

Innovative Medicines Initiative

Drug Disease Model Resources

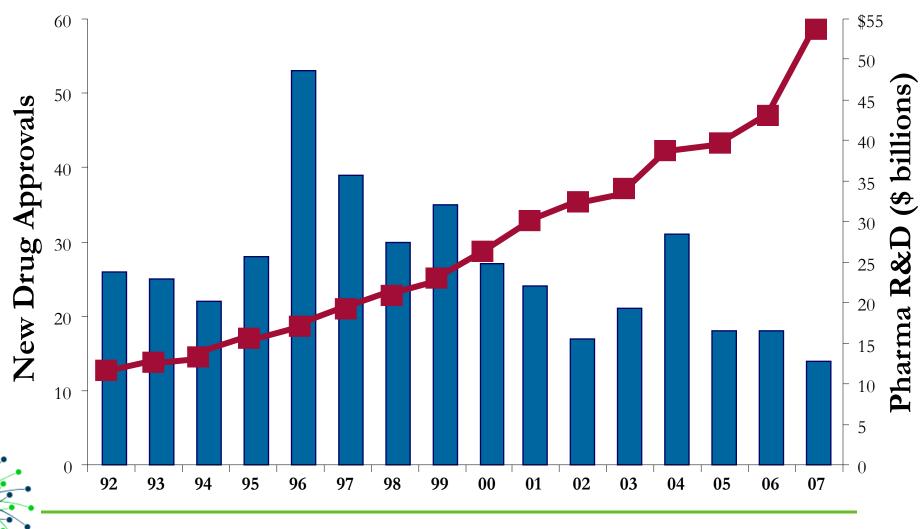
Dr Lutz Harnisch, MD, Pfizer, Sandwich, UK Coordinator











Source: Burrill & Company; US Food and Drug Administration.

How to improve R&D productivity?



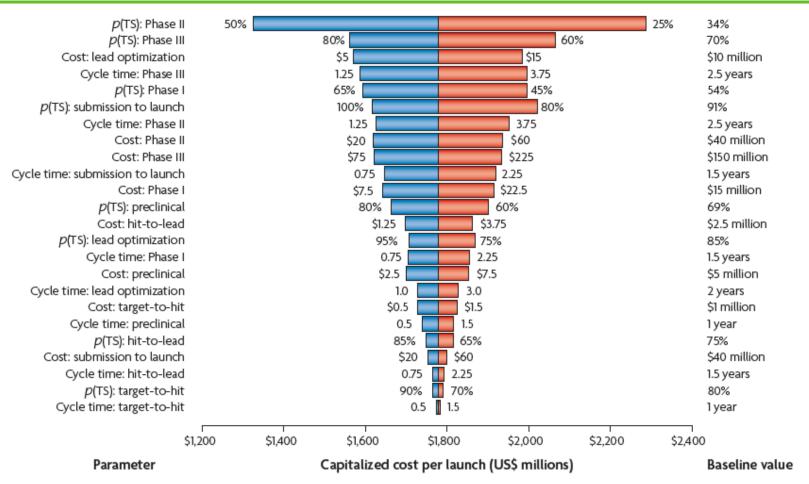


Fig.3: R&D productivity model: parametric sensitivity analysis. From Paul S, et.al., Nature Review, 2010(9)

How to improve R&D productivity?



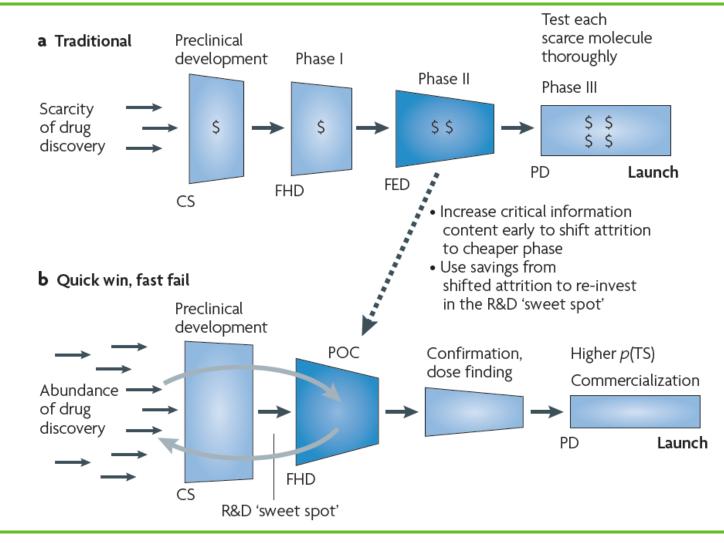
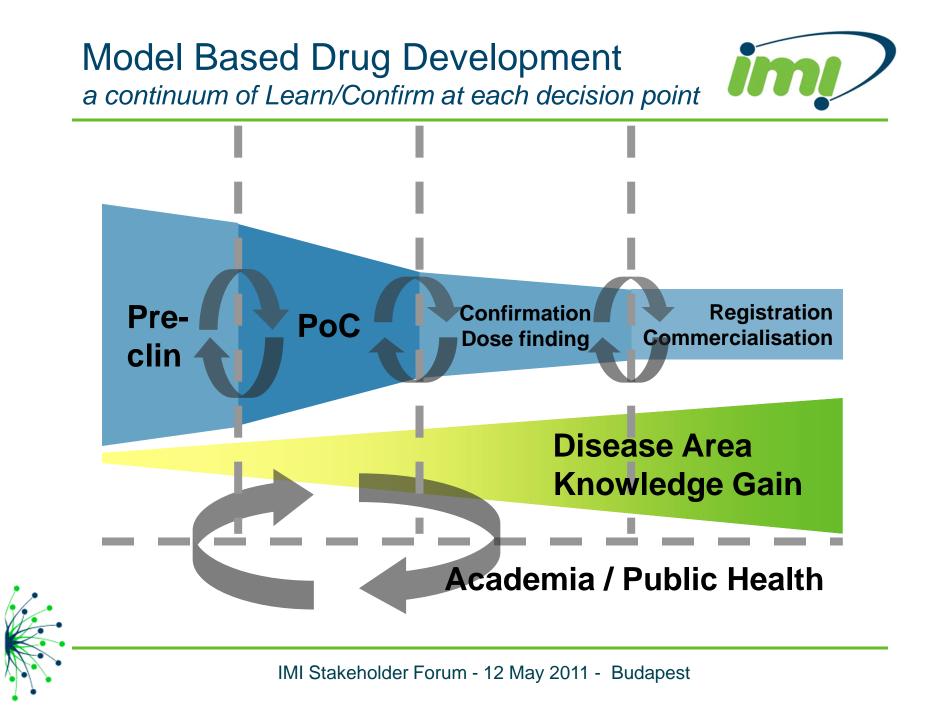


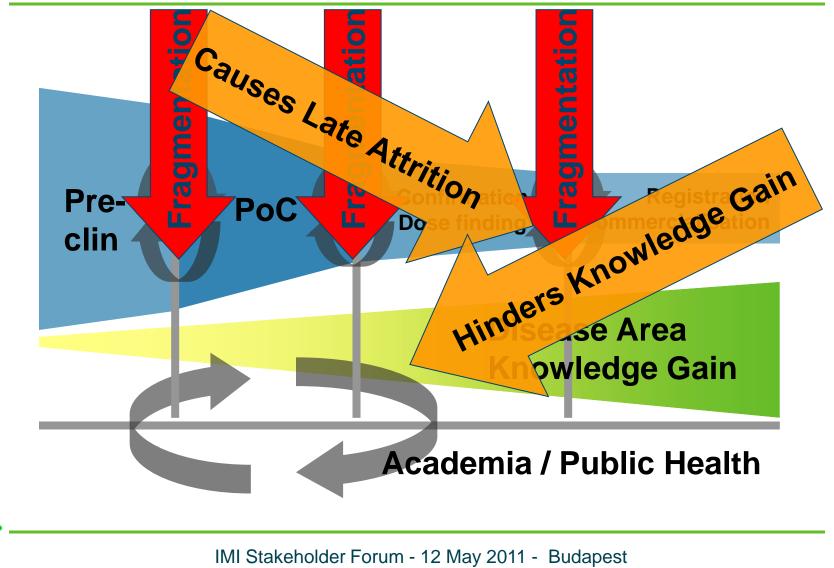
Fig 5: The quick win, fast fail drug development paradigm. From Paul S, et.al., Nature Review, 2010(9)



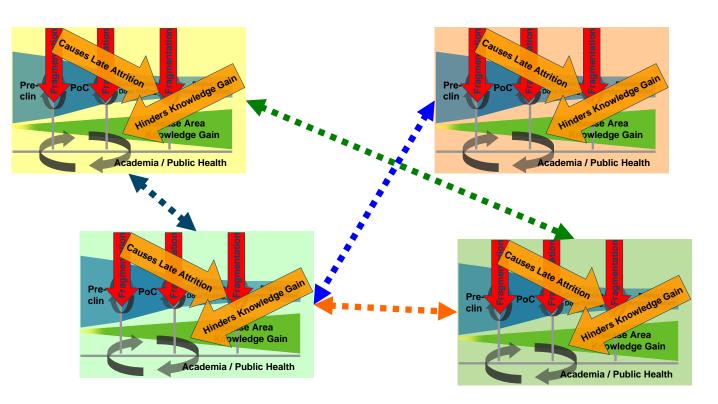
Model Based Drug Development

in reality fragmented and unsustainable





Across Industry pre-competitive exchange happens only occasionally



The economic problem of society ... to put it briefly, is a problem of the utilization of knowledge not given to anyone in its totality Friedrich von Hayek, 1960

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Preclin



If MBDD is accepted as a solution to attrition and efficiency loss of R&D an appropriate implementation of MBDD is a central factor in improving through-put, output, and ultimately benefit to patients, and the society as a whole

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The scientific and functional requirements for the KM Platform can be summarised as follows:

- Data federation: seamless search and navigation across heterogeneous data sources, both private and public;
- **Data integration**: the capacity to pool data from heterogeneous sources in a scientifically, semantically and mathematically consistent manner for further computation;
- Shared services: the development, sharing and integration of relevant and powerful data exploitation tools such as modelling and simulation.



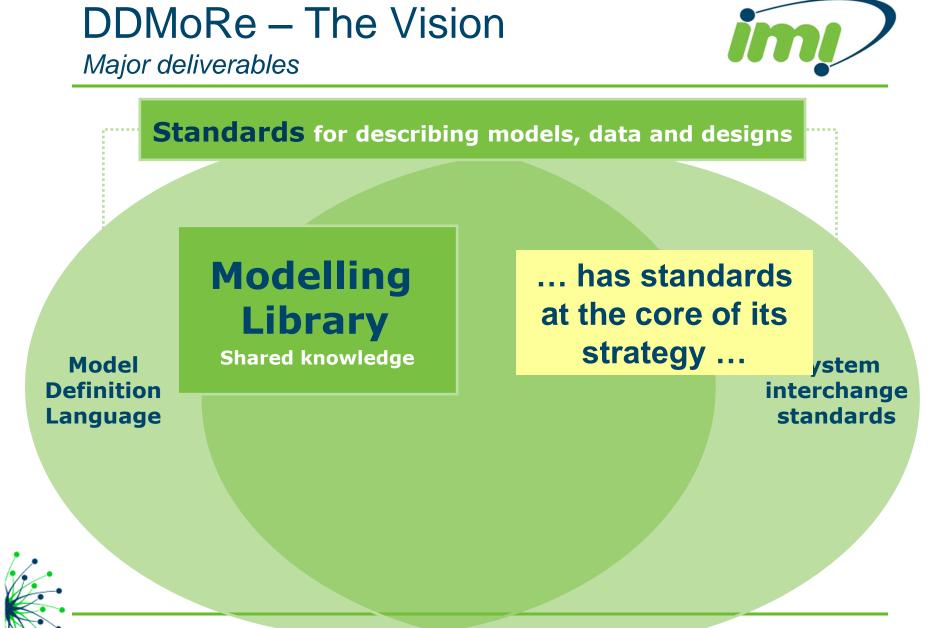
DDMoRe – The Vision Major deliverables



Modelling Library Shared knowledge

- Data contains raw information, which is difficult to share
 – IP, CDISC
- Models
 - represent an interpretation, understanding of the data (given experimental conditions)
 - allow to predict the future with uncertainty
 - are an intellectual container of the knowledge

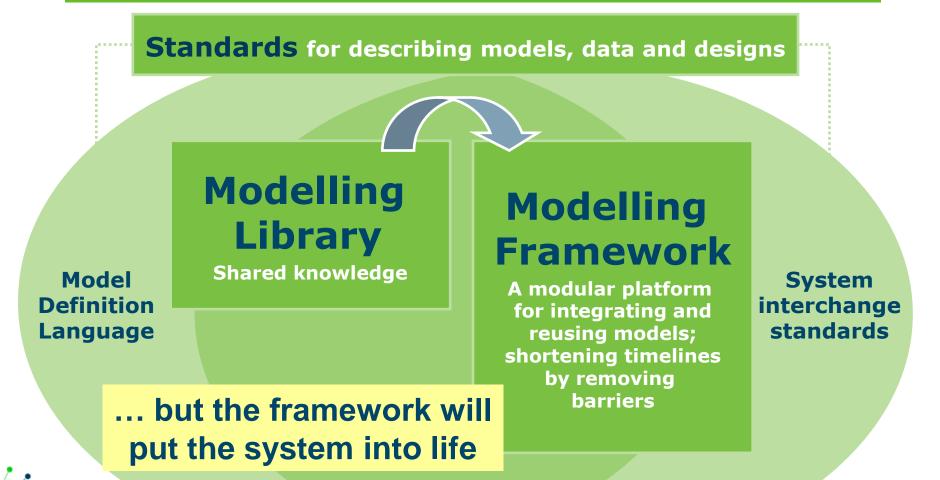




DDMoRe – The Vision

Major deliverables





DDMoRe – The Vision

Major deliverables



Standards for describing models, data and designs Modelling Modelling Library **Framework** Shared knowledge Model System A modular platform Definition interchange for integrating and standards Language reusing models; **Specific** shortening timelines by removing disease barriers models **Examples from** high priority areas

DDMoRe DA Prototypes: Oncology Tumour size – survival model



Dose **WiP** FU Disease/Patient-specific Cape Drug-specific Tumor size Phase II Phase III model p(TS) : pll Visit 1 tumor size Diseasespecific Survival p(TS) : plll Phase III ? model Survival time

Fig 1. Scheme for simulating a phase III study on the basis of phase II data of an investigational agent (here, capecitabine [Cape]) and historical phase III data of a reference drug (fluorouracil [FU]).

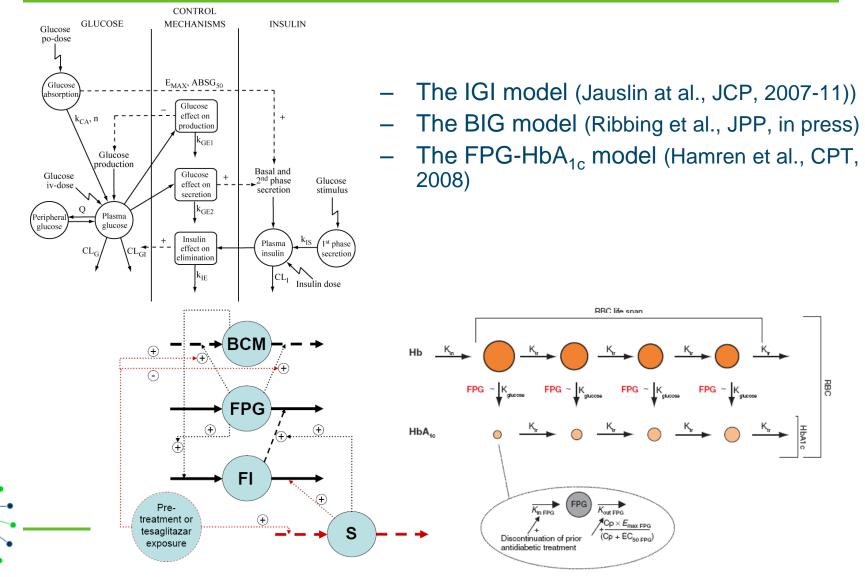


Claret L, Girard P, Hoff PM, Van Cutsem E, Zuideveld KP, Jorga K, Fagerberg J, Bruno R. J Clin Oncol. 2009; 27:4103-8.

DDMoRe DA Prototypes: Diabetes

a variety of models describe experimental and patient outcome data

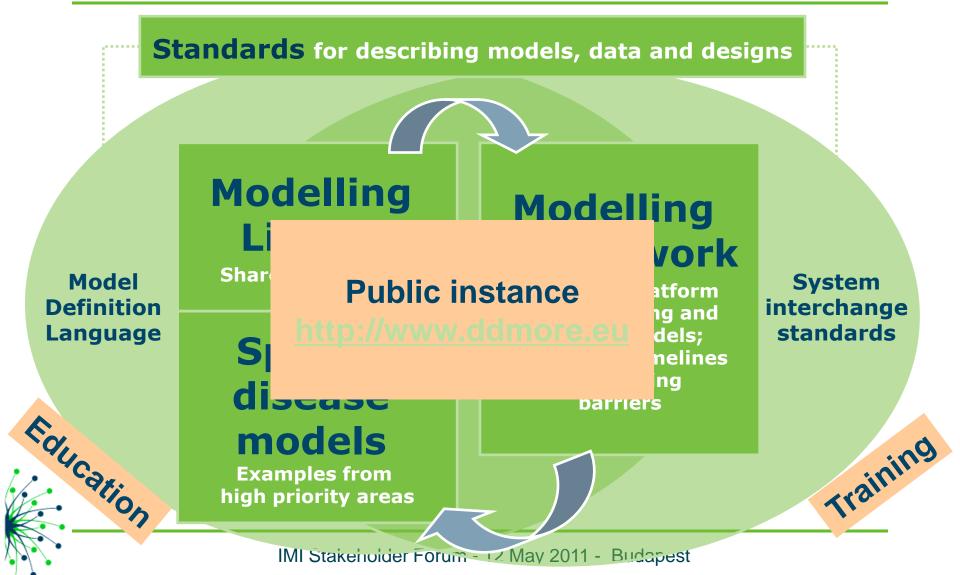




DDMoRe – The Vision

Major deliverables





Time and money



- Timing:
 - Starting Date:
 - Duration:

01/03/2011 60 months

- Financing:
 - IMI funding: € 9.615.058
 - Other contributions: € 1.729.833
 - EFPIA in kind contribution: €
 - Total Project Cost:

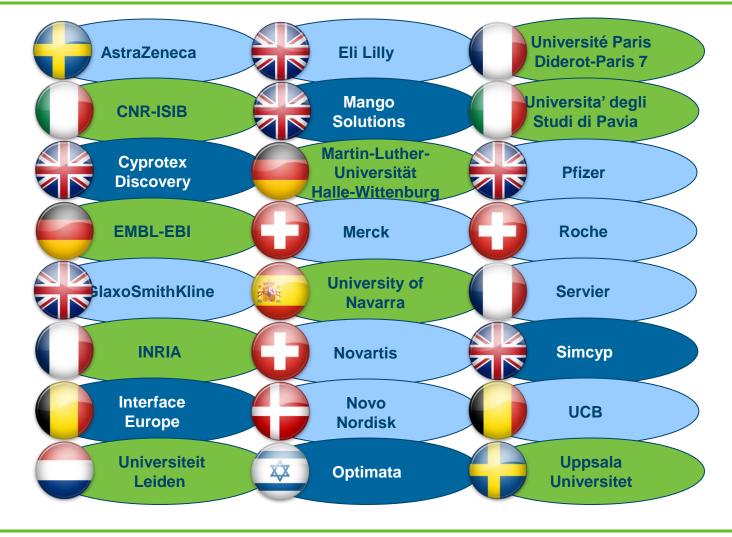
€ 21.165.061

9.820.120



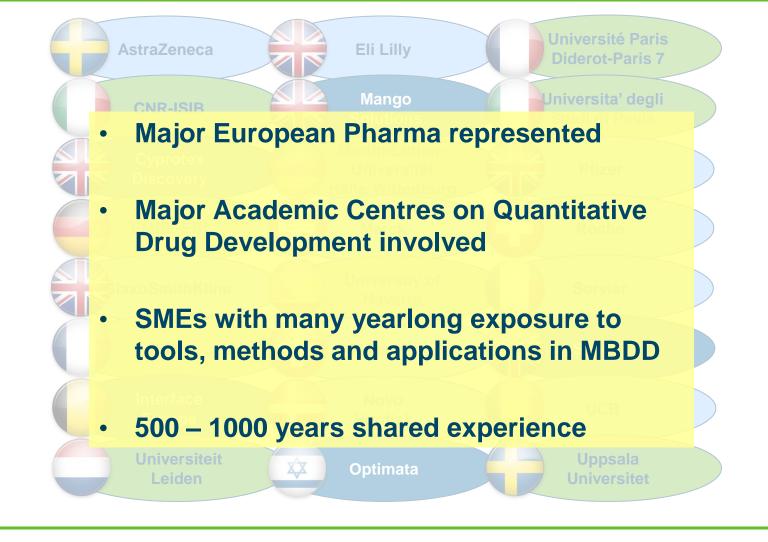
Participants are a unique combination of model builders, model users, software developers and teachers





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Further information



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Project website:

http://www.ddmore.eu

www.imi.europa.eu



The general who wins a battle makes many calculations in his temple ere the battle is fought. The general who loses a battle makes but few calculations beforehand. Thus do many calculations lead to victory, and few calculations to defeat: how much more no calculation at all! It is by attention to this point that I can foresee who is likely to win or lose.

– Sun Tzu

