# Recommendations to speed up the R&D process in the field of orphan drugs

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## IRDiRC's Objectives for 2020

## 200 new therapies for rare diseases

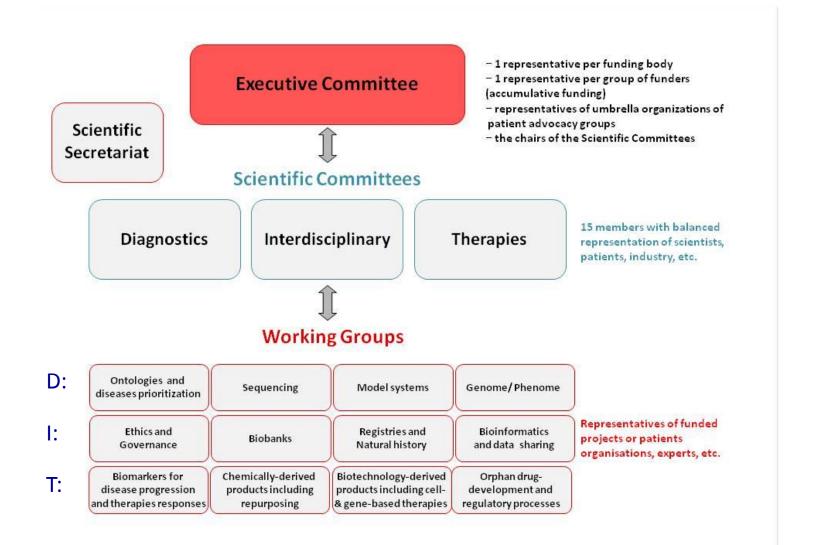


Means to diagnose most rare diseases

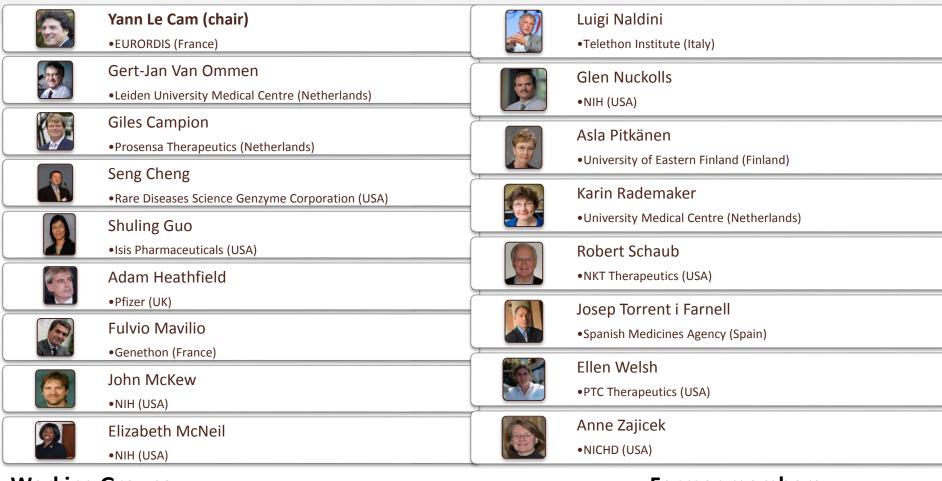




### IRDiRC governance structure



#### **IRDiRC Therapies Scientific Committee (TSC)**



#### **Working Groups:**

- ■Biomarkers for Disease Progression and Therapy Response
- ■Biotechnology-derived Products including Cell- & Gene- therapies
- Chemically-derived Products including Repurposing
- Orphan Drug-development and Regulatory Processes

#### Former members:

- ■Maria Mavris (Eurordis)
- ■Marc Walton (FDA)
- Jack Welch (NIH NCI)

## IRDiRC's Objectives for 2020

## 200 new therapies for rare diseases

#### NEW THERAPIES



Objective 2020: 200 new therapies







#### **TSC** recommendations

- Recommendations for IRDiRC funding organisations
  - Strategic recommendations
  - Criteria for research funding
  - Priorities for research funding
  - Priorities for gap analysis funding
- Recommendations related to regulatory processes
- ► TSC milestones for the next 3 years



# Criteria of selection for recommendations

- Essential actions defined for their highest leverage effect to unlock the potential of rare disease therapy development
- Well-targeted actions with potential to produce results before or by 2020
- Actions identified for their international relevance
- Clarity and flexibility of the actions recommended
- Overall consistency of the set of actions



# Recommendations for IRDiRC funding organisations



### Strategic recommendations

- Prioritization of international collaborative rare disease research and orphan medicine development programmes:
  - Using unique expertise and availability of special resources.
  - With alignment of themes and coordination of the process for calls for proposals in order to optimise funding of collaborative research projects by agencies from several countries.
  - With commitment to sharing and integration of data into existing platforms.



## Criteria for research funding: clinical trials

Mandatory criteria recommended when funding clinical trials:

- Excellence of the scientific rationale, proof-of-concept and development plan
- Preferentially selecting products (not exclusive, preferred / IRDiRC objective of 200 approved therapies in 2020):
  - with an orphan designation from FDA and/or EMA
  - for which the sponsor has received Scientific Guidance from both or either Regulatory Agency
  - For which the sponsor adheres to the guidelines of Good Practice (i.e., GXP).



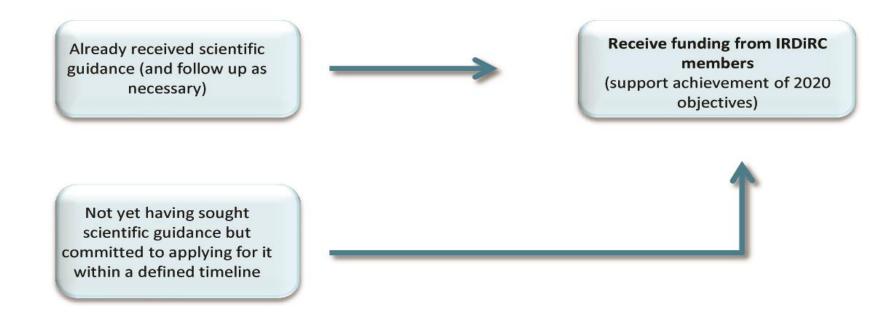
## Criteria for research funding: Non-clinical research

#### Non-clinical work should:

- be highly supported with an adjusted level of funding,
- without the requirement of orphan designation or scientific guidance from regulatory agencies at the time of grant application,
- but with an explicit commitment from the grant applicant to apply for orphan designation in both EMA and FDA or either, and to seek scientific guidance from regulatory agencies in due time.



#### Products at clinical stage with orphan status (EU ± US)



#### Products at non-clinical stage



#### Receive adjusted funding from IRDiRC members

Proof of concept (as per Policy #13) to support plausibility and rationale to seek orphan designation (support an active pipeline)

### Priorities for research funding

- New methodological and statistical approaches for clinical development in small populations.
- Biomarkers and outcomes measures:

  - Development and use of **optimized and standardized technologies** and **assays** for biomarkers to further accelerate overall development.
- ▶ Identification of mechanisms of action for medicinal products with potential for development and identify how they are linked to rare clinical conditions.
- Repurposing/repositioning of medicinal products for their potential in rare indications.

### Priorities for gap analysis funding

- Gap analysis of unmet medical needs that could potentially be addressed by 2020
- Identification of regulatory hurdles
- Analysis of outcomes from previously funded projects in order to understand the reasons of success or failure.
- Assessment of off-label use of current therapies that may be of relevance for the patient needs.
- Survey biomarker and natural history project leaders in order to perform a gap analysis, identify potential clusters of biomarkers by disease and find information on biomarkers used in failed clinical trials.
- Perform a review of the currently funded IRDiRC projects to identify 'clusters' of compounds of the same therapeutic class or by conditions, and to identify gaps that may deserve further discussion.

# Recommendations related to regulatory processes



# Recommendations related to regulatory processes (1)

- Encourage, support and establish early and continuous dialogue on clinical development strategy and wide evidence generation with all relevant stakeholders.
- ► Further develop information, training, dialogue and support among regulatory agencies and sponsors.
- Within the limits of the regional/national laws, develop more guidelines for clinical development of medicinal products for RD.
- Strongly support scientific guidance by regulatory agencies, and encourage more joint scientific advice by regulators.



# Recommendations related to regulatory processes (2)

- Encourage flexibility of regulatory to enable earlier and progressive patient access to medicinal products for those severe diseases without any treatment options.
- Encourage greater harmonization of national/regional regulations in order to ease the burden of rare disease clinical development.
- Encourage, support and develop patient focused/relevant outcomes.
- Encourage better coding/health record search ability as a way to accelerate therapy development and help identifying rapidly and accurately patients/potential trial participants with a particular disease.



# TSC milestones for the next 3 years



