

# RECOVER Closing Conference

## Coordination of European COVID-19 Adaptive Platform Trials - TCB

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Esplanade Hotel, Zagreb, Croatia



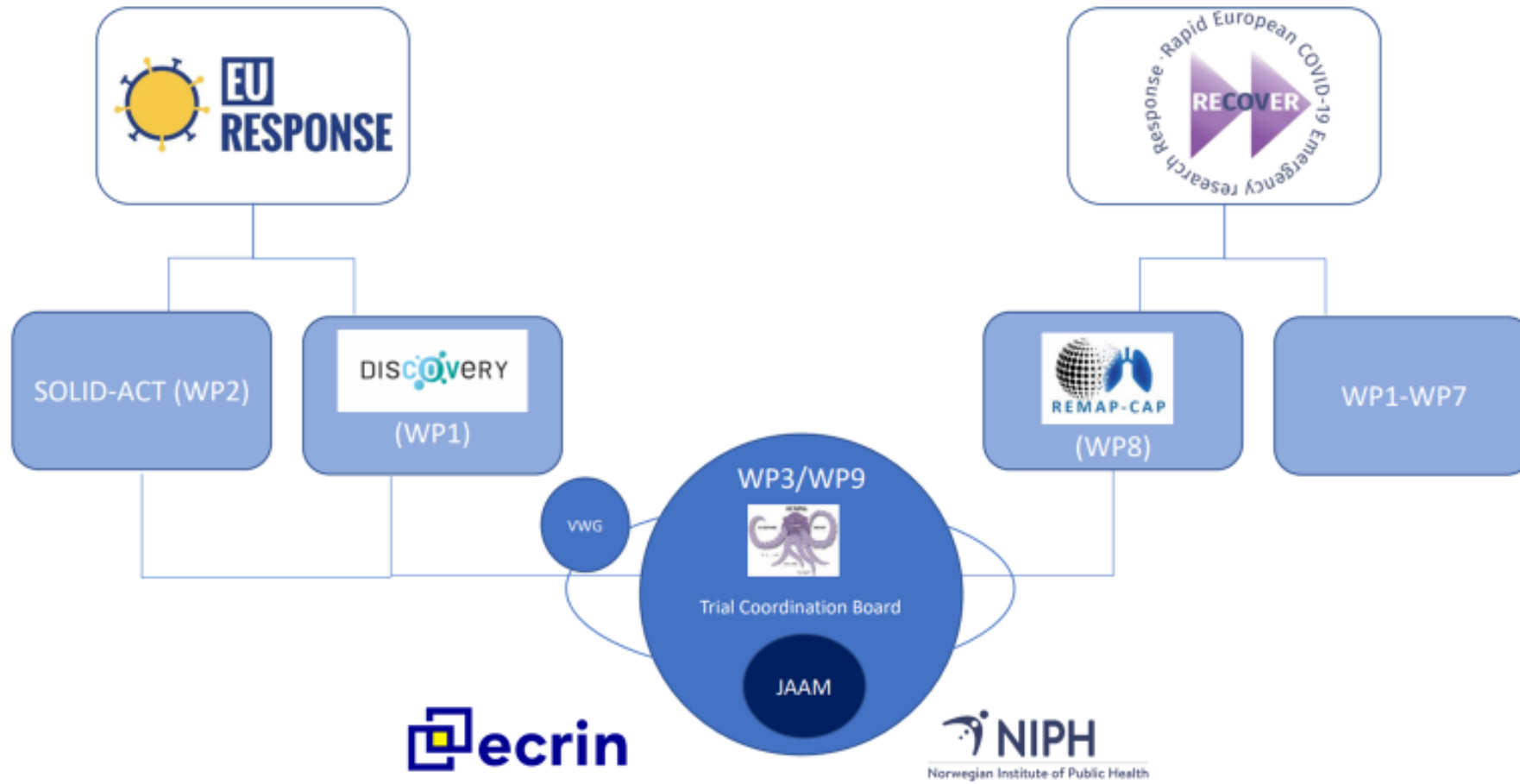
*This project has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No 101003589.*

# Background

- During the initial phases of the COVID-19 pandemic there were discussions on how Europe best could respond through multi-country clinical trials, including how to collaborate with the WHO facilitated Solidarity trial
- RECOVER and later EU RESPONSE received funding from the Horizon 2020 research programme to support COVID-19 clinical trials
- Both projects developed Adaptive Platform Trials with European REMAP-CAP and the establishment of EU-RESPONSE with Discovery (European Solidarity sister trial) and the EU Solid-Act trial
- The European Commission (RTD) requested a bridge between Adaptive Platform Trials in Europe to promote complementarity and avoid duplication and fragmentation
- An innovative “shared WP” between RECOVER and EU-RESPONSE was created
- This shared WP became responsible for coordination through three mechanisms: the Trial Coordination Board (TCB), the Joint Access and Advisory Mechanism (JAAM) and the platform trial Toolbox



# Governance

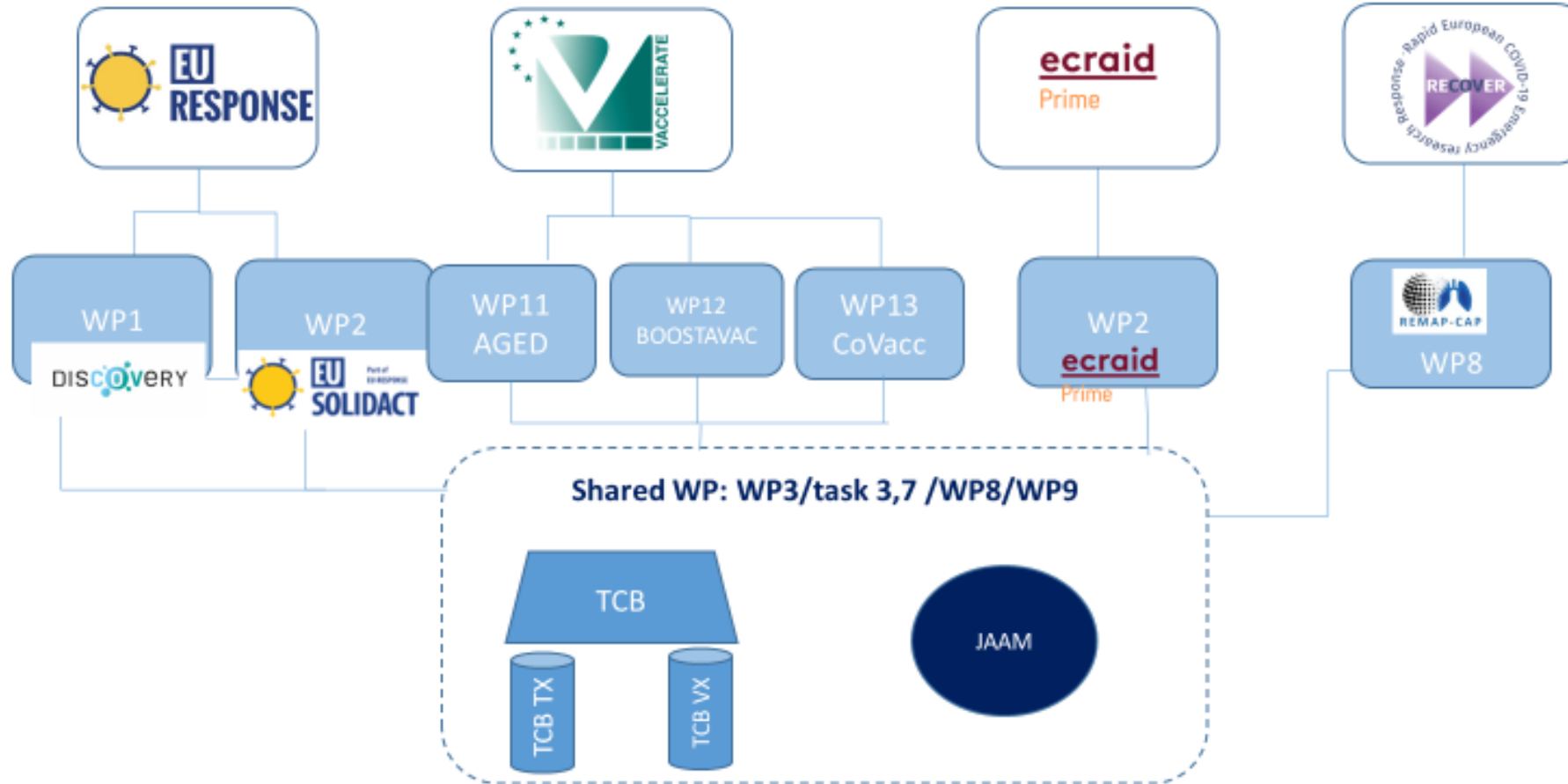


# Governance

- Request by the Commission to integrate two other EU-funded projects in the TCB; VACCELERATE and ECRAID-Prime (and ECRAID-Prime in JAAM)
- ECRAID-Prime to conduct early phase studies on new compounds- has expanded to syndromic research
- VACCELERATE includes three pan-European vaccine trials and an extended network
- A separate TCB Vx pillar was created for dialogue with vaccine investigators and stakeholders
- Joint TCB meetings are held when topics are of overarching relevance
- Plans for mandate and the benefits of dialogue to outlast Covid-19 pandemic
- The TCB secretariat at NIPH has become a beneficiary also in the MPX-RESPONSE project



# Governance


















# Objectives

- RECOVER and EU RESPONSE will deliver a comprehensive strategy for delivering adaptive platform trials
- The coordination mechanism led by ECRIN and NIPH, will ensure that the European COVID-19 Adaptive Platform Trials are scalable and sustainable.
- The coordination mechanism will establish a dialogue with external stakeholders including the WHO, ECDC, European Medicines Agency (EMA), the HTAs (EUnetHTA), and the national competent authorities (CTFG), etc.
- The bridge between the clinical trial projects will guarantee complementarity, harmonization and synergies with other European and international projects, and will avoid fragmentation and redundancies.
- The momentum created by the Covid- 19 pandemic promoted transition in the research landscape by enforcing collaboration and harmonization through coordination

# Methods – composition, structure of dialogue

CORE TCB		
NIPH		<b>John-Arne Røttingen (chair)</b>
NIPH		Victoria C. Simensen
NIPH		Øyvind Melien
ECRIN		<b>Jacques Demotes (co-chair)</b>
ECRIN		Paula Garcia, Sareema Javaid
EU Commission (obs)		Evelyn Depoortere, Stefanie Sowinski
EU Commission HERA		Ulla Narhi, Corinna Hartung
RECOVER		Herman Goossens
EU RESPONSE	 	Yazdan Yazdanpanah
ECRAID-Prime		Chris Butler
VACCELERATE	 	Oliver Cornely
MPX- RESPONSE		Yazdan Yazdanpanah

# Methods – composition, structure of dialogue

TCB Tx PILLAR/ INVESTIGATORS		
EU FUNDED PARTNERS		
Discovery/SolidAct	 <b>Inserm</b>	Dominique Costagliola
SolidAct		Marius Trøseid, Inge C. Olsen
REMAP-CAP		M.J.M. Bonten
REMAP-CAP		Lennie Derde
ECRAID-PRIME		Chris Butler
EUROPEAN AND GLOBAL PARTNERS		
Recovery	 	Peter Horby
Principle	 	Chris Butler
PANORAMIC		Paul Little
AMMURAVID→MANTICO-2		Evelina Tacconelli
ACTIV-3, TICO→STRIVE	 	Jens Lundgren
ANTICOV (DnDI)		Nathalie Strub-Wourgaft



# Methods – composition, structure of dialogue

TCB Vx PILLAR/INVESTIGATORS		
EU (FUNDED) PARTNERS		
EU-COVAT-1_AGED		Oliver Cornely
EU-COVAT-2 BOOSTAVAC		Patrick Mallon
EU-COVPT-1 COVACC		Patricia Bruijning-Verhagen
EUROPEAN and GLOBAL PARTNERS		
COMCOV, COMCOV-2		Mahesi Ramasay
COMCOV-3		
COV-BOOST		Saul Faust
COVERALL		
MVA-SARS2-ST		Marylyn de Addo
COVIMMUNAGE		Elisabeth Botelho-Nevers
CAR-CF		
Recovac		Jan-Stephan Sanders
MonkeyVax		Liem binh Luong

# Methods – Composition, structure of dialogue

EXTENDED TCB		
<b>POLICYMAKERS</b>		
WHO HQ (Science Division)		Vasee Morthy
ECDC		Howard Needham
CEPI		Bola Jones/Jakob Cramer/Christof Vinnemeier
Therapeutics Accelerator (Wellcome/Gates)		Nick Cammack
<b>REGULATORS / ETHICS REPRESENTATIVES</b>		
EUnethTA		Claudia Wild
EMA		Marco Cavaleri
CTFG		Ann Marie Janson Lang
EUREC		Jacob Hølen/Elin Westerheim
<b>INDUSTRY</b>		
EFPIA/VACCINES EUROPE		Magda Chlebus
<b>OTHER INITIATIVES</b>		
Trial Forge		Shaun Treewek
EU Pearl		Cecile Spiertz

# Methods – dialogue, discussion and joint approaches



**Design:** how to create robust and harmonized CT protocols (the role of APTs)

**Conduct:** regulatory and ethical approvals. New systems for multicounty approvals

**Results:** effectiveness and safety data and implications for use of care

**Guidelines:** do the trial design and results meet requirements of the guideline makers

**Subpopulations:** pregnant women, paediatric and immunocompromised repurposed and new drugs

**Follow-up:** existing platforms for the study of “long-covid” and secondary outcomes (PROMS)

**Outpatient trials:** recruitment and infrastructure, combination treatments and syndromic research

**Standardization:** early data sharing. Collection and standardization of laboratory assessments

# Results and outcome



## Design



COVID-19 harmonizing severity scales, EMA EU Pearl- EU RESPONSE dialogue, MPX RESPONSE-collaboration

## Conduct



Safety signals shared early, VHP+ and CTIS Experiences- Challenges in and outside of an emergency context

## Results



Remdesivir metaanalysis inspiration  
Impact of antigen status when using immunomodulatory drugs

## Subpopulations



The need for outpatient trials- funding, resources, infrastructure



# Results and outcomes

- Dissemination of ideas, results and experiences
  - *accelerated research response to/in the crisis*
- Inform and promote synergetic initiatives in Europe (GloPiD-R, EU-Pearl, TrialForge, WHO Science Division, WHO working group on community engagement, EMA stakeholder working group); how can these initiatives be exploited by trial networks
  - *joint statements on the GloPiD-R roadmap and the WHA resolution on clinical trials*
- Established a continuous communication channel between the trial networks and the Commission (incl. RTD, SANTE, HERA)
  - *better exploitation of systems*
- The WHO wants to explore the feasibility of more global collaboration, can similar coordination efforts be of interest in other regions and for other diseases?

# Conclusions



- **Coordination as a tool and a goal**
- **Coordination may be the key** to success for the European clinical trials (notion of evidence is a global public good) -
- What is research success: needs-based, robust, effective and efficient, promotes sustainable exploitation of resources (harmonization), transferable and equitable in access and availability
- **Keys to coordination** are - evidence, stakeholders, trust – trust is built upon reliability, legitimacy, confidence
- The TCB is not us, it is all of you - the core component of the TCB meetings is the opportunity for exchange and discussions

# Impact



- The TCB has been a relevant and trusted forum during the Covid-19 pandemic
- Endorsed by investigators and stakeholders in the European research space
- Succeeded in lifting the notion that the research community is stronger together
- Inspired collaboration and new networks
- Can be further exploited as an instrument for communication and dialogue by the European Commission and HERA
  
- Could play a role in involving additional research networks and countries (e.g Eastern Europe) during crisis
- Facillitate for private-public partnerships

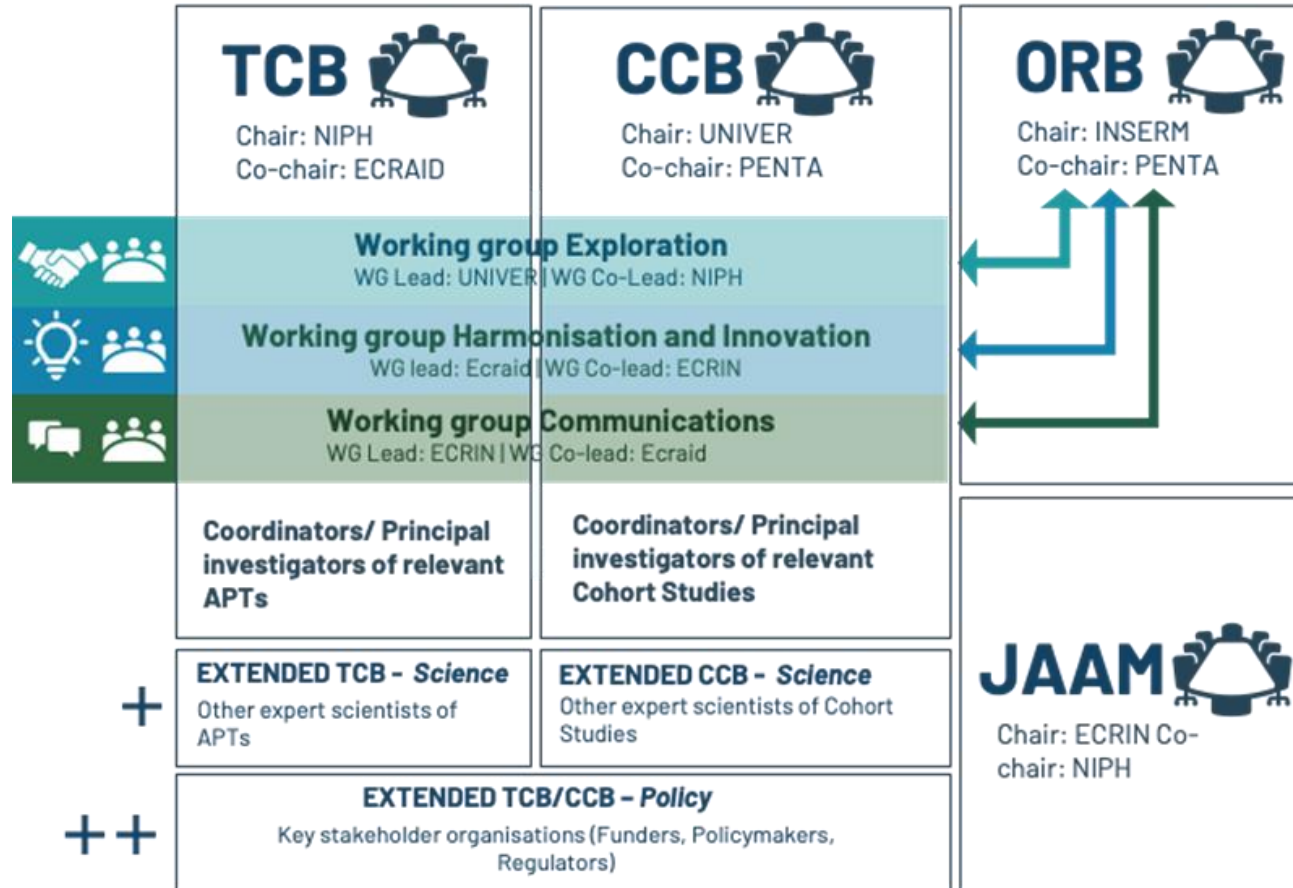


# Lessons learned and further recommendations

- Coordination is useful in a time of crisis (and in interpandemic times)
  - Coordination may be most constructive when prospective
  - Coordination effects are linked to funding and authority - need organized funding mechanisms to ensure timely response
  - Coordination is dependent on the willingness to be coordinated, “steering vs nudging”
  - Successful coordination should be maintained and sustained
- Further outlook: new funding, additional partners, expanded scope**
- **HORIZON-HLTH-2023-DISEASE-03-05: Pandemic preparedness and response: Sustaining established coordination mechanisms for European adaptive platform trials and/or for cohort networks**
  - Coordinator: NIPH, Partners: Ecrin, Ecraid, U Verona, Penta, Inserm, U Cologne
  - Link to other preparedness initiatives



# CoMeCT- Coordination Mechanism for Cohorts and Trials





# Deliverables

N°	Deliverable	Lead	Status
9.1	1- Reports on the coordinated development and operational management of the European COVID-19 Adaptive Platform Trial	ECRIN	Approved
9.2	1-Report on the strategic vision and deployment of the European COVID-19 Adaptive Platform Trials	NIPH	Approved
9.3	Strategic plan for partnership with stakeholders, also including other relevant initiatives and clinical trials beyond the EU	NIPH	Approved
9.4	2-Reports on the coordinated development and operational management of the European COVID-19 Adaptive Platform Trial	ECRIN	Approved
9.5	2-Report on the strategic vision and deployment of the European COVID-19 Adaptive Platform Trials	NIPH	Approved
9.6	Report on tools, methodologies and sustainability model for Adaptive Platform Trial design and management, including blueprint for the creation and management of Adaptive Platform Trials in other disease areas beyond COVID-19	ECRIN	Approved

N°	Milestone	Lead	Status
14	Composition and terms of references of the TCB	NIPH	Acheived
15	Composition and terms of references of the JAAM	ECRIN	Acheived
16	Meetings of the platform development strategy board	NIPH	Acheived
17	OCToPUs webpage activated	ECRIN	Acheived
18	Adaptive Platform Trial methodology workshop	ECRIN	Acheived

# Q&A

