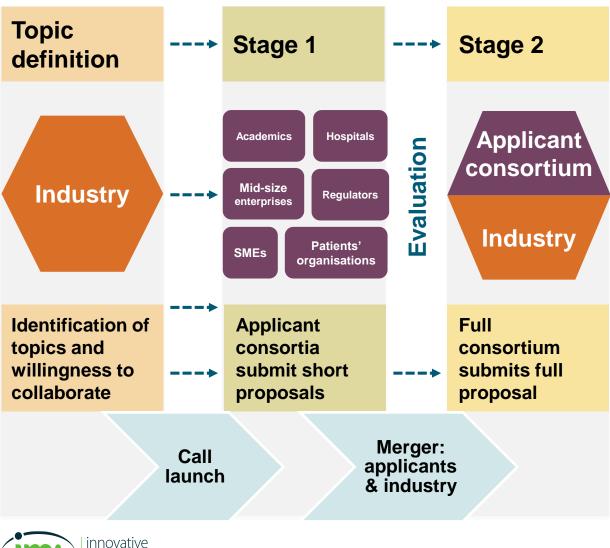
Outcomes should be transformative for the industry as well as having a clear "public" value



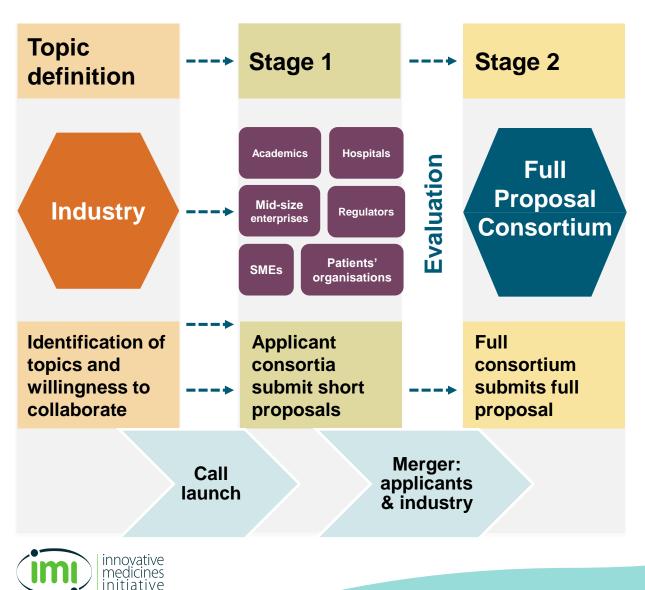


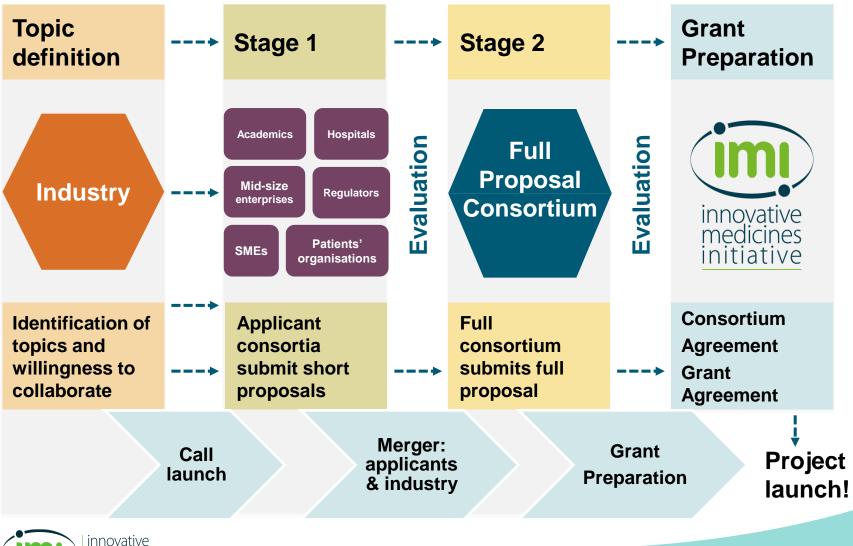






innovative medicines initiative





medicines

Submitting a proposal

<u>https://ec.europa.eu/research/participants/portal/desktop/en/oppo</u> <u>rtunities/h2020/index.html</u>

European	RESEARCH & INNOVATION				
Commission Participa	Participant Portal				
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HOME FUNDING OPPORTUNITIES	HOW TO PARTICIPATE EXPERTS SUPPORT - Search Q 🔒 LOGIN 🛔 REGISTER				
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Updates 🔲 🔊	Horizon 2020 Advanced search for topics Calls for tenders on TED Excellent Science • European Research Council (ERC) • Future and Emerging Technologies (FET) • Marie-Sklodowska-Curie Actions • Research Infrastructures • Industrial Leadership • Leadership in enabling and industrial technologies (LEIT) • Information and Communication Technologies •				
H2020 3rd Health Programme					
Asylum, Migration and Integration Fund					
COSME	Status 🕑 Calls with forthcoming topics 🛛 Calls with open topics 🔅 Calls with only closed topics				
Internal Security Fund - Borders	rt by ○ Call title ○ Call identifier				

innovative medicines initiative

Justice Programme

Proposal Template

- Available on IMI website & H2020 submission tool
- For first stage proposals, the page limit is **30 pages**.

Ti	tle of Proposal		
Li	ist of participants		
Ta	able of Contents		
1.	EXCELLENCE	3.	IMPLEMENTATION
1.1	1 Objectives	3.1	Outline of project plan — Work packages, and major deliverables
1.2	2 Relation to the call topic text.	3.2	Management structure and procedures
1.3	3 Concept and approach	3.3	Consortium as a whole
1.4	4 Ambition	3.4	Table 3.1a: List of work packages
2.	IMPACT	4.	PARTICIPANTS

1 Expected impacts

4.1. Participants (applicants)



Evaluation Criteria (1/2)

Excellence

- Clarity and pertinence of the proposal to meet all key objectives of the topic;
- Credibility of the proposed approach;
- Soundness of the concept, including trans-disciplinary considerations, where relevant;
- Extent that proposed work is ambitious, has innovation potential, and is beyond the state of the art;
- Mobilisation of the necessary expertise to achieve the objectives of the topic, ensure engagement of all relevant key stakeholders.

Impact

- The expected impacts of the proposed approach as mentioned in the Call for proposals;
- Added value from the public private partnership approach on R&D, regulatory, clinical and healthcare practice as relevant;
- Strengthening the competitiveness and industrial leadership and/or addressing specific societal challenges;
- Improving European citizens' health and wellbeing and contribute to the IMI2 objectives.



Evaluation Criteria (2/2)

Quality and efficiency of the implementation

- Coherence and effectiveness of the outline of the project work plan, including appropriateness of the roles and allocation of tasks, resources, timelines and approximate budget;
- Complementarity of the participants within the consortium (where relevant) and strategy to create a successful partnership with the industry consortium as mentioned in the topic description in the Call for proposal;
- Appropriateness of the proposed management structures and procedures, including manageability of the consortium.



Tips for writing a successful proposal

- Read all the call-relevant material: <u>www.imi.europa.eu</u>
- Begin forming your consortium early
 Partner search tools & networking events
- Provide reviewers with all the information requested to allow them to evaluate your proposal
- Finalise and submit your proposal early
- Contact the IMI Office (<u>NOT</u> industry topic writers): infodesk@imi.europa.eu



Some specific aspects of the AMR Accelerator programme

- Consists of 3 pillars under which multiple actions are expected:
 - Pillar A: Capability Building Network (CBN)
 - Pillar B: Tuberculosis Drug Development Network (TBDDN)
 - **Pillar C:** Company-specific Portfolio Building Networks (PBNs)
- Applicants may submit a proposal to any of the topics under the different pillars and are not obliged to apply for all. If applicants wish to submit for more than one topic, separate proposals should be submitted.
- Collaboration agreements foreseen to ensure smooth operation of the projects in the AMR Accelerator.
 Consortia selected under Pillars A, B, and C will conclude collaboration agreements with the CBN consortium selected under topic 7.



Common mistakes

- Admissibility/Eligibility criteria not met:
 - submission deadline missed
 - minimum of 3 legal entities from 3 member states & H2020 associated countries not met
- The proposal does not address all the objectives of the topic
- A proposal is scientifically excellent but will have limited impact
- **Complementarity** with Industry consortium not well described.



Find project partners

- Network with your contacts
- **Network** with fellow webinar participants
- Use Partner Search Tools:
 - EU participant portal:

https://ec.europa.eu/research/participants/portal/desktop/en/or ganisations/partner_search.html

- German NCP partner search tool: <u>www.imi-partnering.eu</u>
- Get in touch with your local IMI contact point: <u>www.imi.europa.eu/about-imi/governance/states-representatives-group</u>
- Talk to your Health National Contact Point (NCP)
- Network on social media (e.g. IMI LinkedIn group)



Participation of SMEs, patient groups, regulators

We encourage the participation of a wide range of health research and drug development stakeholders in our projects.

- SMEs and mid-sized companies
- Patient organisations
- Regulatory bodies
- Companies / organisations from related fields (e.g. diagnostics, animal health, IT, imaging etc...)







Introduction to the IMI2 Antimicrobial Resistance (AMR) Accelerator programme

Rob Stavenger on behalf of the industry consortium GlaxoSmithKline 16.07.2018 • IMI webinar

Today's webinar

- Some background on the AMR Accelerator programme
- Proposed action under Pillar A (IMI 2 Call 15 Topic 7)
 - Objectives, need for public-private collaborative research
 - Expected contribution of the applicants
 - Key deliverables
- Proposed action under Pillar B (IMI 2 Call 15 Topic 8)
 - Objectives, need for public-private collaborative research
 - Expected contribution of the applicants
 - Key deliverables

Will not cover:

Pillar C - Recorded online webinar for Pillar C (July 6)



The IMI2 AMR Accelerator programme

- AN AMBITIOUS AIM: to progress a pipeline of new potential medicines to treat patients with resistant bacterial infections or to prevent them; up to >10 new preclinical candidates and >5 'phase 2-ready' assets over six-year period
- A BROAD SCOPE: prevention (vaccines, mAbs, immunoprophylaxis, other) and treatment (new antibiotics, non-antibiotic alternatives, and combinations), Gram+ and Gram- bacteria, tuberculosis (TB) and non-tubercular mycobacteria (NTM)
- A SIGNIFICANT BUDGET: ~ € 300 000 000



The three pillars of the AMR Accelerator

AMR Accelerator

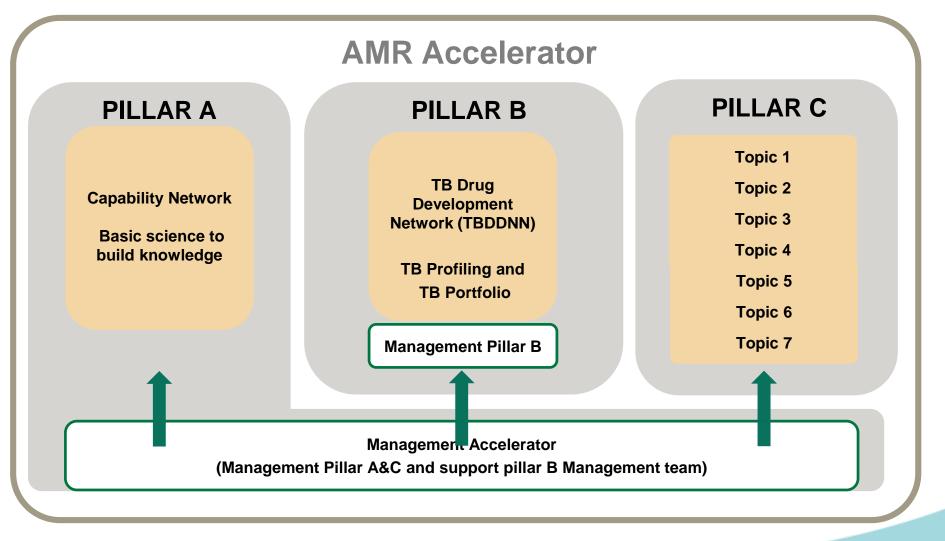
PILLAR A: Capability Network Basic science to build knowledge 1.Coordination & support of projects across Accelerator 2.Projects focused on improving success of AMR R&D

PILLAR B: TB Drug Discovery Progress novel TB programs to end Ph 1

Build preclinical capabilities, explore basic science to support TB drug discovery and progress TB assets through end of Ph1 PILLAR C: Portfolio Network Incubate early drug discovery programs Novel framework to discover, study, and advance potential new treatments for AMR infection



Management of Accelerator projects





Need for public-private collaboration

- Significant scientific challenges to the discovery of new treatments and prevention of AMR infections, including TB
 - Collaborative approaches needed to address these challenges
 - Shared experience, learnings and resources
- Current 'broken' economic models for Return on Investment for antibacterials
 - External funding of antibacterial R&D in companies (e.g. 'push-incentives') are complementing internal resources
- IMI's New Drugs for Bad Bugs (ND4BB) programme successfully implements PPPs in the field of AMR: The AMR Accelerator will complement and build upon ND4BB



What's in it for you?

- Direct involvement in discovery and/or development of novel agents to treat AMR infections
- As a partner in any Accelerator project, exposure to a large and vibrant AMR network
- Further validation of your asset, model, or tool
- Opportunity to facilitate interactions with the global AMR community
- IMI in particular encourages the participation of SME's
- Patients and patient organisations are encouraged to participate and provide their views



Additional points of note

 A Q&A document was posted on the IMI website that covers specific questions around IP and data sharing

https://www.imi.europa.eu/sites/default/files/uploads/documents/appl y-for-funding/future-topics/AMRaccelerator_QandA_vJune2018.pdf

 Suggest all applicants read and understand this documents in parallel with the Topic texts







AMR Accelerator programme Pillar A: Capability Building Network (CBN)

Capability Building Network to accelerate and validate scientific discoveries

Rob Stavenger on behalf of the industry consortium GlaxoSmithKline 16.07.2018 • IMI webinar

Call 15 Topic 7: Capability Building Network (CBN)

AMR Accelerator

PILLAR A: Capability Network Basic science to build knowledge 1.Projects focused on improving success of AMR R&D 2.Coordination & support of projects across Accelerator PILLAR B: TB Drug Discovery Progress novel TB programs to end Ph 1 Build preclinical capabilities, explore basic science to support TB drug discovery and progress TB

assets through end of Ph1

PILLAR C: Portfolio Network Incubate early drug discovery programs Novel framework to discover, study, and advance potential new treatments for AMR infection



Objectives of Accelerator CBN

- Create a Coordination and Support group to support the delivery of projects across the Accelerator
- Conduct research aimed to:
 - provide learnings derived from shared vaccine and/or antibacterial clinical trial data,
 - improve understanding of variability and translatability of animal models of bacterial infection



Expected contributions from applicants for coordination and support group

Expertise in:

- conducting, and capacity for supporting, grant funded research, preferably with respect to working within projects established by the IMI/IMI2 JU or H2020;
- coordinating multiple discovery AMR projects;
- rigorous project and programme management and alliance management for projects of the complexity and scale of the overall AMR Accelerator, (including management of scientific and financial reporting, legal agreements including IP arrangements, meeting facilitation/secretariat role);
- ethics and data governance and privacy in relation to AMR;
- communications and outreach to the scientific community and public;
- collection, collation and curation of data sets and identifying, implementing, maintaining IT systems across large collaborative projects or PPPs,
- business development as applied to large collaborative projects or PPPs



Expected contributions from applicants for research objectives

- Expertise in analysis of preclinical and clinical trial data in the AMR space in relation to e.g. efficacy, safety, translation of preclinical data with respect to safety, tolerability, dose prediction, animal models of infection and efficacy;
- Expertise in conducting and analysing animal infection models to generate reference data of benchmarked control compounds and bacterial isolates.



Expected (in kind) contributions of industry consortium

- best practices on resourcing, setting milestones, and project/portfolio management;
- setting up and maintaining active and nimble governance processes;
- data and knowledge management (e.g. potential mechanisms for collection and pooling relevant data sets);
- ethical guidance, data governance & privacy standards as appropriate;
- networking and communication across large programmes
- generate and share data, samples, and information from industrysponsored clinical trials (phases 1-3) in the AMR space (e.g. vaccine R&D and/or for antibacterial R&D & assist in the analysis of the output of clinical trials in the AMR space;
- conduct, share data, and analyse results from animal infection studies



Key deliverables of the CBN

Coordination and Support

- Operationalization of the entire AMR Accelerator portfolio of projects
- Guidelines and tools for collection, integration, and dissemination of knowledge from Accelerator projects
- Communication and collaboration across AMR funding landscape

Scientific objectives:

- Learnings derived from shared AMR clinical trial data (e.g. phase 1-3 vaccines trials, and/or antibacterial trials) and associated enabling studies
- Improved understanding of animal infection model reproducibility and translation to clinical efficacy



EFPIA partners of the CBN

The industry consortium is composed of the following EFPIA companies:

- GSK
- Janssen
- Evotec
- AstraZeneca



CBN budget and project duration

AMR Accelerator programme Pillar A IMI2 Call 15 topic 7	Planned EFPIA in-kind [Euro]	max. IMI2 JU funding [Euro]	Indicative project duration [months]
Topic 7: Capability Building Network to accelerate and validate scientific discoveries	17 300 000	8 000 000 (suggested 5 000 000 for cross AMR Accelerator Coordination)	72

The total budget of the successful proposal will consist of the requested IMI2 JU contribution plus the relevant in-kind contribution by the participating EFPIA companies and Associated Partners



Suggested architecture of the project

 Applicants to Pillar A topic should suggest complete architectures in the submitted proposals (e.g. number of work packages)



Coordination and support of all Accelerator actions via the CBN

- Applicants should note that significant project management support will be provided through the Coordination and Support group established by the Capability Building Network:
 - Supporting the coordinator in the management of scientific and financial reporting
 - Prosecution of legal agreements such as CDAs, MTAs
 - Meeting facilitation and secretariat
 - Note: operational support will also be present in Pillar B (TBDDN) of the Accelerator; the coordination and support group in the CBN will work collaboratively with TBDDN in many of these areas.
- Representatives from all selected projects will contribute to an advisory and communications board (containing representatives from all the projects running in the AMR Accelerator in addition to independent experts)



Expected impact of the CBN

- contribute to the development of a vibrant AMR research environment in the EU and strengthening the competitiveness and industrial leadership of Europe;
- contribute to EU's ambition of being a 'best practice region' for addressing AMR;
- with other elements of the AMR Accelerator, enhance the overall pipeline of medicines for patients with AMR infections;
- strengthen interaction of AMR stakeholders from across EU and globally;
- strengthen the scientific basis on AMR research







AMR Accelerator programme Pillar B: TB drug development Network (TBDDN)

Tuberculosis drug development network to accelerate and validate scientific discoveries and advance the R&D pipeline of new and innovative agents to address the global tuberculosis epidemic

> Joël Lelievre 16.07.2018 • IMI webinar

The three pillars of the AMR Accelerator

PILLAR A: Capability Network Basic science to build knowledge 1. Coordination & support of projects across Accelerator 2. Projects focused on improving success of AMR R&D PILLAR B: TB Drug Discovery Progress novel TB programs to end Ph 1

Build preclinical capabilities, explore basic science to support TB drug discovery and progress TB assets through end of Ph1 PILLAR C: Portfolio Network Incubate early drug discovery programs Novel framework to discover, study, and advance potential new treatments for AMR infection

AMR Accelerator



TBDDN Scope

A platform to:

- Profile and progress a portfolio of anti-TB compounds (EFPIA & APs) from advanced lead stage through Phase 1 (ready to enter Ph-2)
- Pan-TB regimen facilitate the design of combination regimens for the treatment of any form of TB including MDR
- Create tools and technologies to progress anti-TB compounds
- Provide learnings from the analysis of shared anti-TB clinical trial data
- Develop new alternative anti-TB drugs (host or virulence approaches)
- Interact with TB stakeholders and explore synergies



Expected contributions of the applicants

PROFILING

- Analysis of preclinical and clinical TB trial data including collection, collation and curation of TB-specific data sets
- In vitro and in vivo tools to identify, characterise and progress single drugs and combinations. Including imaging platforms to measure pharmacodynamic responses at the sites of action
- Translation of PK/PD and regulatory knowledge to support the development of limited use/accelerated pathways for TB drugs
- Translational PBPK-PD models fed with preclinical data in the TB space (PBPK, PD and disease progression integrative models), expertise in preclinical and clinical TB biomarkers
- Drug discovery optimisation activities, e.g. medicinal chemistry, microbiology, scale up, formulation, DMPK, toxicology, etc



Expected contributions of the applicants

PORTOFLIO

- Scale up synthesis of non-GMP grade of selected pre-candidates to assess therapeutic index of preclinical pre-candidates (non GLP toxicity and *in vivo* profiling into advanced TB models)
- Pharmaceutical development techniques to maximise the evaluation of the therapeutic index of novel compound
- Scale up synthesis of selected candidate compounds of GMP grade (1-5 kg) of active product ingredients of GMP grade to perform GLP toxicity studies
- First into human studies (FTIH): ability to conduct in parallel several first into human studies (FTIH)



Expected (in kind) contributions of industry consortium

- Bring novel advanced TB molecules for progression to FTIH
- Perform preclinical development studies
- Share historical TB drug discovery and development data
- Pre-candidate studies: discovery activities from Lead optimisation to selection of a molecule as preclinical candidate
- Preclinical development: studies performed between preclinical candidate and first time in human
- Early pharmaceutical development including process chemistry development, pre-formulation, formulation and drug delivery techniques to maximise the evaluation of the therapeutic index of novel compound
- Conduct standard medicinal chemistry, microbiology, pharmacology and early ADMET optimisation programmes for novel anti-TB compounds.



Expected (in kind) contributions of industry consortium

- Conduct and share results and information of enabling studies such as synthesis (up-scales, fermentation), optimisation of lead molecules, computational chemistry, profiling in *in vitro and in vivo* models (marmoset and murine models, cell & lesion penetration, PKPD profiling and modelling, metabolomics), access to enzymology platforms (biochemical and biophysical assays and crystallography) and toxicology of novel pre-candidates from TB portfolios from EFPIA and Associated Partners for further analysis
- Generate and share data, samples, and information from industry-sponsored clinical trials (Phase 1-3) in the field of TB including drug sensitive, drug resistant, and multidrug resistant tuberculosis, of compounds including enabling studies of novel precandidates from TB portfolios from EFPIA and associated partners for further analysis
- Assist in the analysis of the output of clinical trials in the TB space, e.g. efficacy, safety, translation of preclinical data with respect to safety, tolerability, dose prediction, animal models of infection and efficacy



Suggested architecture of the projects

Applicants should:

- Suggest complete architectures in the submitted proposals (e.g. number of work packages).
- Integrate contributions from EFPIA companies and Associated Partners to set up Profiling and Portfolio platforms that are fit for purpose.
- Propose a structure capable of progressing several molecules from Candidate stage up to Phase II ready.
- Present a flexible structure that takes into account decision making and attrition when planning distribution of resources per WPs over the lifetime of the project.



Key deliverables of the full project

Deliverable 1: Development and implementation of new assays and tools to study anti-TB compounds

- In vitro and in vivo assays that enable the rational design of novel, pan-active anti-TB drug candidates
- Development of imaging platform (*in vitro/in vivo*)
- PK/PD studies/models required to support approval for novel TB investigational new drug (INDs) and combinations of INDs & acceptance with EMA & FDA
- Translational PBPK-PD models
- Novel biomarkers to assess treatment efficacy, disease evolution and cure at preclinical and clinical stages
- New host-defence and virulence approaches

Deliverable 2: An advanced portfolio of anti-TB compounds:

- new or repurposed clinical candidates ready to enter into Phase 2 proof of concept studies in TB patients (note that Phase 2 studies are outside the scope of the TBDDN)
- novel combination regimens that will be formed by combining the clinical candidates



Key deliverables of the full project

Deliverable 3: Learnings derived from shared TB clinical trial data (e.g. Phase 1-3 clinical trials related to TB) and associated enabling studies:

generation and collation of clinical trial data to allow for analysis and translation
of preclinical to clinical data with respect to, for example, safety, tolerability, dose
prediction, animal models of infection and efficacy, and greater disease
understanding.

Deliverable 4: Scientific coordination and daily project management

- Scientific, administrative and financial reporting
- Engagement for preclinical and clinical TB data.
- Daily administrative tasks such as the organisation of consortium meetings, intra- and inter-work package meetings, preparation of minutes, progress reports, etc



EFPIA and Associated Partners

The industry consortium is composed of the following EFPIA companies:

- GSK
- Janssen
- Evotec

In addition, includes the following IMI2 Associated Partners:

- Bill & Melinda Gates Foundation
- Global Alliance for TB Drug Development (TB Alliance)
- University of Dundee (Drug Discovery Unit)



Budget and project durations

AMR Accelerator programme Pillar B IMI2 Call 15 topic 8	Planned EFPIA/AP in-kind [Euro]	max. IMI2 JU funding [Euro]	Indicative project duration [months]
Topic 8: Tuberculosis drug development network to accelerate and validate scientific discoveries and advance the R&D pipeline of new and innovative agents to address the global tuberculosis epidemic	120 000 000	89 830 000	72

The total budget of each proposal will consist of the requested IMI2 JU contribution plus the relevant in-kind contribution by the participating EFPIA companies and Associated Partners



Coordination and support

- Pillar B/Topic 8 will have a management structure which will be supported by the Coordination and Support group established by the Capability Building Network (Pillar A of the AMR Accelerator). The management team of pillar B will perform:
 - Scientific, administrative and financial reporting
 - Engagement for preclinical and clinical TB data
 - Daily administrative tasks such as the organisation of consortium meetings, intra- and inter-work package meetings, preparation of minutes, progress reports, etc
- Representatives from all AMR Accelerator projects will contribute to an advisory and communications board (containing representatives from all the projects running in the AMR Accelerator in addition to independent experts)



Expected impact

- Enabling the progression of potential new treatment solutions for TB patients worldwide.
- Strengthen interaction of TB R&D stakeholders from across the EU and globally
- Provide new tools and understandings to progress TB science for the discovery of new preclinical candidates and novel combination regimens
- Contributing to the development of a vibrant TB research environment in the EU and strengthening the competitiveness and industrial leadership of Europe
- Contributing to make the EU's a 'best practice region' for addressing AMR







Thank you

www.imi.europa.eu





Involvement of SMEs, patient groups, regulators

Nathalie Seigneuret

SME participation

IMI encourages the participation of SMEs in applicant consortia as they can offer a complementary perspective to other organisations, and help deliver the long-term impact of the project.

Contribution of SMEs would be considered beneficial in providing expertise and activities for example in:

• IT

- legal and IP;
- project management and communication;
- preclinical and clinical development.



Patient participation

There are many ways you can improve project performance by working with your patient partners e.g:

- patient insight on aspects related to AMR
- community outreach and dissemination
- contributing to a vibrant AMR community

"The patient, doctor and researcher – each is a different kind of expert."



Interactions with regulators

- Have a plan for interaction with relevant milestones and resources allocated, as needed
- Consider the formal regulatory process to ensure regulatory acceptance of project results (e.g. qualification procedure for biomarkers)
- Get familiar with services offered for dialogue (e.g. at EMA through qualification advice, Innovation Task Force, briefing meetings)
- Consider involving regulators as project participants or in the **advisory board**
- Have a plan for dialogue with HTA bodies / payers, if relevant

To maximise impact of science generated by projects

Engage in dialogue with regulatory authorities

More info:

- Webinar & presentations 'How to engage with regulators EMA / FDA'
- 'Raising awareness of regulatory requirements: <u>A guidance tool for</u> <u>researchers</u>'







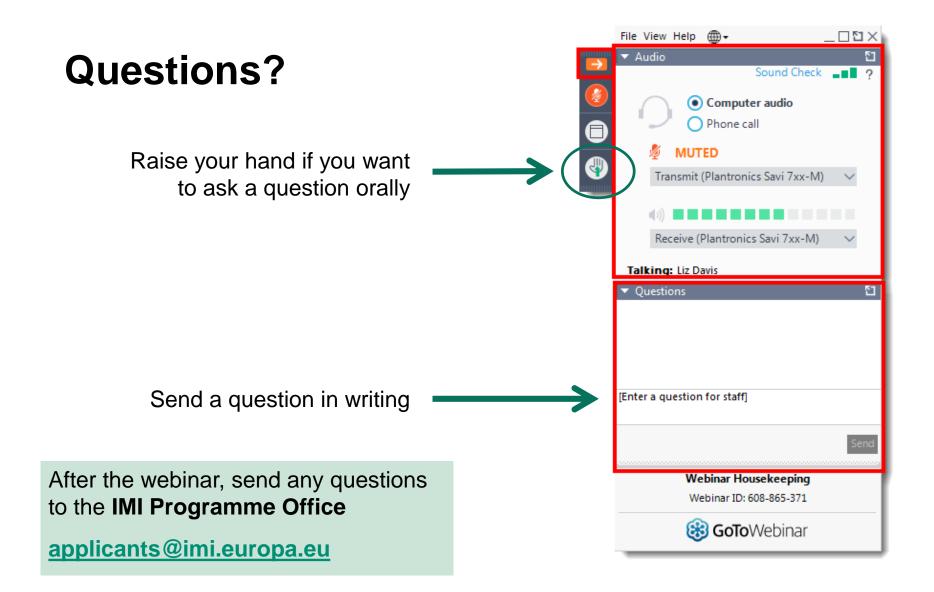
Thank you

www.imi.europa.eu





Questions & answers









Thank you!