



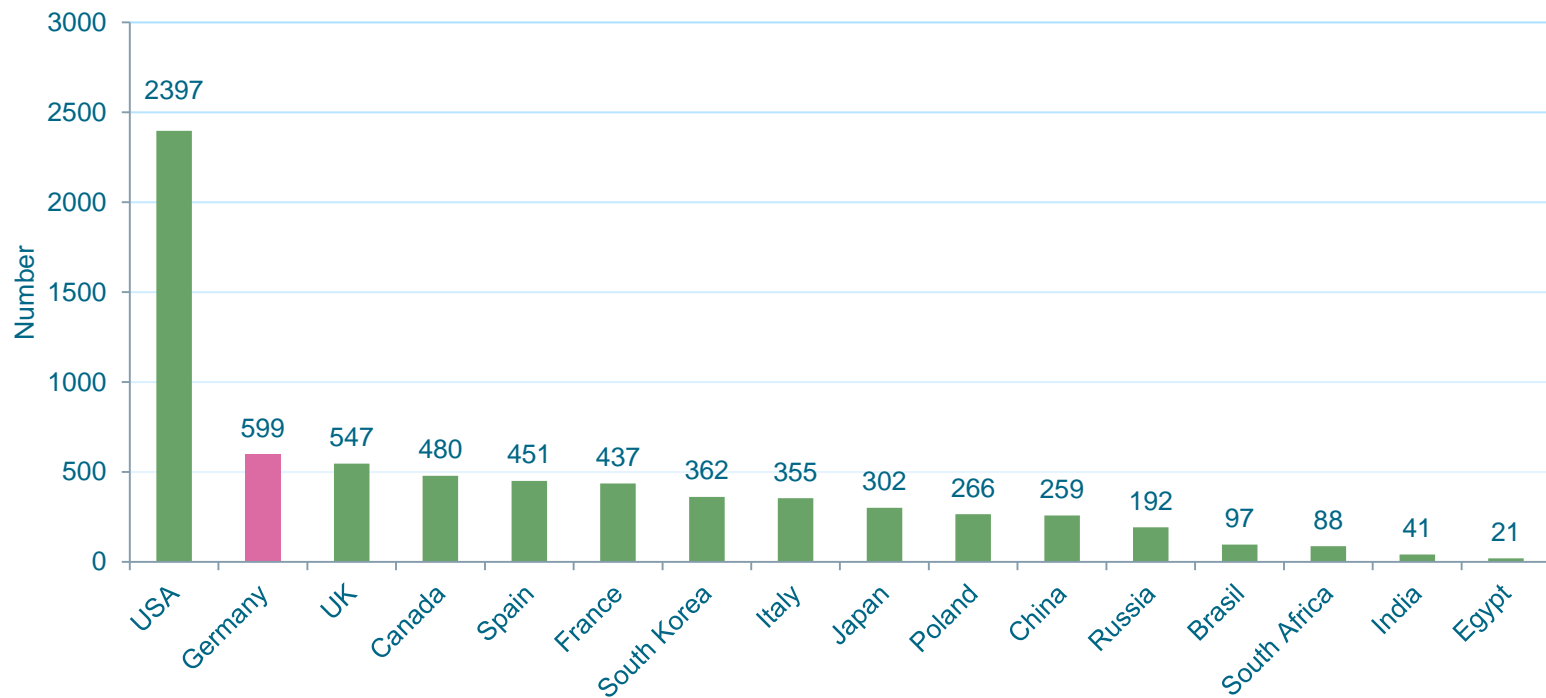
Charité Research
Organisation

Conducting Clinical Trials in Germany: Opportunities for translational research

24th of April 2017

GERMANY: A LEADING COUNTRY FOR THE CONDUCT OF CLINICAL RESEARCH

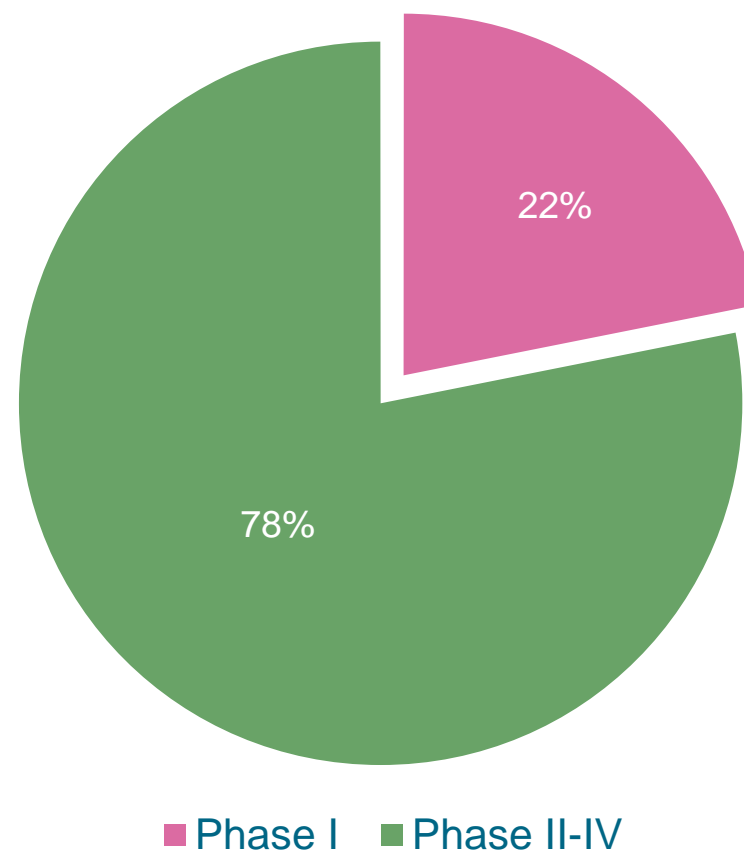
- In 2015, Germany was 2nd in the world for the number of clinical trials performed in the country by the research based pharmaceutical industry



Source: Industry-financed clinical studies based on study registry, clinicaltrials.gov (June 2016)

GERMANY: NUMBER OF CLINICAL STUDIES CONDUCTED

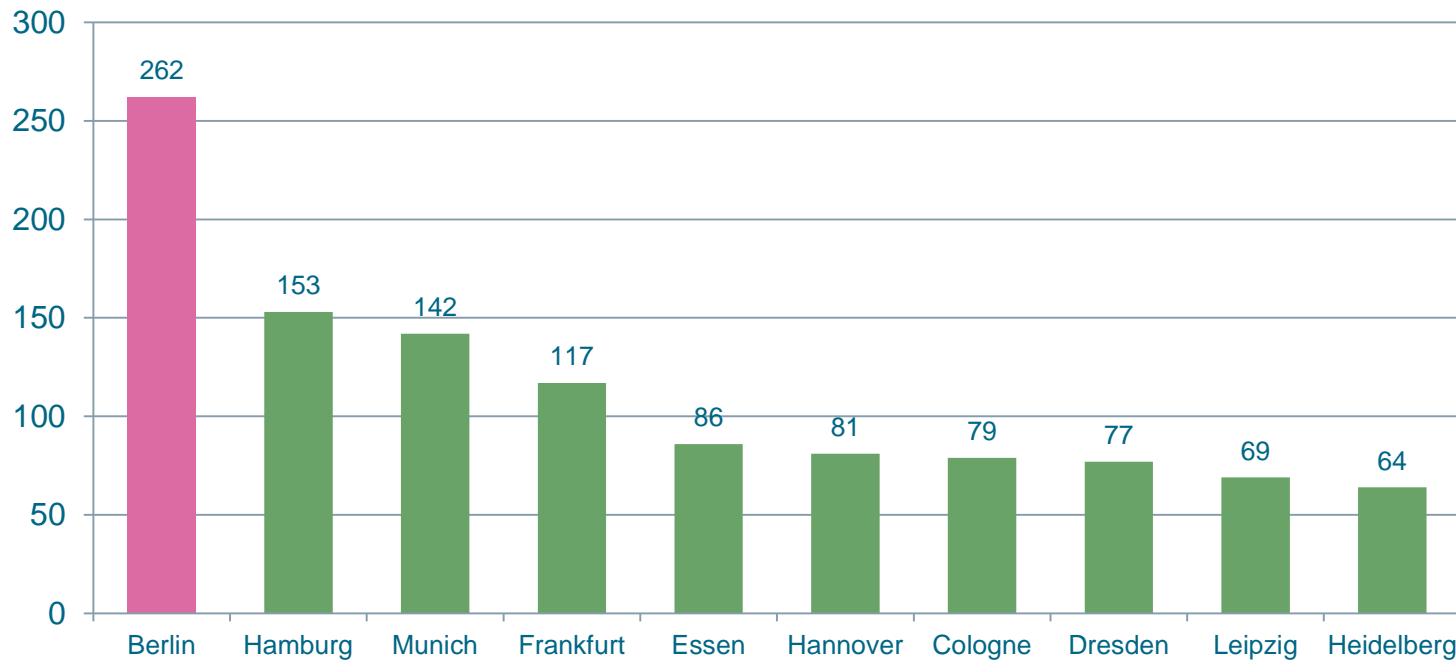
- A total of 599 studies conducted in Germany in 2015
- 131 Phase I studies
- 468 Phase II-III studies



Source: Industry-financed clinical studies based on study registry, clinicaltrials.gov (June 2016)

BERLIN: A LEADING CITY FOR THE CONDUCT OF CLINICAL RESEARCH

- In 2015, Berlin was 1st amongst German cities for the number of clinical trials performed



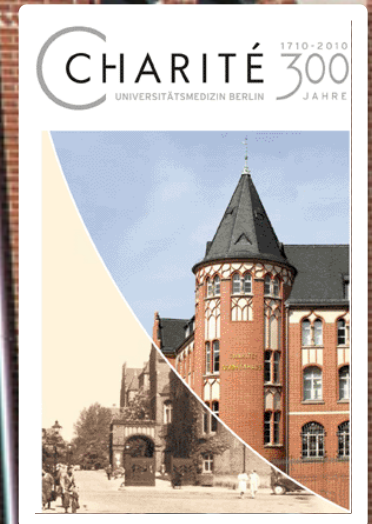
CHARITÉ – UNIVERSITÄTSMEDIZIN BERLIN



Founded in 1710

Largest university hospital in Germany

17 centres with over 100 clinics



CHARITÉ RESEARCH ORGANISATION

CHARITÉ OWNED - OPERATIONALLY INDEPENDENT – SCIENTIFICALLY DRIVEN



Charité Research
Organisation

scientifically driven

Deliver Proof of Concept faster via more effective use of university hospital resources

Phase I/II unit with 30+ beds and a dedicated team of around 100 FTEs and 50 support staff

Facilitate a single center solution for early clinical studies in HVs and patients whenever possible



UNDERSTANDING THE CHALLENGE

Translate pre-clinical results into the clinic as efficiently as possible

Evaluate
safety

Explore
efficacy

Demonstrate
POC

HVs/Patients....Patients....Patients....Patients....Patients....Patients

Faster

REQUIREMENTS FOR EFFECTIVE TRANSLATIONAL CLINICAL RESEARCH



1

Expertise

Medical and scientific staff with extensive clinical background

2

Experience

An in-depth understanding of operational challenges (e.g. high frequency sampling)

3

Facilities and Equipment

State of the art, dedicated, Phase I unit and staff

4

Access to Patients

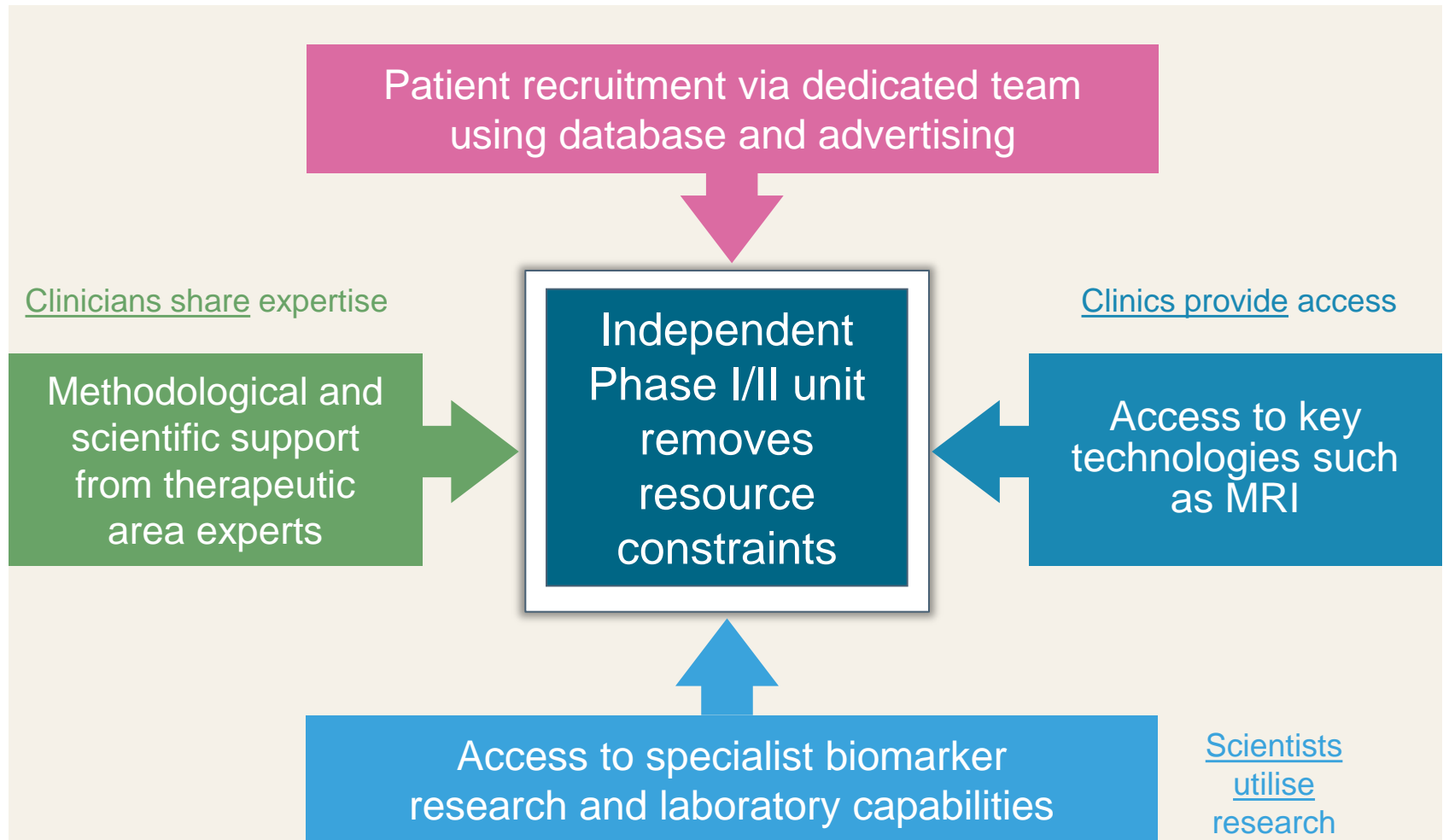
Effective recruitment of HVs and patients

5

Access to Biomarkers

Imaging, other diagnostics and advanced lab capabilities to explore effects in humans

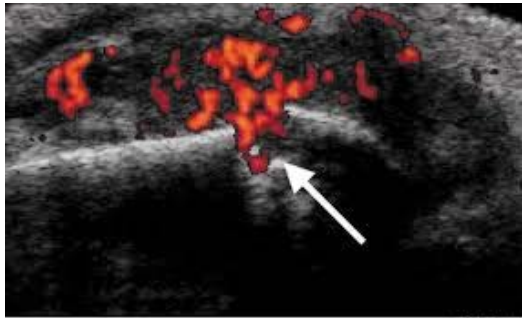
CRO's CENTERS OF EXCELLENCE APPROACH



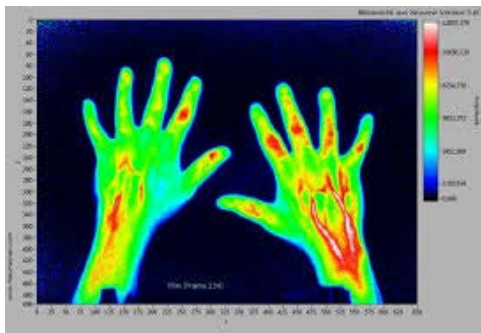
IMAGING CENTER OF EXCELLENCE



MRI with central scoring services,
PD Dr. med. Kay-Geert Hermann



Ultrasound expertise via Prof. Dr. med.
Marina Backhaus, developed US 7 score



Leading the way in use of Florescence
Optical Imaging in rheumatology

BIOMARKER CENTER OF EXCELLENCE

Immunological Study Laboratory (ISL)



Prof. Hans-Dieter Volk
Scientific Director



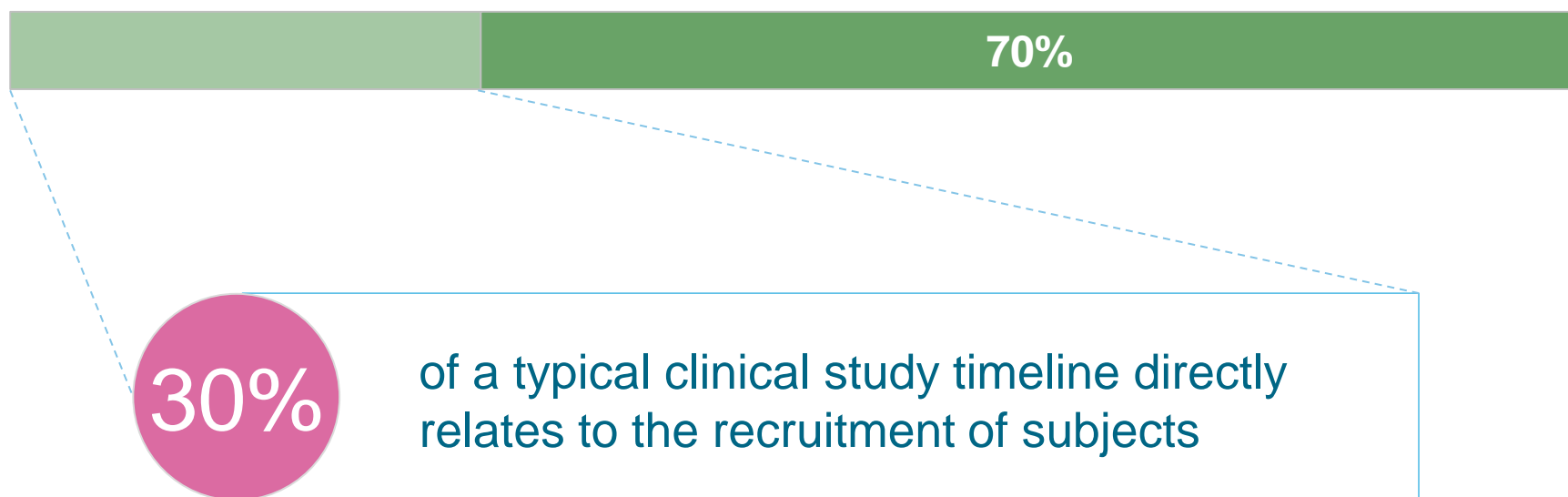
PD Dr. Gerald Grütz
Head of Laboratory

DIN EN ISO 15189
DIN EN ISO/IEC 17025

Off the shelf assays
Transfer and validation of sponsor assays
Research laboratory

10 colour flow cytometer
Hematology analyzer
Multiplex ECL
Multi-analyte ELISA
Multiplex Luminex
ELISA-Reader

EFFECTIVE RECRUITMENT IS CRITICAL TO STUDY TIMELINES



EFFECTIVE RECRUITMENT IS CRITICAL TO STUDY TIMELINES



CHALLENGING THE CONVENTIONAL PATIENT STUDY APPROACH

Patients Enrolled
Per Clinical Site



0 - 5

% of Sites
Contributing Zero
Patients



20-30%

A SINGLE CENTER APPROACH IS POSSIBLE: EXAMPLES

MS:

FTIH study in n=44 progressive MS patients with MRI imaging

Crohn's:

FTIH study in n=60 HV and n=24 Crohn's patients with endoscopy and immunology markers analysed locally

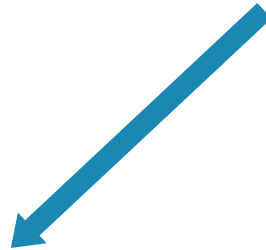
Sjögren's Syndrome

Phase I study in n=27 Sjögren's patients with ESSDAI scoring, salivary flow assessment, gland ultrasound and biopsy.

RA:

FTIH study in n=92 RA patients with DAS28 \geq 3.2 combining SAD i.v., SAD s.c. and MAD s.c. dosing.

CRO RECRUITMENT APPROACH: FACILITATING SINGLE CENTER PATIENT STUDIES



Appeal directly
to the patient



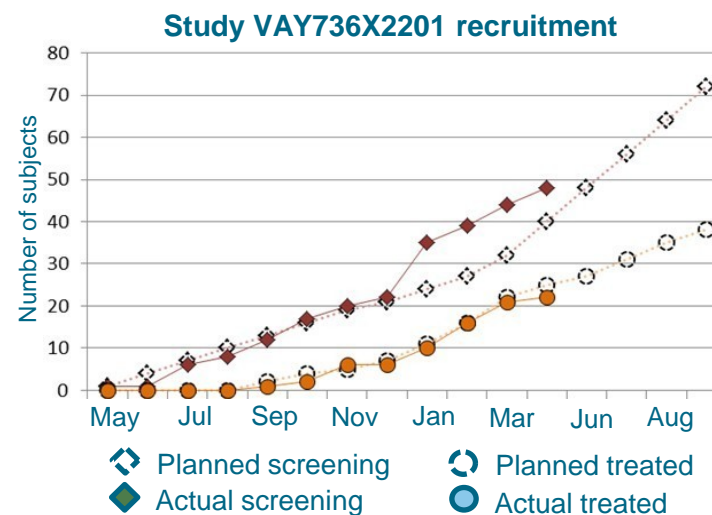
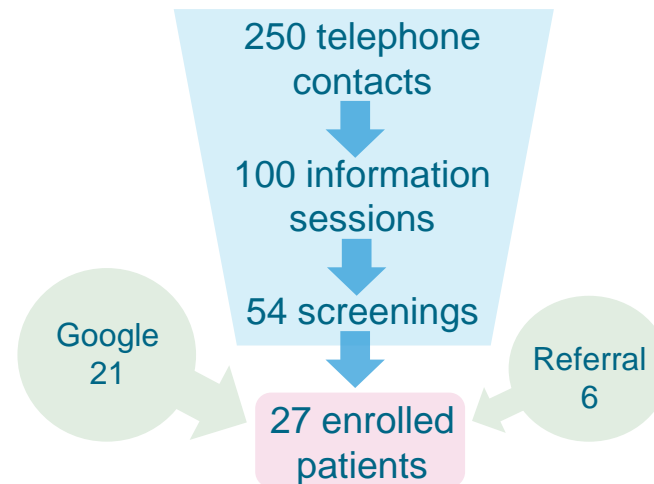
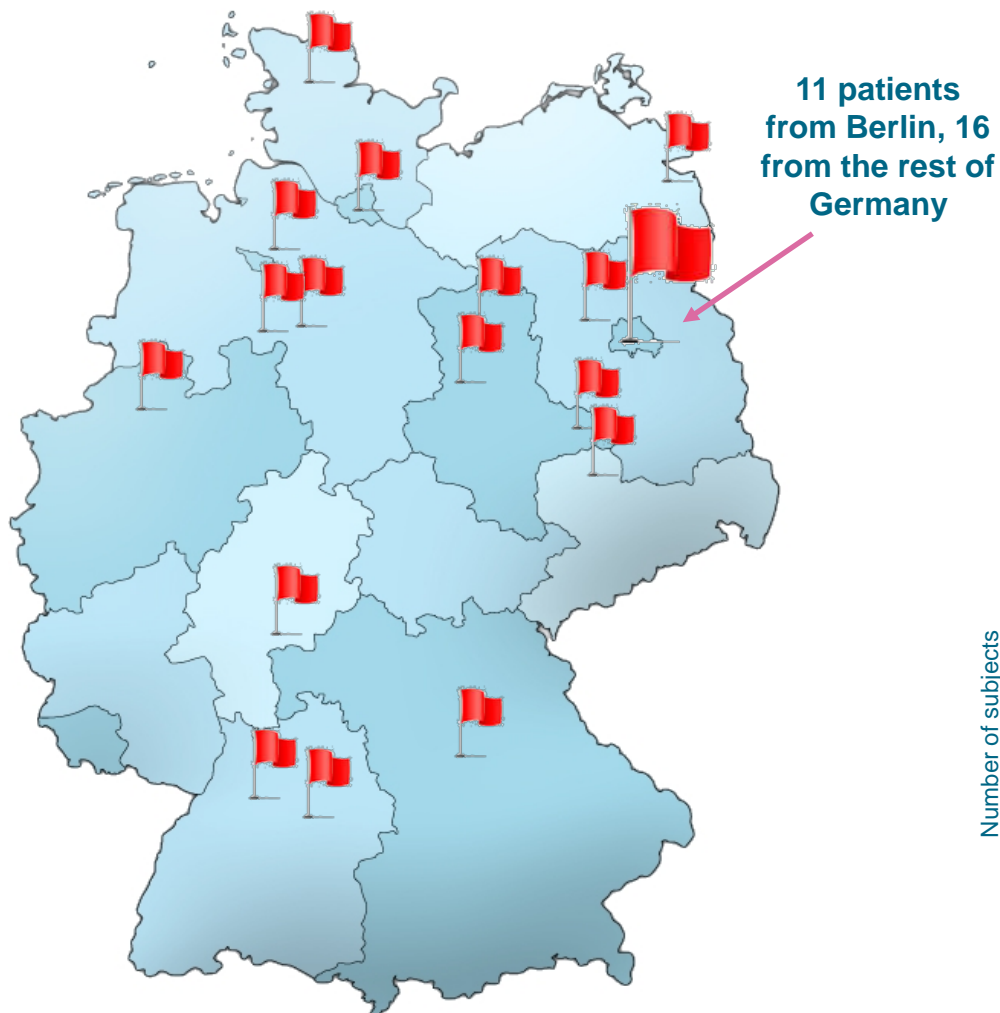
Have the
resources to treat
the patient with
utmost respect



Financially
compensate the
patient properly

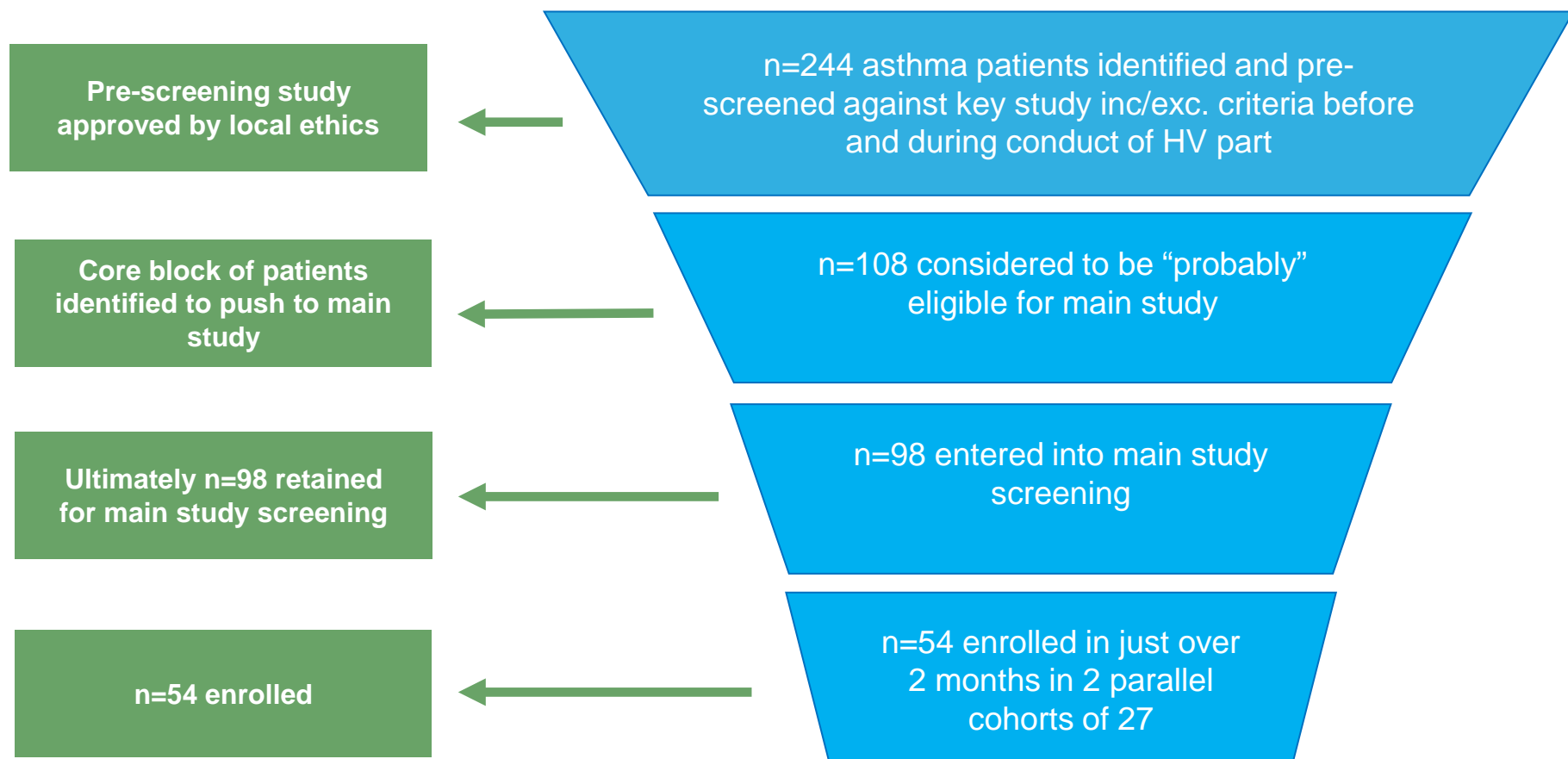
INNOVATION: A NATIONAL SINGLE CENTER

ONE CENTER, GERMAN WIDE SJÖGREN PATIENT RECRUITMENT



INNOVATION: PRE-SCREENING STUDIES

ENROLMENT OF 54 ASTHMA PATIENTS IN TWO MONTHS



REGULATORY FRAMEWORK: Ethics committee

Leading Ethic committee

EC responsible for the so-called LKP (leading PI) is the leading EC issuing a central vote for Germany

Timeline

30 days ethics timeline for single site in Germany, 60 days for multicenter studies

14 day timeline available for Phase I trials if part of a development program.

Submission requirements

According to German drug law and EU regulations.

Patient information, summary of protocol and patient questionnaires need to be in German language

REGULATORY FRAMEWORK: Health Authority

Two Health Authorities

BfArM (Bundesamt für Arzneimittel und Medizinprodukte): responsible for small molecules and medical devices

PEI (Paul Ehrlich Institute): responsible for biological products, vaccines, allergens and more

Timeline

30 to 60 days depending on investigational product (e. g. 60 days for PEI if biologic with human or animal origin)

Open for innovative trial designs

PEI approves very innovative trial designs for early clinical trials (e. g. multipart studies combining healthy volunteers and multiple different patient populations, adaptive designs)

BEYOND PoC – Phase II/III studies in Germany

Large number of qualified clinics and investigators :
41% of the studies initiated in 2015 were Phase III trials

Clinical trial support:

all major contract research organisations are placing late phase studies in Germany for their clients; several local CROs available to support late phase studies

All indications covered:

206 different indications were investigated in Phase II to III in 2015 in a broad variety of indications: 150 x Oncology, 124 x Inflammation (e. g. Asthma, MS, Morbus Crohn), 53 x Infectiology (e. g. Hep C, HIV), 34 x Cardiology

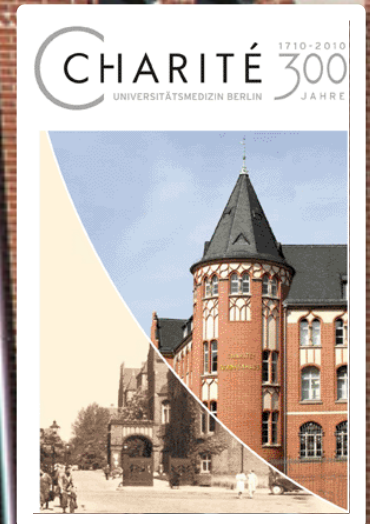
SUMMARY

Germany is 2nd in the world for the number of clinical trials performed

Berlin is 1st amongst German cities for the number of clinical trials performed

Translational Research: A national single center approach is possible

Regulatory framework allowing innovative study designs



“The future depends on what you do today”
Mahatma Gandhi (1869-1948)



THANK YOU!

