

*Washington DC, June 6th, 2012*  
Addressing global health challenges through  
science collaboration  
ECRIN & BBMRI

***The European infrastructure for  
multinational trials: ECRIN***

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# ***What is the best treatment option for a disease condition / group of patients ?***

- Everybody knows: evidence-based medical practice
- Somebody knows: need for ‘knowledge transfer’
- Nobody knows: need for clinical trials
  - ✓ development of innovative health products
  - ✓ exploring new indications for existing drugs
  - ✓ comparative assessment of efficacy and safety of existing healthcare strategies

- ***treatment optimisation and healthcare cost containment, for the benefit of health professionals, of health authorities and of patients worldwide***
- ***international cooperation is required***

# What is ECRIN ?

A pan-European, distributed infrastructure providing coordinated services to *multinational* clinical research in Europe:

- access to *patients* and to *expertise* throughout Europe
- despite the *fragmentation* of health, legislative and funding systems
- *support* to investigators and sponsors in multinational studies
- to make Europe a single area for clinical research



*Barre des Ecrins*  
French Alps  
alt. 4102 m

**ECRIN-ERIC  
OPERATIONS**



**ECRIN-IA  
STRUCTURING**



**ECRIN-PPI**



**ECRIN-TWG**



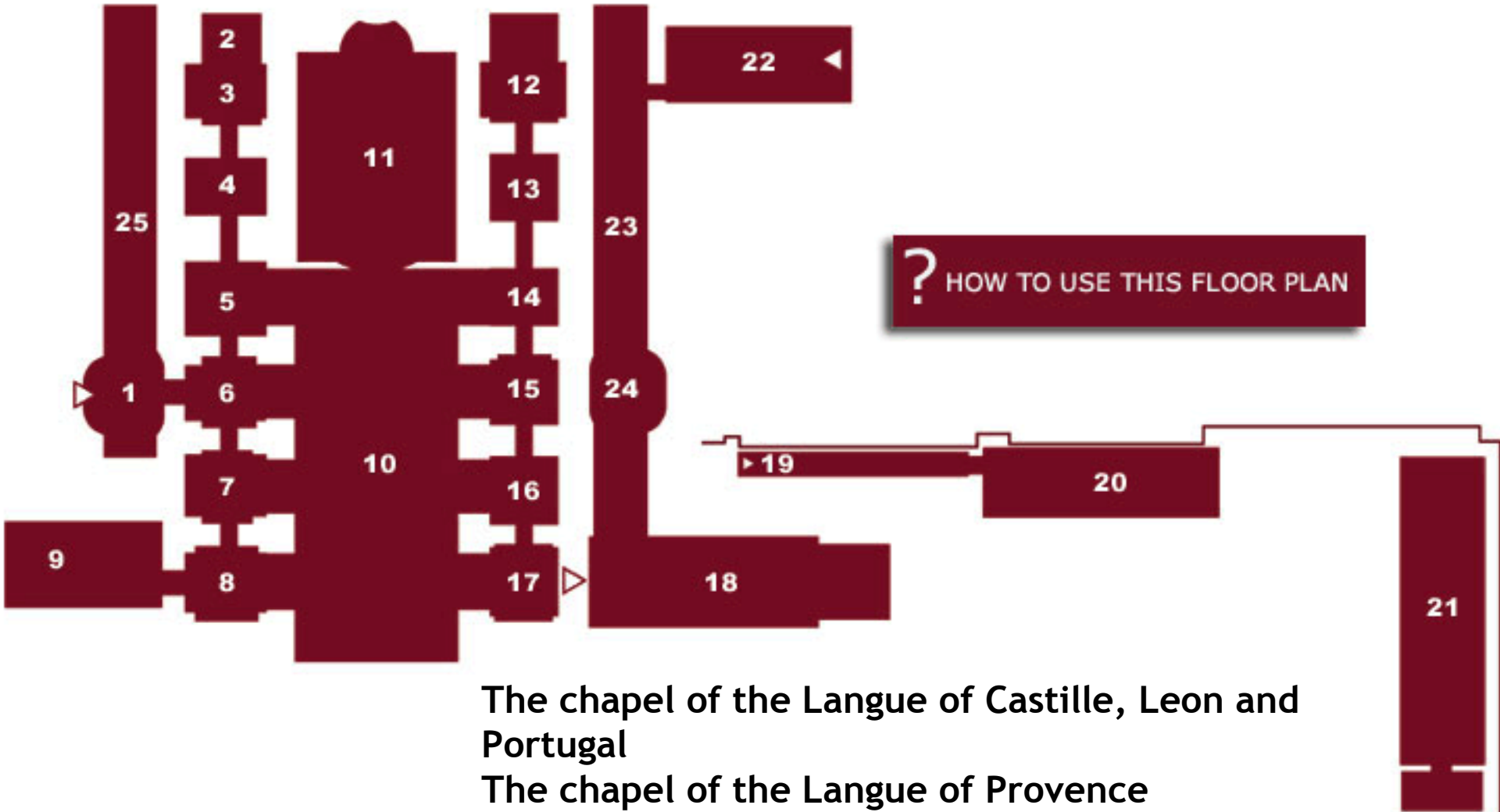
**ECRIN-RKP**



# *What is a distributed infrastructure ?*



*St John's Co-Cathedral, Malta*



## List of Chapels

The chapel of the Langue of Castille, Leon and Portugal

The chapel of the Langue of Provence

The chapel of the Langue of Aragon

The chapel of the Langue of Auvergne

The chapel of Our Lady of Philermos

The chapel of the Langue of Italy

The chapel of the Langue of Germany

The chapel of the Langue of France

The chapel of the Anglo-Bavarian Langue

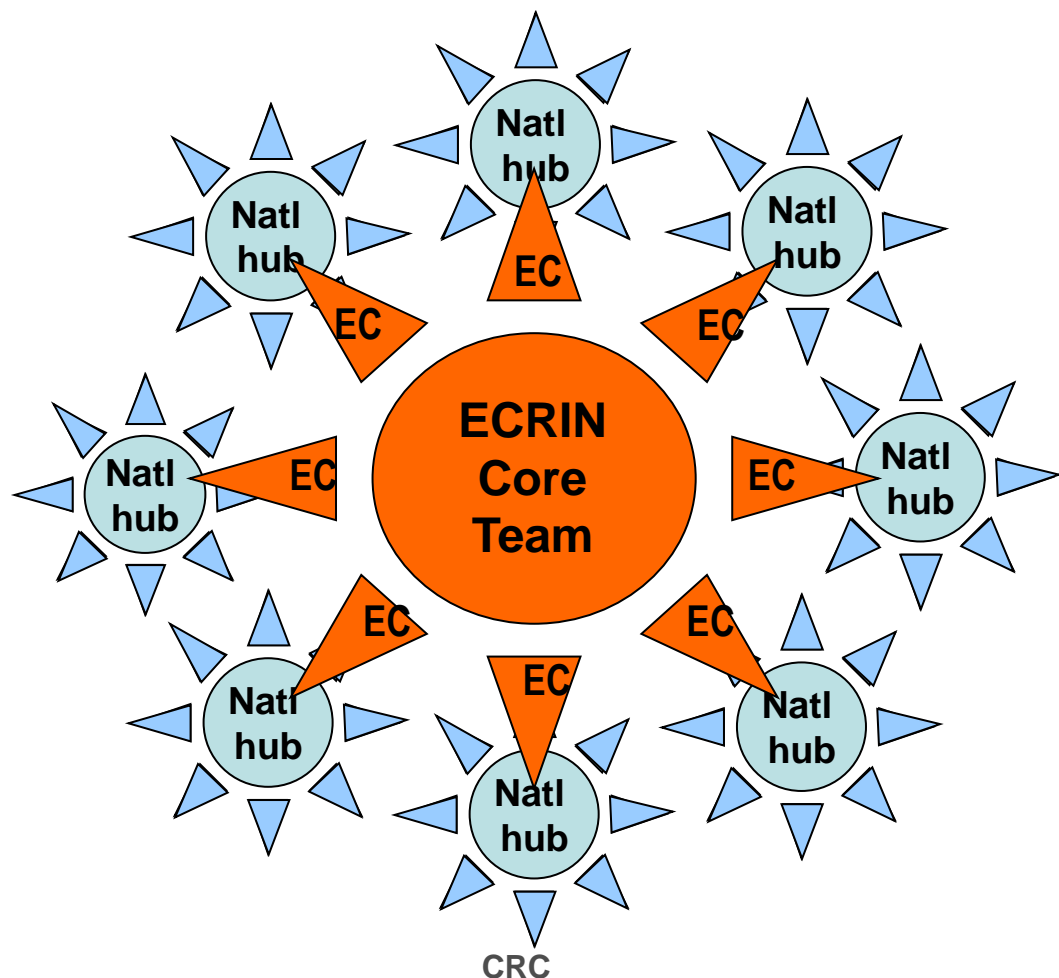
# How does ECRIN coordinate its national partners ?

- ECRIN ERIC
- Scientific Partners  
(national networks & hubs)

## *Framework contracts on*

- Provision and costs of services
- Quality assurance

➤ *coordinated support and services to multinational trials*

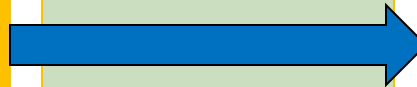


# How does ECRIN support multinational trials ?

## ➤ Information and consultancy during the preparation of the trial

- Information on regulatory and ethical requirements
- Information on sites and participant recruitment
- Information on clinical trials units
- Information on insurance
- Information on cost and funding opportunities
- Information on contracting
- Adaptation to local context

*Full protocol*



Scientific  
evaluation

Logistical  
assessment

Contract  
with sponsor

## ➤ Services during the conduct of the trial

- Interaction with competent authorities and ethics committees
- Support with insurance contracting
- Adverse event reporting
- Monitoring
- Data management
- Investigational medicinal product management
- etc.



# *ECRIN scientific board: acceptance criteria*

- 1 - Multicentre trial run in at least two European countries.
- 2 - Rules for transparency:
  - Commitment to register the trial in a public register before inclusion of the first participant, for example on [www.clinicaltrials.gov](http://www.clinicaltrials.gov).
  - Commitment to publish results irrespective of findings.
  - Commitment to make raw anonymised data sets available to the scientific community upon legitimate request to the sponsor or principal investigator once the trial is completed.
  - Declaration of conflicts of interest.
- 3 - Rationale based on up-to-date systematic reviews of clinical data or, where not possible, of preclinical data on the experimental intervention and comparator.
- 4 - Clinical relevance and/or marked impact on public health.
- 5 - Suitable overall trial design appropriate to the clinical question, including for example:
  - Selection of an appropriate and justified experimental intervention and comparator.
  - Adequate sample size with supporting calculation.
  - Relevant patient population (inclusion and exclusion criteria), setting, and duration of treatment and follow up.
  - Outcome measures for efficacy and safety with clinically meaningful benefit for the patient.

# *ECRIN scientific board: recommendations*

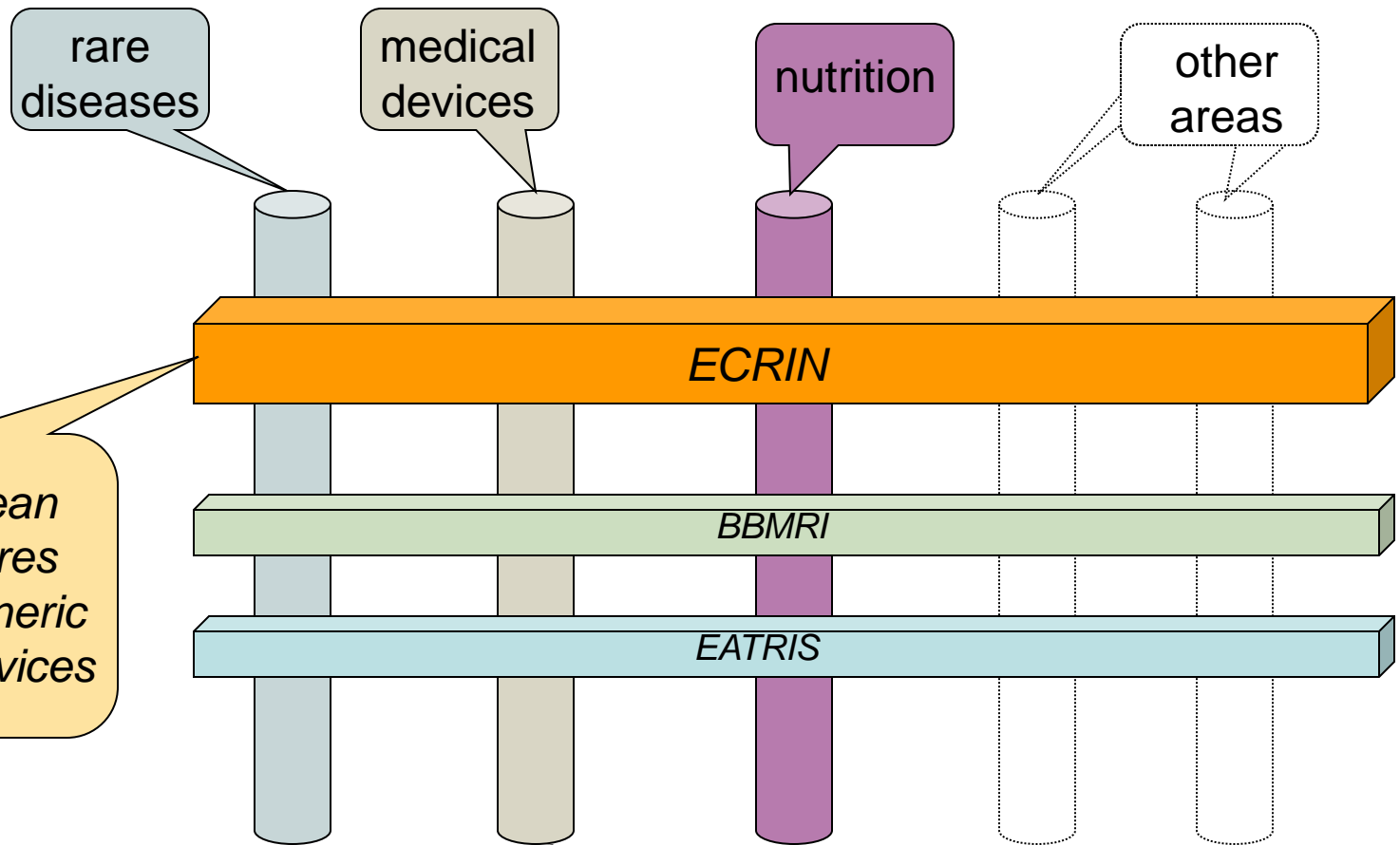
- 1 - Randomized superiority design is preferable for efficacy assessment, rather than non-inferiority.
- 2 - Use of the best available comparator.
- 3 - Primary outcome measure most suitable for patient and public health's interests.
- 4 - Sample size calculation based on the primary outcome measure, and power calculation for other important outcome measures.
- 5 - Adequate recording of adverse events.
- 6 - Adequate strategies to reduce or control possible biases, for example central randomisation; blinding of all parties (at least assessors, statisticians); intention-to-treat analysis for efficacy in superiority trial; blinded conclusions drawn before breaking the allocation code; and interpretation of, and decision to publish results, independent of funding source.
- 7 - Description of potential risks and how to handle them, including involvement of and charter for independent data monitoring and safety committee.
- 8 - Description of governance structure of the project including responsibility for coordination, data analysis, and independent monitoring.
- 9 - Description of indications of feasibility, for example: committed clinical sites; expected participant recruitment to meet sample size; resources and funding available; and logistics of delivering the intervention(s).
- 10 - Involvement of pertinent patient organisation (if available) in the protocol design.

# *What are the funding sources for independent multinational trials ?*

- FP7 health priority, and H2020
  - 152M€ for 26 trials in 2011
- Innovative Medicines Initiative
- Charities
- National funding agencies (ex. Denmark)
- ERA-net (NEURON)
- Joint programming initiatives
- International programmes (IRDIRC)
- ECRIN-IA ‘Transnational access’
  - Pilot experience of funding for multinational trials on rare diseases, nutrition, medical device
  - free services to trials already funded in the coordinating country



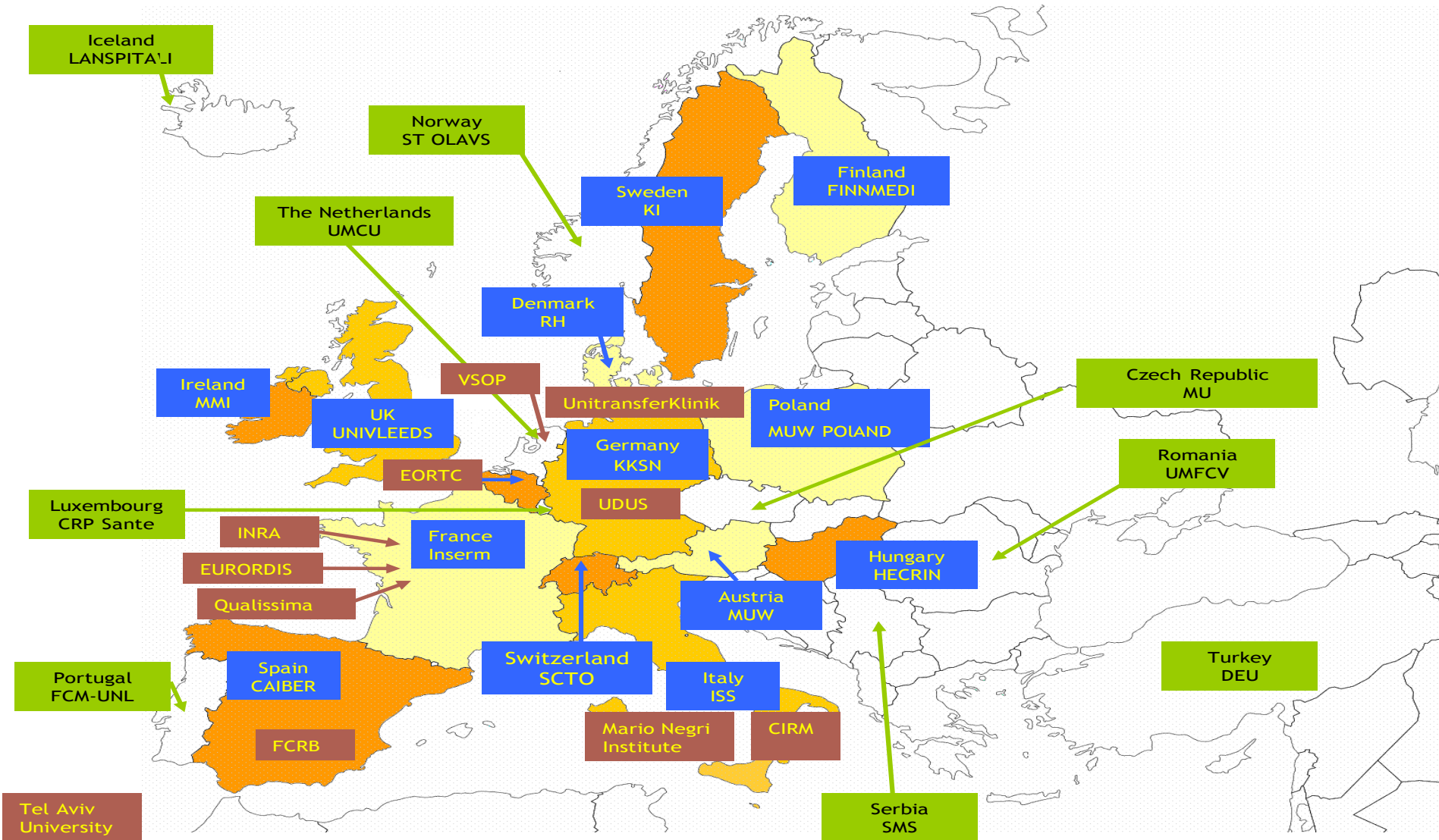
# How will ECRIN-IA (2012-16) structure pan-European investigation networks ?



*pan-European infrastructures providing generic tools and services*

*pan-European investigation networks developing specific tools and scientific content*

# What is the capacity building and network expansion policy?



# *What is ECRIN policy towards patients and citizens ?*

- Promote public awareness of the challenges raised by clinical research: FP7 ECRAN
- Training of patient representatives to clinical trials methodology
- Involvement of patient representatives in protocol design, outcome measures, and scientific assessment
- Promote transparency
  - registration of trials protocols
  - reporting of clinical trials results
  - open access to raw, anonymised trials data



International  
Clinical  
Trials'  
Day  
2010

ECRIN  
celebrations  
20<sup>th</sup> of May, Stockholm  
Berns Salonger, Kammarsalen

ECRIN supports multinational clinical research  
and hosts International Clinical Trials' Day  
celebrations [www.ecrin.org](http://www.ecrin.org)



ECRIN  
EUROPEAN CLINICAL RESEARCH INFRASTRUCTURES NETWORK

# *What are the next steps ?*

- **Legal status**
  - European Research Infrastructure Consortium ‘ERIC’
  - sustainable support by EU countries
  - founding members : Germany, Italy, Spain, France
- **Acting as a sponsor (instead of service provider to sponsors)**
- **Acting as the sponsor’s representative in Europe for trials initiated outside Europe**
- **Developing procedures for international collaboration**
  - Identification of obstacles
  - Development of tools, establishment of procedures
  - Run pilot trials
  - Stable partnership agreements with non-EU partners (NIH)



***Thank you !***