

It's Rare Disease Day today!

Importance of rare disease development and patient engagement

Virginie Hivert EURORDIS Therapeutic Development Director Webinar on Rare World Diseases Day 29 February 2024



TAKE PART IN #RAREDISEASEDAY 2024





WHAT IS RARE DISEASE DAY?

- Taking place on the last day of February
 - This year it will fall on a leap year and will take place on
 29 February 2024
- Started in 2008
- Last year:
 - ✓ 1,300+ events in more than 100 countries
 - ✓ Video translated into 49 languages
 - Translated assets in multiple languages and adapted them to empower you to use in your local context
- This year is the 17th edition
- Continues to grow worldwide with Rwanda joining the campaign for 2024
- Coordinated by EURORDIS Rare Diseases Europe, RDI and
 - **71 National Alliance Partners**





Rare disease development

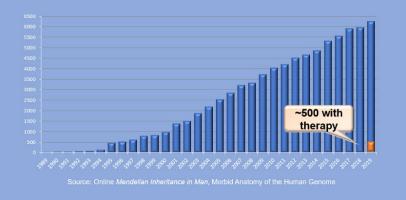
EURORDIS is committed to deliver on 6 priority areas

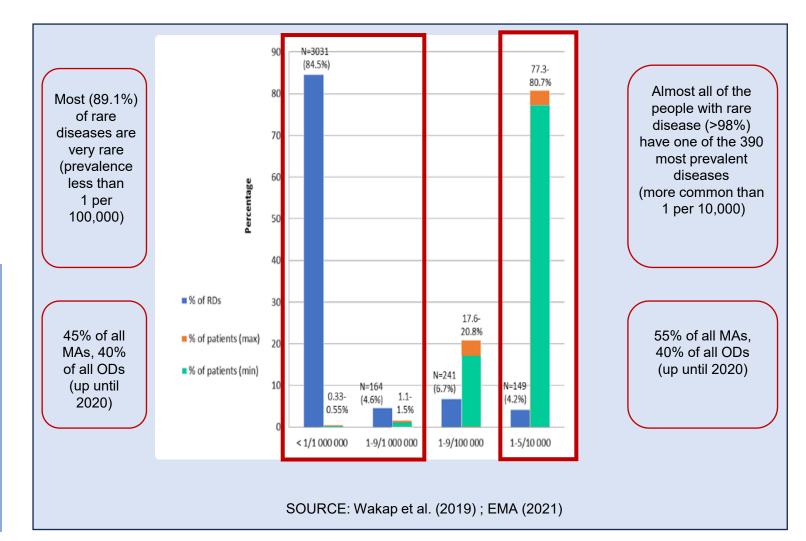
- By 2030, EURORDIS will have made contributions to the goals of (Based on the Foresight Study Rare 2030):
 - Earlier, faster and more accurate diagnosis the goal of diagnosis within 6 months
 - High-quality national and European healthcare pathways, including cross-border healthcare – a goal of improving survival by 3 years on average over 10 years and reducing by one third the mortality of children under 5 years of age
 - Integrated medical and social care with a holistic life-long approach and inclusion in society a goal of reducing the social, psychological and economic burden by one third
 - Research and knowledge development that is innovative and led by the needs of people living with a rare disease
 - Optimised data and health digital technologies for the benefit of people living with a rare disease and society at large
 - Development and availability, accessibility, and affordability of treatments, particularly transformative or curative therapies – a goal of 1000 new therapies within 10 years



Rare disease development

Disorders with known molecular bases





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A tool for developers: the ODDG

nature reviews drug discovery

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COMMENT | 20 April 2020

Boosting delivery of rare disease therapies: the IRDiRC Orphan Drug Development Guidebook

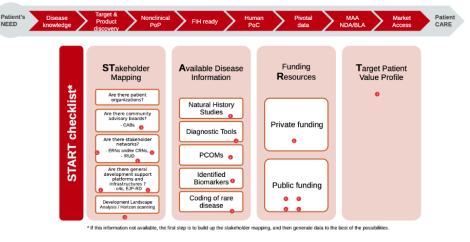
The International Rare Diseases Research Consortium (IRDiRC) has created a Guidebook to facilitate drug development for rare diseases by organizing available tools into a standardized framework.

By <u>Anneliene Hechtelt Jonker</u>, <u>Virginie Hivert</u>, <u>Michela Gabaldo</u>, <u>Liliana Batista</u>, <u>Daniel O'Connor</u>, <u>Annemieke Aartsma-Rus</u>, <u>Simon Day</u>, <u>Ken Sakushima & Diego Ardigo</u> ⊠





How to start your orphan drug development



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https://orphandrugguide.org/

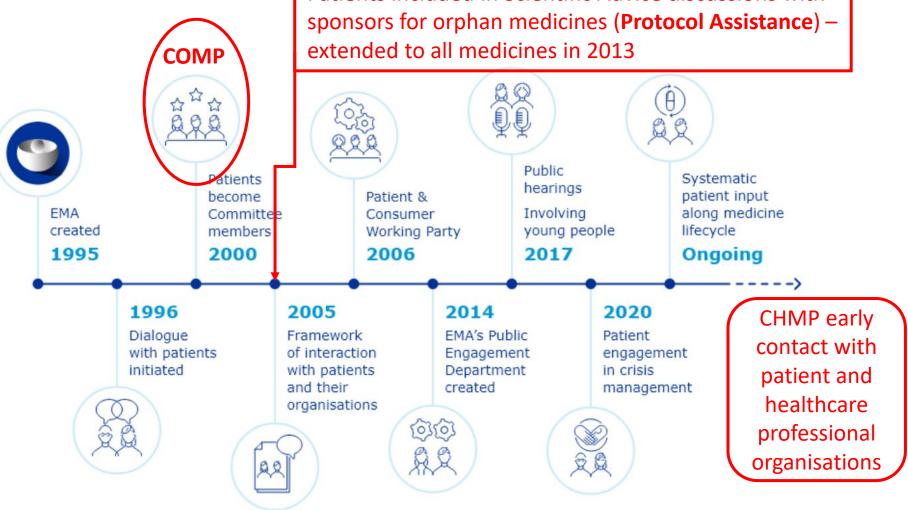
(Tutorial) https://www.youtube.com/watch?v=QMJW85VP3Y8



Patient engagement

Key milestones of EMA interaction with patients and

consumers



Patients included in Scientific Advice discussions with

6



Patient engagement

- EURORDIS works with the **3 patient representatives** on the Committee for Orphan Medicinal Products
- Collaboration to identify PLWRD for Protocol Assistance dossiers requiring patient input + Scientific Advice Groups (SAGs) as well as other activities
- Contribute to CHMP early contact with patient and healthcare professional organisations by getting in touch with Patient Organisations and gathering their input



Questions from our members/patients contacting EURORDIS

- How to contact the EMA? (Protocol Assistance, CHMP early contact, other)
- How to deal with Competing interests? (EMA Policies, PARADIGM recommendations)
- What to do when a product got a MA from the FDA? How to contribute to discussions at the EMA?
- How to share information with the regulators when there are several products in the pipeline? On the market? (e.g. Assessment of significant benefit)
- How to deal with situations where all the clinical programs fail/stop?
- How to contribute on updating guidelines for a specific rare disease?



What we need from the developers

- Invest in ultra-rare diseases and rare diseases with no therapeutic options
- Keep investing in rare diseases with therapeutic options: remaining unmet medical needs, treatments approved for third line which would benefit patients in 1st line (rare cancers)
- Invest in Europe and anticipate on the access requirements (early interactions with HTA bodies and payers)