

**IMI2 Call topic:
Establishing impact of RSV infection,
resultant disease and public health
approach to reducing the consequences**

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Human Respiratory Syncytical Virus (RSV)

- Ubiquitous pathogen, most common source of severe respiratory illness in infants and children; significant burden also in the elderly
- Infection can lead to episodes of bronchiolitis and pneumonia; estimated 3.4 million hospitalisations globally each season
- Early infection increases susceptibility to allergic asthma
- High economic burden

Challenges

- Poor understanding of the public health need associated to RSV
- Poor understanding of the burden of disease and costs associated
- Lack of well-articulated incentives to conduct research into the prevention of RSV infection
- Lack of clear predictability or classification of disease severity and long-term consequences

Addressing these challenges would result in better care for patients, reduced costs for healthcare systems, and aid in the development of treatments and vaccines

Scope of the project:

To produce a robust dataset that will increase our understanding of RSV infection and its clinical, economic and social impact and that will lead to better treatment and preventative options.

Expected key deliverables - general

- A multi-disciplinary, multi-stakeholder community with an in-depth comprehension of the burden of RSV on healthcare systems and societies
- An analysis of the costs associated with RSV infections (specific for important subgroups, i.e. infants, the elderly)
- Consensus of the need for action to prevent RSV
- Improved linkage between public health perspectives on management of RSV and incentives for R&D investment
- Leverage existing cohorts and epidemiology networks, or establish new ones, to explore biomarkers

Expected key deliverables – data and future research

- Robust sources of evidence to support future research into RSV:
 - A validated and consolidated review of literature and the evidence currently in the public domain
 - A database of currently available data incl data from surveillance studies, existing registries, etc
 - A framework for analysing and aggregating the burden of RSV (incl the short, medium and long term consequences and costs)
 - A prospectively accrued registry capturing the true incidence of RSV induced events (such as GP attendance, hospitalisations, bronchiolitis, wheeze and asthma)
 - A clear plan for communication of the burden of and priorities within RSV

- **Industry consortium:**

AstraZeneca (lead), Pfizer, GSK, Sanofi Pasteur, Janssen

- **Indicative duration:**

60 months

- **Indicative budget:**

EFPIA in-kind contribution: approx. EUR 14.5 m

IMI2 JU contribution: up to EUR 14.5 m

Suggested architecture (alternative designs welcome if convincing)

- WP1: Literature review on RSV and the current perceptions on burden of disease
- WP2: Consolidation of health care systems data
- WP3: Existing retrospective resource analysis
- WP4: Prospective data collection
- WP5: Presumed risk factors and biomarkers for RSV-related severe disease
- WP6: Management

Potential future vaccine topics

- Joint Influenza vaccine effectiveness surveillance
- Ebola+: Ebola and other filoviral haemorrhagic fevers



Thank you

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