

State of the Art Report 2017



Imprint



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Authors

The ICPerMed Secretariat, represented by the The French National Funding Agency (ANR) (Dr. Monika Frenzel), on behalf of the International Consortium for Personalised Medicine, ICPerMed.

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Contact

The French National Funding Agency (ANR)
Dr. Monika Frenzel
E-mail: monika.frenzel@agencerecherche.fr

ICPerMed Secretariat
Dr. Ulrike Bußhoff
E-mail: ICPerMed@dlr.de
ICPerMed webpage: <http://www.icpermed.eu>

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Andrea Nolte | DLR Project Management
Agency

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Executive Summary

The International Consortium of Personalised Medicine (ICPerMed) aims to publish a state-of-the-art report on an annual basis. With this yearly report, ICPerMed seeks to facilitate the follow-up of the development of Personalised Medicine (PM) research and its implementation throughout Europe and beyond. The annual reports describe the strategies and achievements ICPerMed delivers on its objectives; serve as an instrument to monitor the efforts of, and steps taken towards, the implementation of its work plan: the ICPerMed Action Plan. After approval by ICPerMed bodies, each report will be available on the ICPerMed website, disseminated within the ICPerMed network and to all interested parties.

This state-of-the-art report describes the ICPerMed activities performed in the first year: November 2016 to October 2017. It comprises mainly information gathered within the consortium via the ICPerMed member organisations and via the ICPerMed activities (e.g. the ICPerMed workshop 2017, the first survey on Programme funding in PM launched within ICPerMed, etc.) but also outside the consortium, if available.

With the publication of its Action Plan in March 2017, ICPerMed achieved an important milestone towards a common work programme for all partners included in this international initiative. The Action Plan intends to align research activities within the entire range of PM on the regional, national, European and international level. The topics highlighted in the Action Plan represent research and research-supporting activities that are “ready for action”. These will feed into national and European strategic discussions carried out by research funders from different countries and regions, in order to shape future funding programmes, not only single actions, but also joint efforts.

Within this first year, ICPerMed integrated successfully into the PM environment on the European as well as international level. Important steps on this way have been the presentation of the initiative via the ICPerMed website and the launch of the bi-annual newsletter. ICPerMed demonstrated its outstanding networking capacities by (1) inviting (external) speakers from other initiatives to internal meetings, (2) integrating experts from different fields in PM into ICPerMed working groups, such as the challenge groups during the development of the Action Plan, and (3) interaction with the global PM community, e.g. via the ICPerMed workshop 2017 and the ICPerMed award 2018. With the Partnering tool, which was launched in November 2017, ICPerMed contributes to the development of new collaborations and an improved exchange within the PM community.

The mapping of PM funding activities and the establishment of the ICPerMed database will allow interested users to be informed about regional and national funding opportunities. The database will reflect the involvement and the commitment of the different countries and regions participating in ICPerMed towards the implementation of the Action Plan. It will also serve to underline the leading position of Europe and its partners from Canada and Israel in the transition towards a health care system characterised with Personalised Medicine approaches.

State of the Art Report 2017

1. Development of ICPeMed and its vision?

ICPeMed stands for the International Consortium for Personalised Medicine. It is a consortium of funding agencies, science and health ministries around Europe, which in addition is engaged in supporting Personalised Medicine (PM).

ICPeMed was initiated during several workshops organised by the European Commission (EC) throughout 2016, based on a previous project, PerMed, funded from 2013 to 2015 by the European Union's 7th Framework Programme. PerMed brought together many organisations (including research, industry, funding organisations and ministries) active in the area, and emphasized that real progress in PM can only be achieved when research and implementation efforts cover the entire value chain. Only by integrating the different aspects of the whole value chain, innovations in diagnosis, therapy, ICT and prevention, can strategies be developed that ensure sustainability of health care systems and fair access for all citizens. PerMed described these challenges within its Strategic Research and Innovation Agenda (SRIA)¹ and gave recommendations for advancing in this field.

ICPeMed continues the work that was previously started by the EC and PerMed in the area of PM. It brings together a broad expertise and political will, with the overall aim of developing a more coordinated approach to PM research across Europe. The consortium, its working groups and its chairs are supported in all aspects of their work by the ICPeMed Secretariat, a Coordination and Support Action financed by Horizon 2020.

In October 2017, ICPeMed comprises 35 full members and 5 observers from 27 different countries and 4 regions. Since ICPeMed originates from a European initiative, currently most members are from Europe, but ICPeMed seeks to include in the coming years more international partners. Since the start of the initiative at the end of 2016, ICPeMed has been pleased to welcome three new members: The Spanish region Navarra, represented by Comunidad Foral de Navarra - Gobierno de Navarra; Romania, represented by the Ministry

of Health; and Switzerland represented by the Swiss Academy of Medical Sciences.

ICPeMed – European dimensions

The European Union invests significantly in research and innovation. Health research is an important area with around 7 billion Euros of investment within the last 7 years. The goal is that the European citizens of the 28 member states should benefit from this investment.

The calls for proposals under the current EU Framework programme for research and innovation H2020 are open to different kinds of stakeholders, for example, researchers, industries, patient organisations etc. The investment is thereby not only going into basic research but also towards the innovation cycle, i.e. how to bring new discoveries into clinics, industry and to the patients themselves. The EU is investing in research cooperation at all stages and is fostering the collaboration of different countries and different types of organisations/stakeholders.

Personalised Medicine is one important topic in the area of health research. Within frameworks 6 and 7 of the EU, many research projects have already been funded in the field of PM on the level of approx. 2 billion Euros but there is still an important focus on the funding of research projects within this field.

Within this context, ICPeMed is the most recent example of international knowledge exchange, collaboration and coordination in the area of health research, with a focus on PM. ICPeMed is a grouping of health and research ministries, regional authorities, as well as of funding agencies from an impressive number of European countries, H2020 associated countries, and Canada. The consortium is open to new members, requiring no financial commitment from its partners but an engagement with the aims of the consortium, e.g. by sharing available information about activities in PM to get a better map on PM activities across Europe and on the international level.

¹ http://www.permed2020.eu/_media/PerMed_SRIA.pdf

Most of the funding of the European Commission still goes into research projects, but there is a need to develop an overall vision for PM in Europe and beyond, to finally bring PM approaches to every citizen. The exchange within ICPeMed, including the analysis of what is being funded and in what way, by bringing together the different players and decision makers from the different EU countries and beyond, will be a step forward in setting the standards needed for the implementation of PM. Results of this analysis could lead to recommendations for reflection and vision papers, and thereby shape the funding landscape in Europe and elsewhere.

The collaboration within ICPeMed aims to increase the benefit of efforts, and to obtain faster research results by maximising the use of resources more efficiently. This should mean that citizens and patients receive results in a much faster and more coordinated way than would have been possible as individual regions or countries.

Not all countries participating within ICPeMed are at the same level of PM research and implementation, but by forming ICPeMed as a consortium and by coordinating activities, we strive to learn from each other e.g. by identifying and sharing best practice examples/approaches.

Definition of Personalised Medicine

Personalised Medicine is all about giving the most appropriate treatment and care to the individual at the right time, therefore targeting therapies and interventions more effectively. It covers not just the development of new therapies or drugs. It is also about prevention and better prevention strategies.

For the definition of the term “Personalised Medicine” ICPeMed uses the definition of PM given in the European Council Conclusion on PM for patients (2015/C 421/03)² stating “[...] that it is widely understood that personalised medicine refers to a medical model using characterisation of individuals’ phenotypes and genotypes (e.g. molecular profiling, medical imaging, lifestyle data) for tailoring the right therapeutic strategy for the right person at the right time, and/or to determine the predisposition to disease and/or to deliver timely and targeted prevention.”

ICPeMed considers associated issues, such as the question of processing the enormous amount of data, in particular genetic data, including reflections about interoperability of health records, data management and privacy, which throw up a whole set of ethical issues as key to a successful implementation of PM. PM implies the involvement of health economies to be able to access the economic viability of new therapies and prevention strategies, and raises the question about how to train health professionals.

Nowadays, PM is recognised as a new way of delivering health care and ICPeMed wants to pave the way for all citizens of Europe and beyond to benefit from this approach.

2. Development and publication of the ICPeMed Action Plan

ICPeMed started in November 2016. Its first task was the identification of priority areas that were ready for action and needed an improvement in prevention in PM across Europe and elsewhere. 30 actionable research and support activities in all areas related to PM were brought together in the **ICPeMed Action Plan**.

The basis for the Action Plan was the SRIA, published by PerMed in 2015, and the roadmap developed in 2016 by the five challenge groups, covering the whole value chain as recommended by PerMed. The resulting Action Plan represents a discrete set of activities, which will form the basis of the work programme for ICPeMed member organisations and the European Commission over the next two years, and which should be directly converted to funded research programmes on regional, national, European or/and even international levels.

² [http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52015XG1217\(01\)&from=EN](http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52015XG1217(01)&from=EN)

3. Actions towards the implementation of the ICPeMed Action Plan

The Action Plan represents a working document. By the different means described in this section, ICPeMed members seek to implement these actions.

ICPeMed mapping database - funding for research in Personalised Medicine

ICPeMed aims to set up an inventory of European and national (regional where appropriate) activities in PM: programmes, funded research projects, infrastructures, published policies and guidelines, education and training-related initiatives, etc. as well as significant advances in research and implementation of PM on an international level. This mapping of PM actions in the different countries allows the monitoring of progress of ICPeMed towards the objectives of the Action Plan and may serve e.g. to identify crucial research funding topics which can be addressed on national or transnational level.

Funding organisations and ministries involved in ICPeMed agreed to share results, data and information about activities in PM in their region and/or country. This information will be assembled and presented in a database on the ICPeMed website. The database will be maintained and updated during the whole timeframe of the ICPeMed Secretariat.

The major input for the database derives from surveys developed within the consortium. The first survey on regional/national activities on the programme level for funding of research in PM was launched at the end of March 2017.

ICPeMed members provided available information about funding activities and described their different regional/national funding schemes and general funding information. With this information, the ICPeMed database will give an overview of the actions in the field of PM performed in the ICPeMed member states. This includes not only programmes that are ongoing but also those that have already been

completed, as well as others that will start in the near future. The database may assist users working in the field of PM in finding suitable funding opportunities, and information about potential funders in the respective region and/or country. For ICPeMed, the analysis of the collected information about activities in PM will feed into the development of reflection papers, research policies, strategies and guidelines. As the first survey is closely linked to the research and research-supporting activities defined in the Action Plan the database reflects the progress of the ICPeMed consortium towards the objectives and implementation of the work plan.

The main target groups for the database are funders and researchers, but the database is also open for patient organizations, the general (informed) public and anyone interested in the subject. The database will be online in 2018, and users can get access after simple registration. Only data marked as “non-confidential” by ICPeMed members are available to the public user.

So far, 29 organisations from 2 regions and 21 countries, have participated in the first ICPeMed survey. In total, out of 80 programmes that have been identified:

- 34 programmes are dedicated to funding of research projects in PM. Five programmes are international in character, including two European Research Area Networks (ERACoSysMed³ and E-RARE⁴). 30 programmes were still running in 2017, 4 had already been closed.
- 37 programmes are not specifically dedicated to PM but allow funding of research projects in this field; these include five European Research Area Networks (Neuron⁵, ERA HDHL⁶, JPND⁷, ERA CVD⁸ and EuroNanoMedIII⁹). 33 programmes were still been running in 2017, four had already been closed.

³ <https://www.eracosysmed.eu/>

⁴ www.erare.eu

⁵ <http://www.neuron-eranet.eu/>

⁶ <http://www.healthydietforhealthylife.eu/index.php/era-net>

⁷ <http://www.neurodegenerationresearch.eu/>

⁸ <http://www.era-cvd.eu/>

⁹ <http://www.euronanomed.net/>

- 9 programmes dedicated for funding of research projects in PM were under preparation in 2017, including 2 international programmes (one European Research Area Network: ERA PerMed).

In addition, seven non-research programmes related to PM have been identified, as well as around 20 programmes allowing the funding of young scientists in this field.

To report on the implementation of the Action Plan, ICPeMed will analyse to what extent the different programmes cover the topics of the Action Items. This is essential to identify those aspects, which have not yet been considered.

ERA PerMed

ERA PerMed - SC1-HCO-03-2017: Towards the implementation of the Action Plan and the SRIA on Personalised Medicine Overview of ICPeMed

ERA PerMed¹⁰ (2017-2022) is a new ERA-Net Cofund, supported by 31 partners from 22 countries and co-funded by the European Commission under the Horizon 2020 Work Programme 2016-2017.

ERA PerMed was launched in December 2017. The ERA-Net Cofund is closely linked to ICPeMed and aims to implement topics identified in the SRIA of PerMed and the ICPeMed Action Plan, by joint funding activities, but also via exchange with patient organisations, other European stakeholders and initiatives. The main focus of ERA PerMed is to conduct up to four joint transnational calls (JTCs) to fund multidisciplinary transnational research projects covering different aspects of the value chain regarding PM.

Of the 31 partners (funding agencies and ministries) involved in ERA PerMed, 30 are located in ICPeMed partner/observer regions/countries (21 countries in total: Austria, Canada, Croatia, Denmark, Estonia, Finland, France, Germany, Hungary, Ireland, Israel, Italy, Luxemburg, The Netherlands, Norway, Poland, Romania, Slovenia, Spain, Sweden and Turkey). Two

partners come from countries (Belgium, Latvia) not yet involved in ICPeMed. Seven countries participating in ICPeMed are not present in ERA PerMed (Republic of Croatia, Cyprus, Czech Republic, Portugal, Republic of Moldova, Switzerland and the United Kingdom). The ERA PerMed consortium will be open to enlargement for the planned JTCs.

To align national research strategies, promote excellence, reinforce the competitiveness of European players in PM, and to enhance the European collaboration with non-EU countries, 31 funding organisations agreed to launch the first JTC for collaborative innovative research projects in PM on 9th of February 2018. This EC co-funded call on **“Research Projects on Personalised Medicine – Smart Combination of Pre-Clinical and Clinical Research with Data and ICT¹¹ Solutions”** has an available budget of approx. 27 Mio. €. The call will mainly cover topics from challenges two (Integrating Big Data and ICT Solutions) and three (Translating Basic to Clinical Research and Beyond) of the PerMed SRIA, and aspects of twelve Action Items from the ICPeMed Action Plan: A1-A4, A6-A9, A11-A13 and A15. The overall aim of the call is to fund projects showing clinical feasibility of PM in complex diseases (including multifactorial, monogenic and other diseases) by combining pre-clinical and/or clinical research with bio-informatics components to enable data quality on the one hand, and the potential applicability for health care providers on the other.

A detailed analysis of the topics of projects funded within this first ERA PerMed call will be available at the end of 2018. Even at this stage, the high value of ERA PerMed for the successful implementation of the Action Plan on the European (and international) level is evident and an important step toward the alignment of joint international efforts in research project funding and activities in PM.

¹⁰ <http://www.erapermed.eu/>

¹¹ Information and Communication Technology (Technologies)

4. Communication of ICPeMed – External view and establishment as initiative

At its start in November 2016, ICPeMed developed a dissemination plan, coordinated by the ICPeMed Secretariat, specifically tailored to the different target groups. This was in order to promote the initiative in a broad way, by presenting ICPeMed and its aims, as well as current activities. The dissemination of information, reports and articles occurs via the generic communication channels such as the ICPeMed website, newsletters and mailings supported by the ICPeMed Secretariat, but also by ICPeMed members on a regional/national level.

Since its establishment in January 2017, the website¹² has acted as the central tool for the communication and presentation of ICPeMed itself, but also for the dissemination of newsletters (flyers), press releases, announcements, etc. It also includes information about ICPeMed (news, definition of PM, ICPeMed objectives, governance, members, and secretariat), ICPeMed activities (Action Plan, Events, ICPeMed Award) and services (newsletter, publications, Partnering Tool, ERA-NET / funding opportunities).

The fact that ICPeMed, as an initiative with its website, and as a tool for communication and dissemination of actions, has been integrated successfully within the European as well as the worldwide PM environment, can be demonstrated by:

I. The numbers of visitors to the website and of downloads. Both can be correlated to activities on the ICPeMed webpage, e.g. the publication of the Action Plan in March 2017 (see also Figure 1);

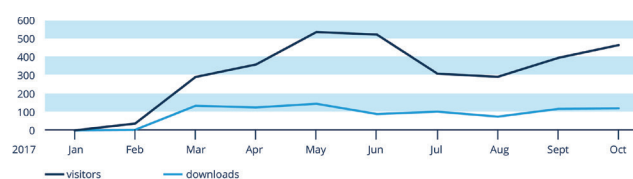


Figure 1: Number of visitors (simple page view; in red) and downloads (in blue) on the ICPeMed website.

II. The origin of users connecting to the ICPeMed webpage (see also Figure 2).

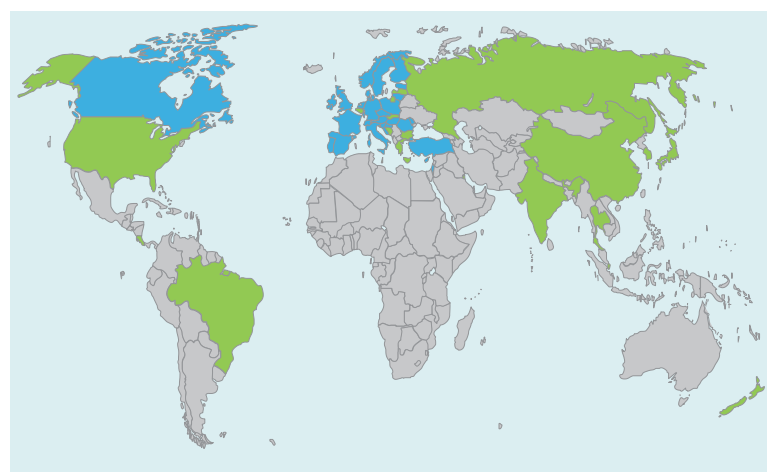


Figure 2: Access to the ICPeMed website by users from countries represented in the consortium (blue) and others (green). [Only those countries representing at least 0.01% of the total amount of users counted are highlighted.]

Visitors came from around 96 countries worldwide (Africa, Asia, Australia, China, Europe, North and South America). While the majority of users are located in countries involved in ICPeMed (such as Germany, UK, Italy, France, Belgium and Spain), a high interest was also demonstrated by other countries, e.g. The United States (see also Figure 3).

While about 71% of users have been interested in ICPeMed as an initiative (including e.g. the description of ICPeMed and its organisation in general), 25% connected to the website to obtain information about ongoing activities and outcomes of ICPeMed, such as the Partnering tool, news/newsletter, ICPeMed events as the ICPeMed conference in 2018 and the publications of the Action Plan. Furthermore, 4% of users have been interested in the ERA Net/Funding.

¹² www.icpermed.eu

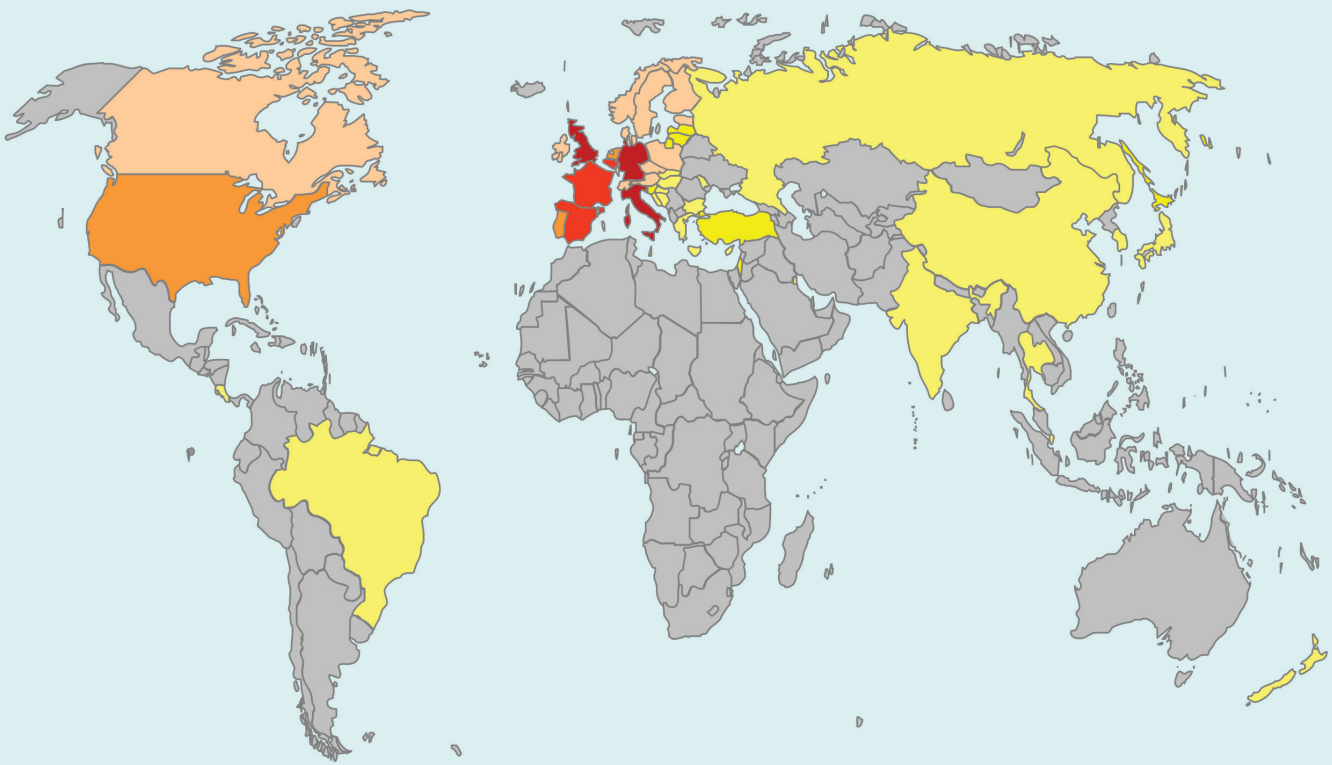


Figure 3: Comparison of visits per country on the ICPeMed webpage (Colours are describing the ratio of visits/country to the total number of visits: dark red: 9-10%; red: 8-9%; orange: 4-8%; light orange: 1-4% and yellow: 0.01-1%)

89% of downloads concerned activities directly related to ICPeMed, such as the ICPeMed Action Plan (73%) and the workshop in 2017 (11%). 11% of the total download counts have been related to PerMeds SRIA.

In October 2017, 59 people subscribed to the ICPeMed Newsletter via the link available on the ICPeMed website. Furthermore, the newsletter is sent to all ICPeMed partners, stakeholders and experts participating in the different working groups. New interested users might be also attracted via the ICPeMed partnering tool, giving the option to subscribe to the newsletter during registration.

ICPeMed – Partnering Tool

ICPeMed will launch its Partnering Tool in November 2017. The tool aims to facilitate networking among universities, research and patient organizations, SMEs, industry and all other stakeholders interested in PM. The ICPeMed Partnering Tool allows the user to search for potential partners and to present their own expertise to the PM research community. The tool might thereby assist in the development of new collaborations, e.g. future calls for proposals.

Stakeholder engagement

The full ICPeMed membership is restricted to ministries, public and private ‘not-for-profit’ health research funding and policy organisations. However, many other stakeholders have a strong interest in PM, e.g. research institutions, patient

initiatives, health care and regulatory organisations, related projects or industry organisations. ICPeMed seeks the engagement and exchange with various sets of stakeholders, from basic research to health care systems and is currently developing a stakeholder engagement plan, describing possible interactions in a more detailed way. This stakeholder engagement plan will support these aims and outline definitions, rules and activities concerning the engagement with ICPeMed stakeholders. It will help to define whether collaboration is expected on an organizational level or/and on an individual expert level.

In general, the exchange with the stakeholder group aims to contribute to the further development and refinement of the ICPeMed strategy, the strategic prioritisation of research actions, and the implementation of the Action Plan. It further contributes to the improvement of the coordination of activities on the regional, national, European and international level, as well as the education and training, and the dissemination of knowledge and research results.

Members of the stakeholder group are informed about ICPeMed activities and invited to ICPeMed workshops and conferences. Experts and stakeholders are also invited to Executive Committee meetings for information and discussion of certain topics. So far, upon request, ICPeMed has been presented at different conferences/meetings of other initiatives, institutions and projects, and represented by members of the ICPeMed Steering Board, the Secretariat or the Executive Committee.

During the first year of ICPeMed, contacts with other initiatives were established via three main channels:

Table 1: Invited “external speakers” to ICPeMed Executive Committee Meetings

Type of Meeting	Organisation/Project/ Initiative	Representative
ICPeMed Executive Committee Meeting, Lisbon, October 24 th -25 th , 2017	U-PGx	Prof. Henk-Jan Guchelaar, Scientific Coordinator U-PGx, Netherlands
	TO-REACH	Dr. Stefano Vella, Project Coordinator TO-REACH
ICPeMed Executive Committee Meeting, Copenhagen, April 4 th -5 th , 2017	European Medicines Agency (EMA)	Dr. Marisa Papaluca, Senior Scientific Advisor at European Medicines Agency at European Medicines Agency, London, UK
	Innovative Medicines Initiatives (IMI)	Nathalie Seigneuret, Senior Scientific Project Manager at Innovative Medicines Initiative, Belgium
Executive Committee Meeting, Brussels, November 15 th , 2016	EATRIS	Dr. Anton Ussi, Director Operations and Finance, EATRIS

- Invitations to “external speakers” to ExCom Meetings for presentations and discussion (see also table 1);
- Participation and presentation of ICPeMed by members at meetings/seminars/conferences;
- Invitations of representatives from other initiatives to ICPeMed events (e.g. the ICPeMed Workshop).

ICPeMed participated in and was presented at 12 meetings/ seminars/ conferences between the start of the initiative in November 2016 and October 2017. The chair, the vice-chairs, different members of the Secretariat and Steering board individually represented ICPeMed.

5. ICPeMed events/activities in 2017

Besides internal meetings (such as telephone conferences or actual meetings of the different working groups and governance bodies), ICPeMed organises public events as conferences and workshops.

ICPeMed internal working meetings

The first official internal meeting of ICPeMed took place on November 15, 2016 in Brussels. In addition, the ICPeMed Executive Committee met three times in 2017:

- 4-5 April 2017 in Copenhagen, Denmark;
- 27 June 2017 in Milan, Italy;
- 24-25 October 2017 in Lisbon, Portugal.

The Executive Committee, including the representatives nominated by member organisations, is at the very centre of the structure of ICPeMed, and the main decision-making body. In 2017, the Executive Committee refined its strategy towards the implementation of the Action Plan. Each partner identified Action Items of high interest for the respective organisation and country. Working groups around the Action Plan and the Action Items have been formed and a

procedure for reporting on activities and advancements in the respective topics will be developed. The first outcomes of this work are expected in 2018.

ICPerMed events

According to the ICPerMed event concept, two larger conferences (Berlin and Paris) will be organised within the four-year time frame of the ICPerMed Secretariat. Two slightly smaller, thematically focused workshops (Milan and Madrid) will also take place.

The first ICPerMed workshop 2017 on “Innovative Concepts on Data Generation and use for Personalised Medicine Research” took place on June 26-27th 2017 in Milan. In five parallel sessions, experts and funders from different fields of PM discussed and developed solutions for the following topics:

- Primary Prevention;
- Disease reclassification;
- Impact of data in research;
- Successful PM approaches;
- New tools impact.

A set of recommendations was developed as a result of the workshop:

- **The need to develop European infrastructures** (changing from regional/national to global strategies);
- **Development of training for all stakeholders;**
- **Shared policies and data protection across Europe;**
- **Standardisation and harmonisation** (of data production, from the patient to the final database and its utilisation).

The outcomes of the first ICPerMed workshop are published in a Workshop Report¹³ on the ICPerMed webpage and will be integrated in future recommendations, guidelines and vision papers.

ICPerMed award 2018

On January 19th 2018, ICPerMed will launch its „Best Practice in Personalised Medicine“ Award 2018. The award aims to recognise, encourage, promote and disseminate outstanding examples of Best Practices in PM and addresses those applicants that published scientific papers and/or developed Best Practice strategies in the field of PM between January 1st, 2016 and December 31st, 2017. For this award, only applicants from ICPerMed partner countries were eligible to apply.

The awardees will be invited to the ICPerMed Conference in November 2018 in Berlin and will be given the opportunity to present their work during a plenary session. The successful candidates will receive a non-cash award of 500 € to support the dissemination of their work. In addition, the outcomes of the award and the awardees will be presented in an article within the EPMA Journal (journal of predictive, preventive and personalized medicine).

A maximum number of three awards will be selected. Proposals will be evaluated in a one-stage process by the ICPerMed Steering Board, supported in the scientific evaluation by researchers experienced in the topic, with final approval by the ICPerMed Executive Committee.

The award aims to strengthen the contact between ICPerMed and the PM community and to improve overall knowledge about ongoing activities.

¹³ https://www.icpermed.eu/media/content/ICPerMed_Workshop-Report_Milan-June2017.pdf

Outlook

In the next year, ICPeMed will deepen its efforts in the implementation of the ICPeMed Action Plan and the exchange with the PM community by enlarging its connections to other stakeholders and initiatives (including e.g. the exchange with new Coordination and Support Actions, flagship Canada and others).

One major step forward to achieving this goal is the first **ICPeMed Conference 2018 on “Personalised Medicine in Action”** that will take place on 20-21 November in Berlin, Germany. The focus of this conference is to present Best Practice examples of successful implementation of PM approaches from ICPeMed member countries. The examples will be presented in two different types of session:

1. Best Practice in “Research and Implementation”:

In these sessions, successful examples for translation of PM research into an added value for the patient will be presented, including representatives of all relevant steps (e.g. researchers, clinicians, funders, patients) to describe their respective views and experiences.

2. Best Practice in “Policy Making”:

These sessions will encompass presentations on best practice examples for policy making and impact analysis on PM research.

These sessions will be complemented by high-level keynote talks addressing different aspects of PM.

In addition, the ICPeMed Executive Committee will meet twice in 2018: On 19-20th of April in Vienna, Austria, and prior to the ICPeMed Conference in Berlin on 19-20th of November.

ICPeMed “Vision Paper 2030”

ICPeMed is currently preparing its “Vision Paper 2030” on how PM approaches can pave the way to the development of “The Next Generation of Medicine”, expected to be published in 2019. The ICPeMed Conference 2018 with the Best Practice examples presented, and the exchange with participating experts via a web-based survey, will provide a significant input for the document.

Implementation of the Action Plan

To report on the implementation of the Action Plan, ICPeMed will analyse the information gathered by the first ICPeMed survey, e.g. regarding the coverage of topics from the 30 Action Items in the identified funding programmes. This analysis will serve to identify particularly those aspects that are not yet considered in funding activities.

Data currently included in the database will be updated and extended by ICPeMed partners.

ICPeMed is looking forward to the coming year and to further expanding its internationalisation by networking with other initiatives/stakeholders and other key players in PM, as well as the exchange and interaction with the PM research community (on the European level but also worldwide, if applicable).

Notes



Notes



