

LIMITI E PROSPETTIVE DELLA RICERCA CLINICA INTERNAZIONALE

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Il punto di partenza



ADULTI

- Farmaci adeguatamente studiati

Requisiti di:

- Sicurezza
- Efficacia
- Alta qualità
- Scoperta di farmaci innovativi



BAMBINI

- 50-90% medicinali utilizzati in pediatria NON è appositamente studiato

Rischi:

- ADRs (sovradosaggio)
- inefficacia (sottodosaggio)
- formulazioni inadeguate
- ritardi nell'accesso a farmaci innovativi

Le sperimentazioni cliniche in pediatria

- Gli studi clinici in pediatria sono più difficili da condurre, necessitano di più tempo e costano di più:
 - Motivi di tipo metodologico ed etico
 - Ridotto numero di pazienti
 - Diversità dagli adulti (anatomia, fisiologia, sviluppo dei vari organi)
 - Eterogeneità delle popolazioni pediatriche (neonati/adolescenti)
 - Estrapolazione dati da adulto non sempre possibile
 - Patologie solo pediatriche
- L'uso pediatrico rappresenta un mercato minore per l'industria farmaceutica

Trial (di efficacia) negli adulti e in pediatria per lo stesso farmaco antiipertensivo

ADULTI

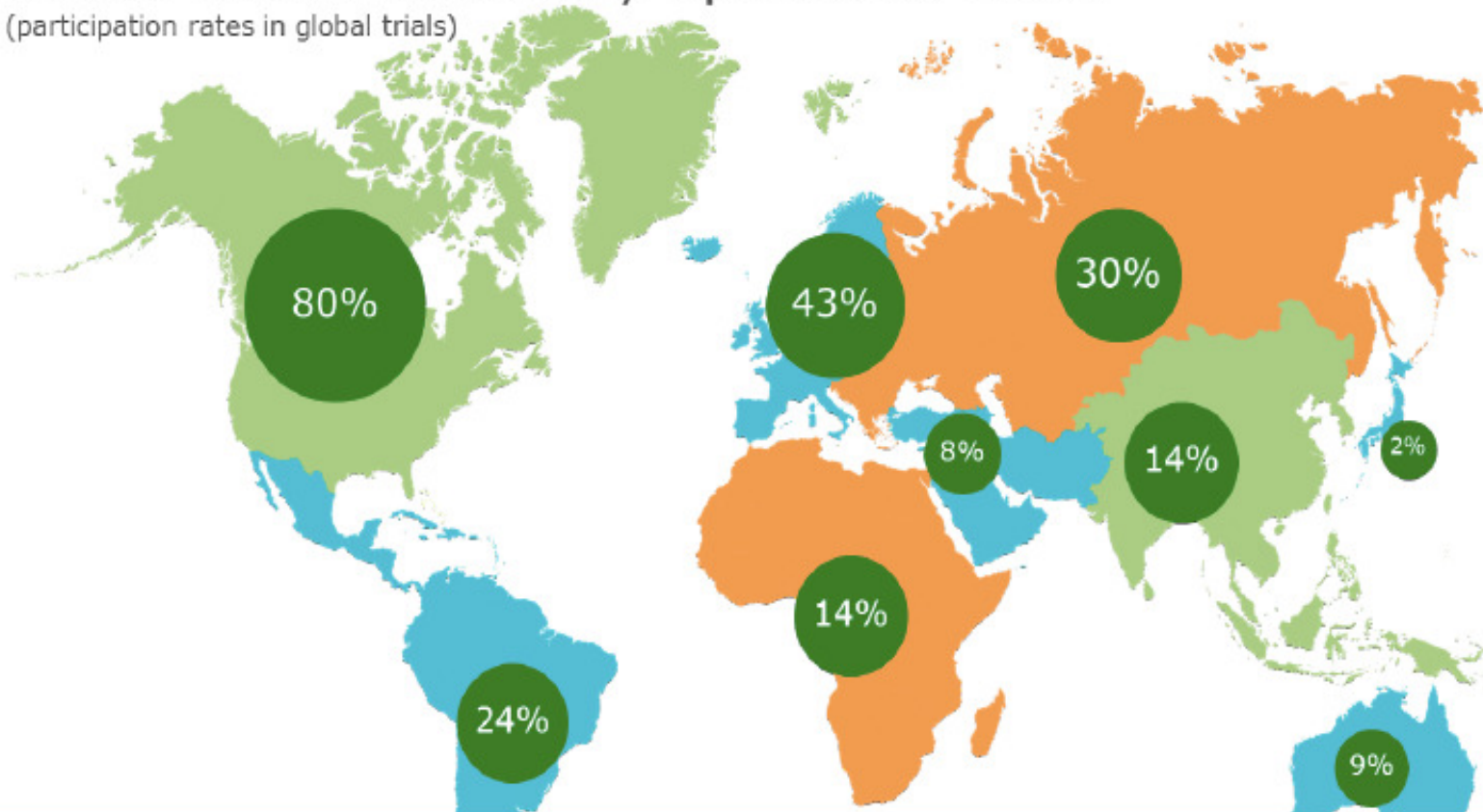
- N = 220 pazienti
- Paesi = 1
- N. Siti = 8
- Tempo impiegato per lo studio = 5 mesi
- 24 pazienti per sito

IN PEDIATRIA (6-16 aa)

- N = 253 pazienti
- Paesi = 4
- N. Siti = 70
- Tempo impiegato per lo studio = 1 anno e 2 mesi
- 3-5 pazienti per sito

Global Reach, Low Per Site Participation

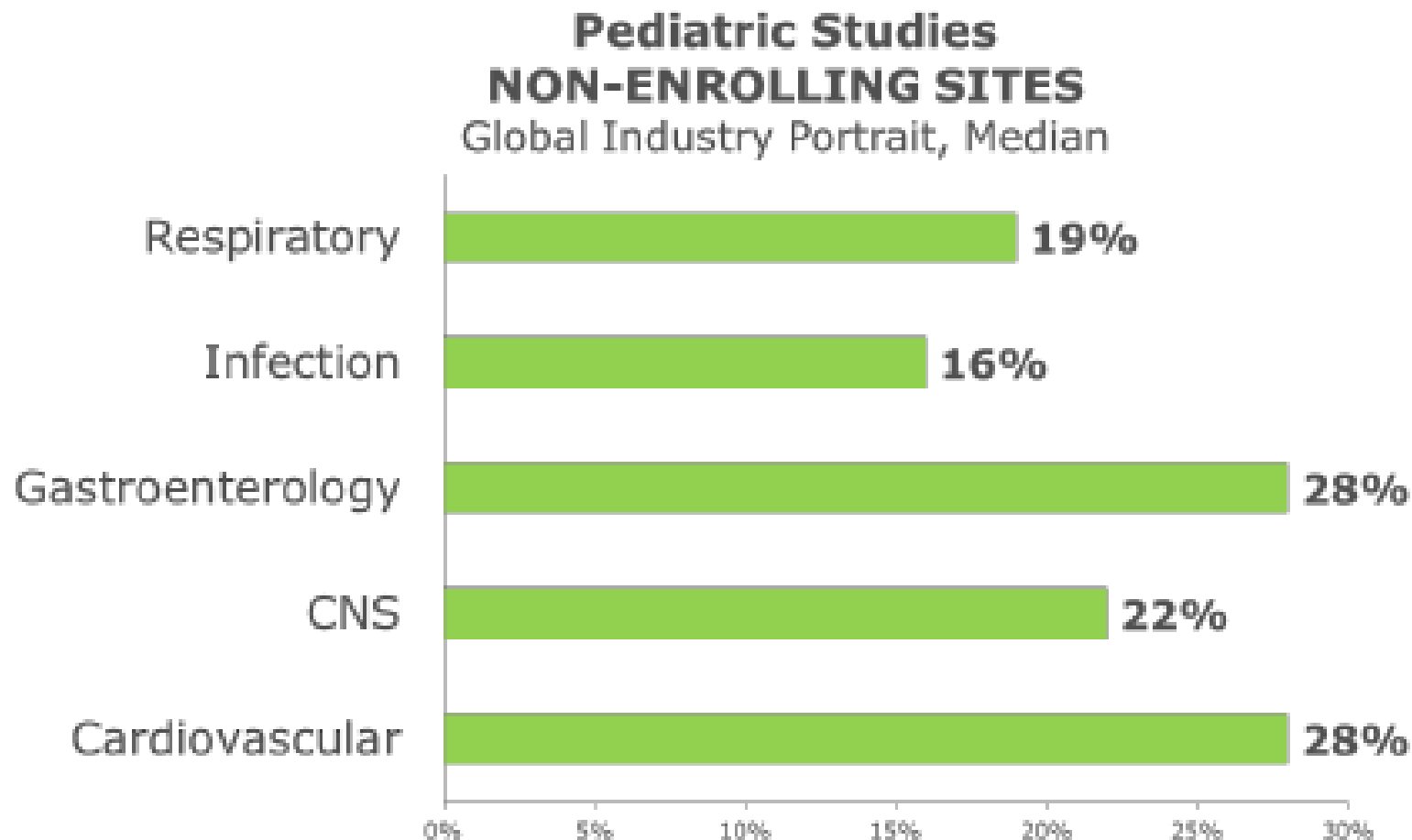
Global Pediatric Industry-Sponsored Trials
(participation rates in global trials)



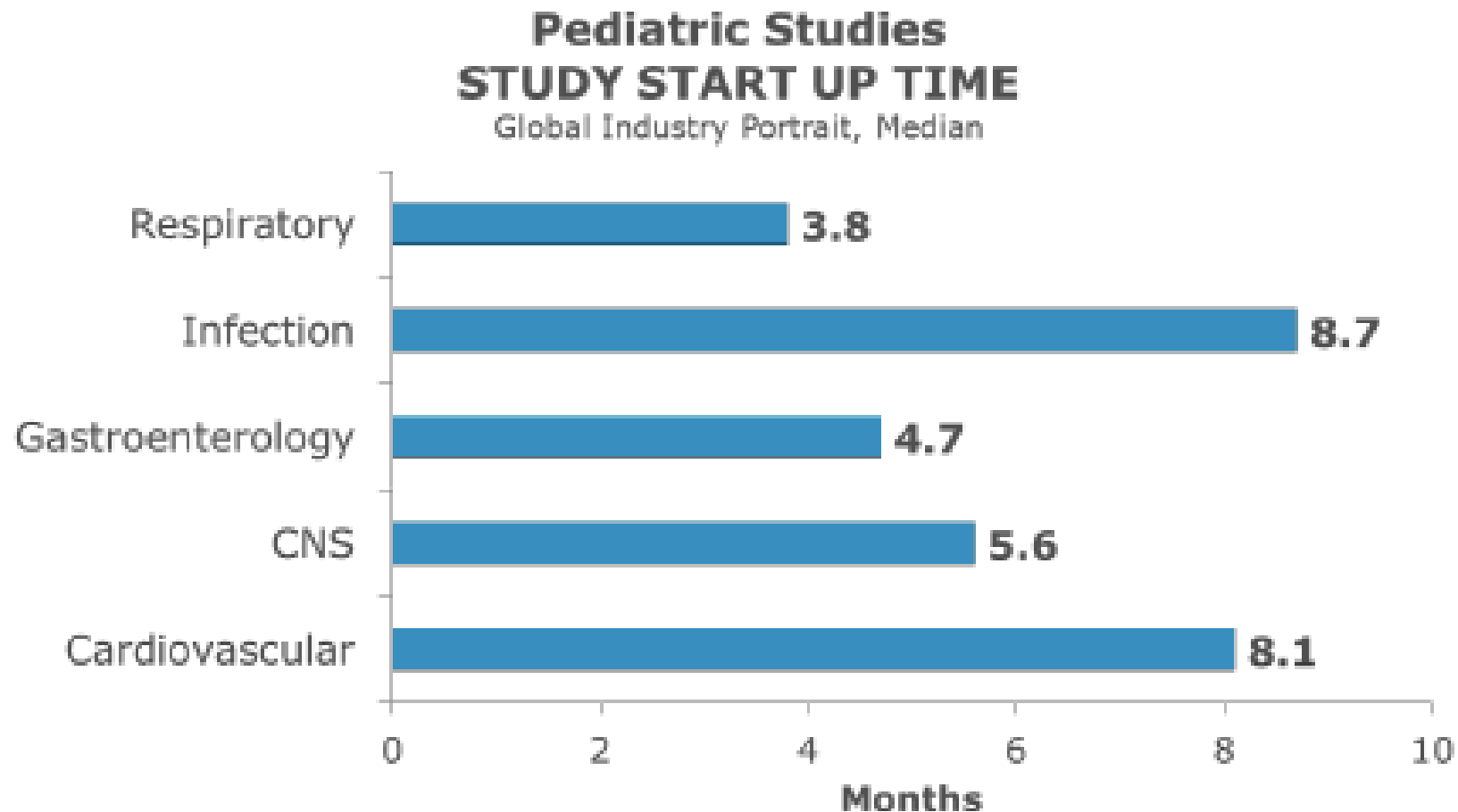
30% of sites do not enroll (NA and EU)*

< 1.1 patients per site per year**

Number of Non-Enrolling Sites is very High



Start up is very long



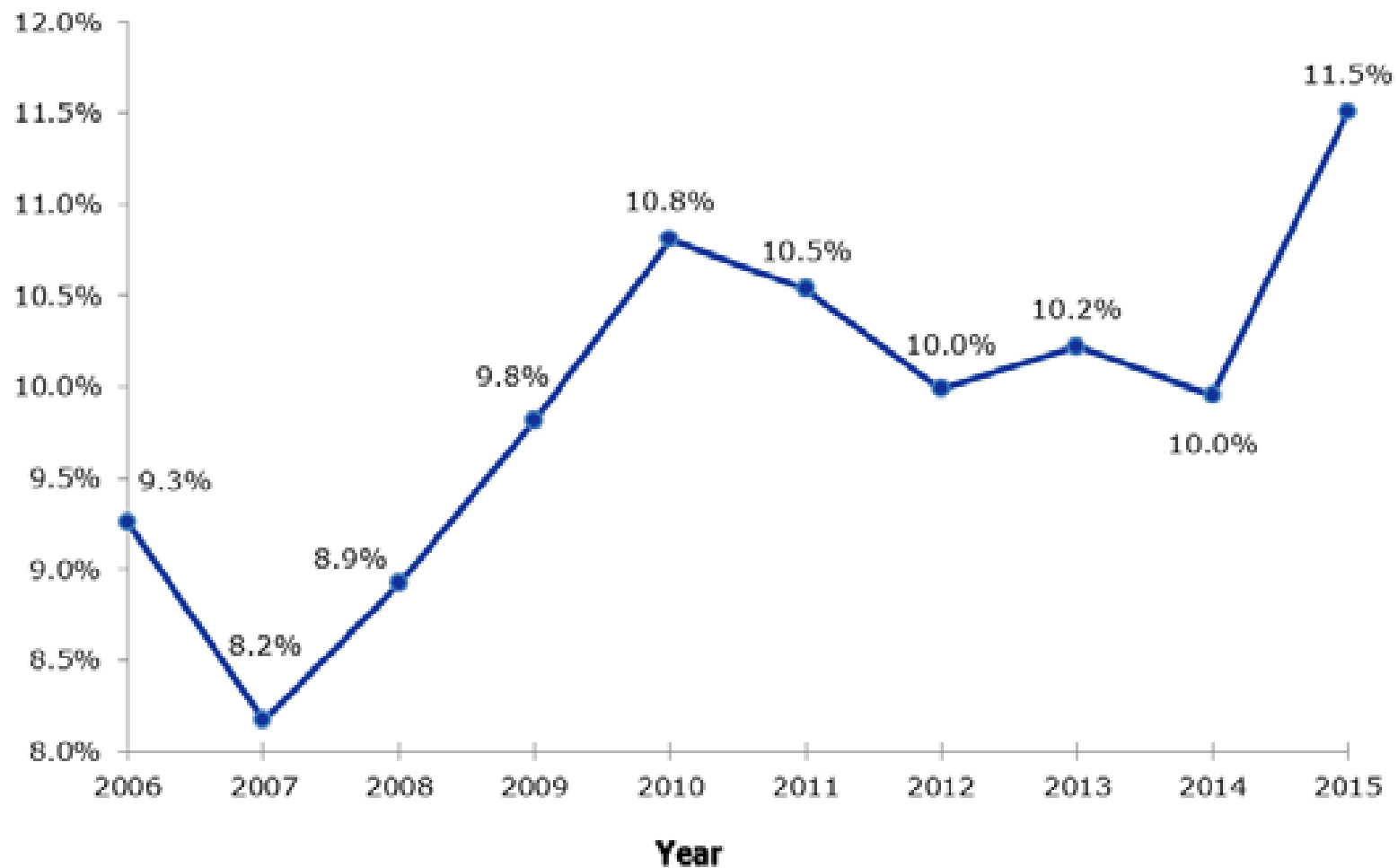
Dopo 10 anni di Regolamento

	Compliance Checks	Waiver	Initial PIP	Modifications
2007	0	18	71	0
2008	9	75	198	9
2009	29	76	195	77
2010	48	65	267	107
2011	59	61	126	155
2012	45	70	108	181
2013	58	60	138	202
2014	85	57	104	214
2015	62	60	112	211
Total	395	542	1319	1156

Endocrinology-Gynaecology	435
Infectious Diseases	431
Oncology	416
Cardiovascular	376
Pneumology - Allergology	359
Immunology-Rheumatology	344
Neurology	249
Haematology-Hemostaseology	247
Vaccines	196
Other	183
Dermatology	175
Gastroenterology-Hepatology	170
Pain	122
Uro-nephrology	104
Psychiatry	103
Ophthalmology	88
Diagnostic	44
Oto-rhino-laryngology	43
Neonatology	32
Anaesthesiology	17
Nutrition	5

Aumento degli studi clinici in pediatria

Percentage of paediatric trials
(of all trials, by start year)



I numeri del regolamento pediatrico oggi

- 770 PIPs ad oggi (2016) sono in corso
- 750 clinical trials da completare
- 260.000 pazienti da arruolare per il completamento degli studi!

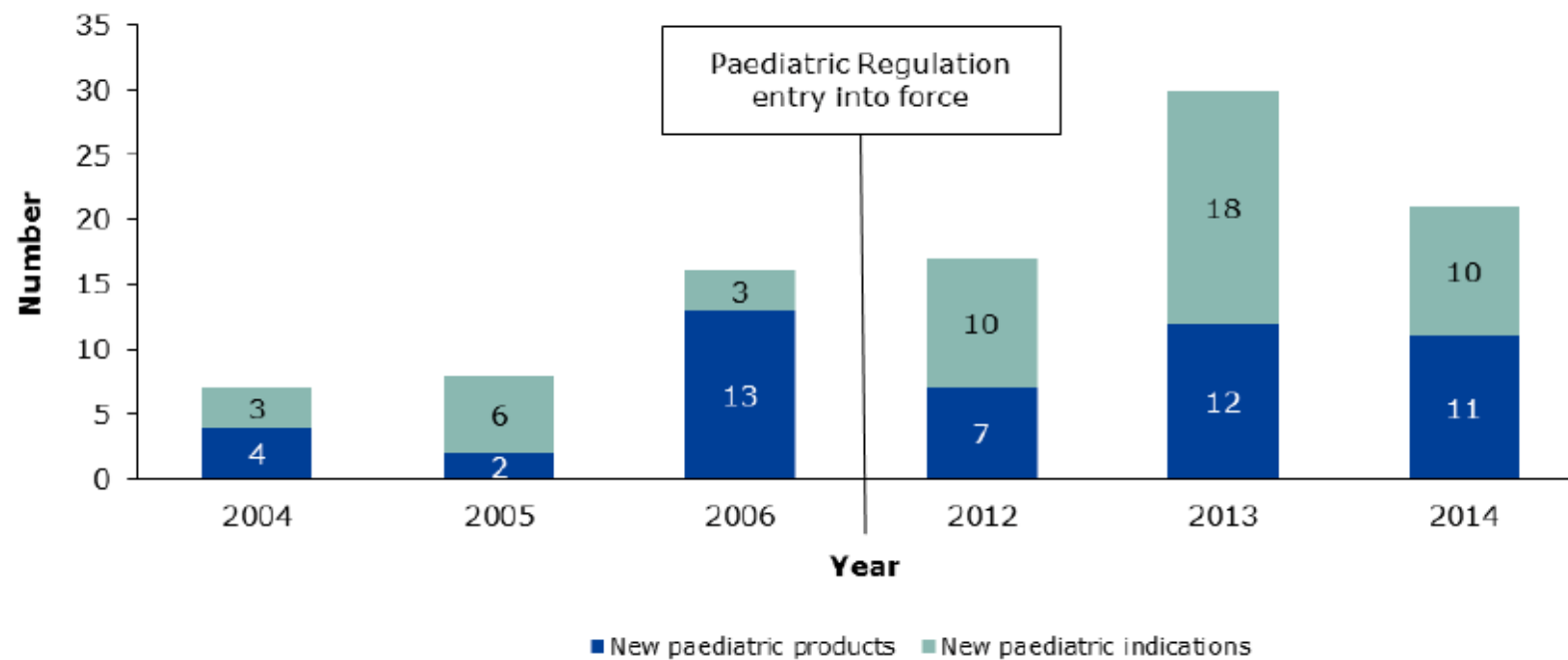
....and subjects*

	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Preterm neonates	0	0	0	327	82	2,527	1,552	3,634	4,997	1,979
Term neonates	0	98	5	184	169	1,353	2,283	1,488	2,168	1,749
Infants and toddlers	530	119	20	54,715	2,224	13,318	62,226	17,772	39,095	122,295
Children	2,683	706	270	5783	2,771	21,665	30,831	27,994	65,824	48,358
Adolesecents	435	36,458	285	5801	4,869	20,206	22,680	17,628	45,717	36,921
Total	3,648	37,381	580	66,810	10,115	59,069	119,516	68,516	157,261	211,302

*planned to be enrolled in clinical trials, by age by year of authorisation of the trial (or, if not available, by year of protocol upload into EudraCT).

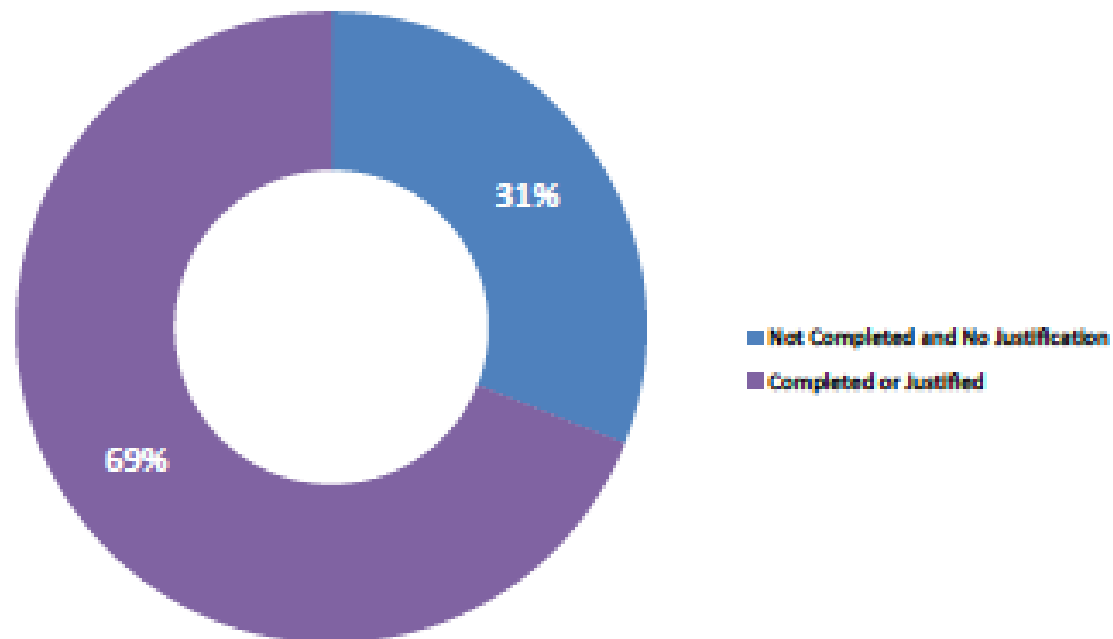
Più farmaci disponibili

Number of new paed. products and indications
2004-2006 and 2012-2014



Cionostante...

Still Struggling



Ninety Pediatric Investigation Plans (PIPs) were scheduled to be finished in June 2013:

- 31% were not completed and no justification provided
- 69% were completed or provided justification and were granted more time

Some Reasons For Existing Challenges

- **Misalignment between the goals from Regulatory Authorities, Academia and Pharmaceutical Companies**
 - Government: Public Health Aim
 - Industry: Regulatory Compliance and/or Market Incentive
 - Academia: Authorship, Academic Promotion, Patient Care
- **Desire for Retaining Independence and Autonomy**
 - Industry traditionally is competitive, much less in Paediatrics
 - Academic Centers also compete with each other and have different standards of care
 - Lack of Harmonization between regulatory authorities

Criticità

- Paediatric research infrastructure needed to conduct such studies is not developing at the same pace to meet this growing need.
- Paucity of patients available for study in many paediatric indications and need for multiple capable sites to satisfy enrolment in trials: clinical trial infrastructure across the EU is not sufficiently organised
- Lacks adequate funds and scale to consistently and efficiently deliver both industry-sponsored and academic non-industry sponsored clinical trials

Opportunity for Efficiency

Efficiency lowers R&D investment and increases likelihood of success



IMI2 Call



- IMI2: Partnership tra CE e EPFIA per finanziamento progetti
- Call10-T4: Creation of a Pan-European paediatric clinical trials network



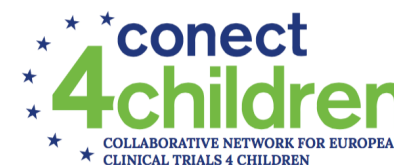
- Creazione del Consorzio C4C: Tutti (o quasi) i Network Nazionali organizzati + Network Disease Specifici + grandi Ospedali/centri di ricerca pediatrici
- C4C risponde alla call (2 stages: 1 step 28/03/2017; 2 step settembre 17; partenza progetto 2018)

ITALIA partecipa come INCiPiT – Italian Network for Paediatric Clinical Trials

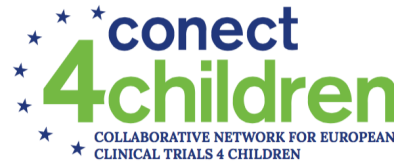


Building on successful initiatives

- Trial delivery
- Innovative methodologies
- Interactions with Industry and Regulators
- Involvement with young people and children
- Diverse funding opportunities
- Education



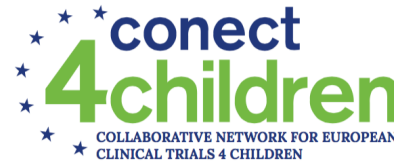
Network Vision



Europe will use a coordinated approach to deliver high quality “regulatory grade” and independent clinical trials in:

- Multiple countries
- Multiple sites
- All paediatric age groups
- All paediatric disease groups

Network Mission

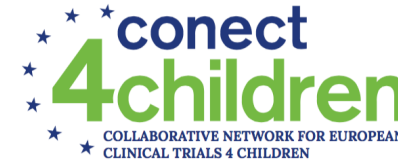


- Improve availability of information about medicines used by children
- Promote the delivery of high quality trials of medicines for children by supporting:
 - Trial implementation using resources shared between studies
 - Trial design through a combination of information about natural history, feasibility and expert opinion

Public- and industry-funded studies

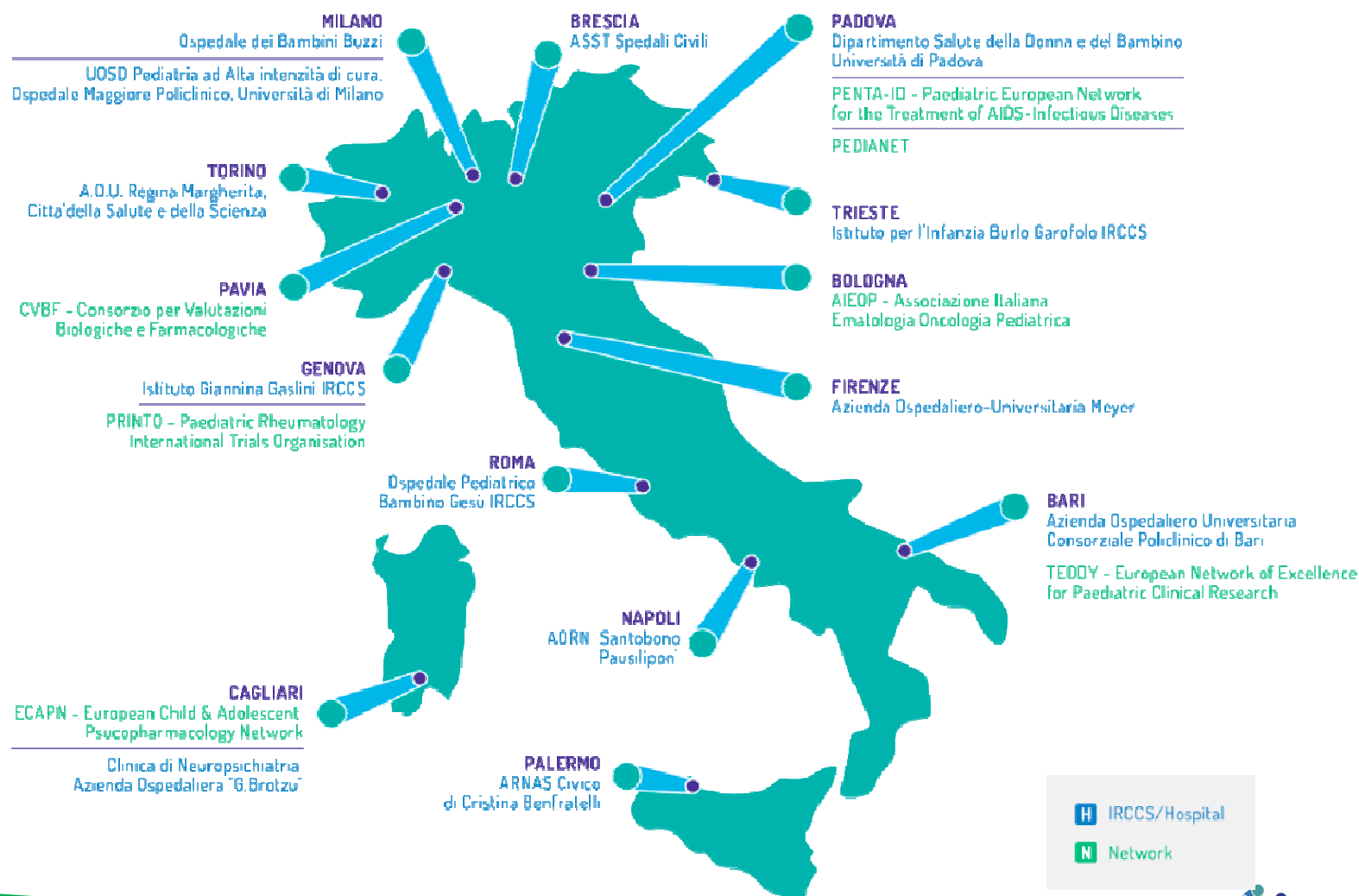


Network Values



- Collaborate on information and processes through learning together
- Share resources between studies / specialties
- Consistently follow procedures based on common standards that are adapted to local circumstances
- Children and young people are at the heart of our work
- Efficient communication between Sponsors and sites
- Trusted relationships based on predictability and reliability

INCiPiT Italian Network for Paediatric Clinical Trials



INCiPiT

www.incipit-ped.net

CHI SIAMO:

INCiPiT è un Network composto da i principali IRCCS e Ospedali Pediatrici Italiani, i grandi dipartimenti di Pediatria e Networks Nazionali e Internazionali che si occupano di sperimentazione in pediatria

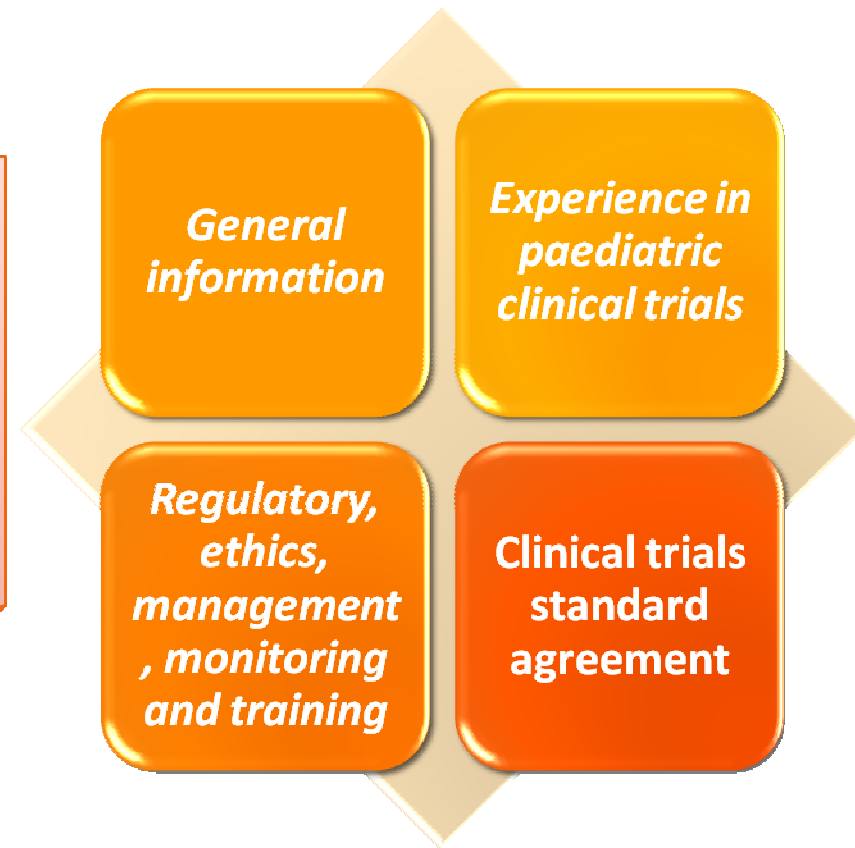
MISSION

La mission di INCiPiT è incrementare e supportare l'ideazione, la realizzazione e il completamento di tutti i tipi di studi clinici profit e no-profit (fase I-IV) condotti in Italia in pediatria

SURVEY

60 domande raggruppate in sezioni, concordate e finalizzate con diversi interlocutori a livello europeo

Inviata a tutti Partners INCiPiT per identificare l'esperienza dei centri nella sperimentazione in pediatria



Cosa è emerso

- Fotografia complessiva dei centri INCiPiT
- Valutazione complessiva dell'esperienza della ricerca clinica pediatrica in Italia – grande potenzialità ma margine di miglioramento!
- Ogni ente: ricognizione ed autovalutazione del proprio pregresso ed expertise nell'ambito degli studi clinici pediatrici
- Indagine non appropriata per i Networks partners INCiPiT – step successivi
- Tempi di compilazione lunghi e Sistema self-report
- Pronti con la II survey per mappare meglio potenzialità/gap (per aree terapeutiche, feasibility)

Conclusions

- The Pediatric regulation has paved the way for developing Medicines tailored for children
- The gap between PIPs and new available Medicines reveals a poor efficiency of the “System”
- The problem of the “old Medicines” has not been solved.
- There is a need for more organized, “well trained”, multidisciplinary Pediatric Trial Sites
- C4C Network (INCiPiT) may contribute to efficiency and opportunities

www.incipit-ped.it

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